

# **Correctional Program Officers: Wellness, Safety, and the Responsibility of Rehabilitation**

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## EXECUTIVE SUMMARY

Correctional program officers (CPOs) are non-security staff employed by the Correctional Service of Canada (CSC), who provide programming to people in prison and on conditional release (i.e., parole). In essence, CPOs enact the rehabilitative core mandate of CSC, yet have never been studied. Given many do not even know they exist, nor their role, they are truly the ghosts of rehabilitation. In March of 2022, 1,312 CPOs worked for CSC, striving to motivate and encourage their program participants to develop the skills required for successful reintegration. CPOs, despite their primary rehabilitative function which is the core mandate of CSC, have, to our knowledge, never been before the focus of research on their wellness, experiences, and needs. This lacune in knowledge hinders effectiveness of the support provided to CPOs and thus the support they can provide to their program participants.

We conducted a qualitative study of CPOs (n=102), who are members of the Union of Safety and Justice Employees (USJE). USJE supported the recruitment of participants. We then completed semi-structured interviews, on average each an hour in duration, between June and November of 2023. We applied a semi or half grounded constructivist approach to data analysis.

From this, our findings are extensive, we show how the motivation to become a CPO shaped career entry, then explain the occupational responsibilities given few have true awareness of what the CPO role entails. Most were motivated into the occupation because they hoped to make a difference in people lives and to serve public safety. Yet, many struggled with the lack of awareness and recognition of the CPO role. Programs, however, as offered, were thought to fall short of their mandate as did their own CPO training. Once on the job, the re-certification was a challenge and created stress as well as an administration burden.

CPOs described an overwhelming workload which impaired the meaningful delivery of programs and a valuing from CSC of quantity over quality where program completion felt prioritized rather than depth of learning. Participants voiced experience with distinct subpopulations, including people who identify as Indigenous, sex offenders, transgender individuals. They either worked in communities or institutions. The CPOs who also identify as Indigenous described experiencing additional emotional burdens due to the connections in their work to their own family histories. A notable challenge for the delivery of Indigenous programming was how delivery was hindered by the reliance on Elders to co-facilitate 50 percent of the program which failed to recognize Elders were limited in number, availability, and stamina, despite how integral they are to programming delivery. Some, not all, participants described systematic racism within CSC which they found harmful.

For CPOs doing sex offender-centred programming, some, again not all, felt overwhelmed by the content in criminal records (i.e., profiles, correctional plans, assessments), and largely all were discouraged by program content. Women CPOs working with sex offenders reported more opaque boundaries. They described providing, importantly, support for sex offenders who wanted to engage with a woman CPO facilitator for their program because they felt less judged. CPOs in the community felt unsafe at times, due to the lack of trained security staff, and had to be tremendously flexible because of the schedules and transit challenges their program participants experienced.

The felt hierarchy among correctional employees was also prevalent in shaping CPO experiences. Correctional officers were thought to be most valued, and many CPOs described, at times, tension between parole officers and CPOs, due to their different required certifications yet shared employment classification. CPO experiences during the COVID-19 pandemic created a change in culture, where they felt less connected to each other after in comparison to prior to the pandemic. Thus, the pandemic affected the CPO and program participant relationship, as well as that between colleagues, given the trying experiences with remote and hybrid work. Although many CPOs valued hybrid work, they felt concerned about the ability to continue with such and delivery quality programming. Hybrid work was helpful for report completion, yet when conducting programs, CPOs valued observing non-verbal cues and being in person, which helped to ensure the material resonated. They also felt pressured by management to increase the speed in which they delivered programs, creating near impossible expectations.

CPOs also reported being most harmed by organizational stressors (rather than operational, which were still stressful). CPOs found report writing to be time consuming and the timelines for completion overwhelming. Report writing was described as the most stressful part of the job. CPOs feel pressure from parole officers who rely on their reports and concerned about an organizational culture that valued quantity over quality. They reported completion statistics as more valued than program successes or the wellness of staff and felt pressed to condense programs to fulfil program participant requirements due to tight timelines, which only compromised the quality of the material covered. Simultaneously, CPOs described teaching social skills, English, and communication norms beyond the mandated material, which compromised their ability to advance lessons.

Risk assessment, although not performed by all CPOs, was another organizational stress with operational implications, that some felt unqualified to perform. CPOs described having less opportunities for career advancement than other employees, which was compounded by their workspaces – described as infrastructurally insufficient, antiquated, and lacking opportunities for confidentiality. The result was a feeling of being undervalued. Management was a source of stress where the hierarchical governing of CSC had implications for the environment and work conditions. Some expressed frustration with administrative and bureaucratic processes, feeling unsupported, and even harmed by other employees. Management turnover was stressful too as turnover equated to inconsistent expectations.

Operational Stressors included instances of imminent physical risk, witnessing harms, and using caution to protect program participants from being violated in any form. CPOs reported learned hypervigilance, derived from a need to protect one-self, and had developed strategies for self-protection (i.e., reliance on personal portable alarms, boundary setting, strategic positioning). CPOs are affected by stressors and experience trauma due to the realities inherent to the work. Some described being “haunted” by their work, which could result in burnout, sleep disturbances, or psychological consequence (i.e., emotional exhaustion and symptoms of anxiety, depression or PTSD). Moral harms or even injuries appeared common and the spillover of work into personal realms was omnipresent. However, some evidence suggested select CPOs engaged in practices to maintain their wellness, including variants of self-care. Self-care, for instance, included meditation, physical activities, time with family or animals, among other pass times. Many CPOs were grateful for their colleagues, and some created barriers between their work and home life to

protect from creep in hopes to reduce the impacts of trying work realities on their home lives. Some CPOs were open to external treatment for their health needs but most preferred therapists familiar with their work environment (who were rather rare). Despite their awareness of CSC resources, CPOs felt they had less services than colleagues in security roles and were relatively unaware of how to effectively access resources or even, sometimes, what resources exist.

Overall, our findings lead us to propose considerations (see below) for potential implementation, which, we hope, can best support the health of CPOs and, in consequence, the effectiveness of the programming CPOs facilitate at CSC. We, in the current report, nuance the tension between the aspirational framework of CSC and the operational realities, which we hope our work here helps to unify.

## **CONSIDERATIONS**

### **1.1 For Recruitment, Training, and Retention**

1. CPOs have earned recognition from the public and the CSC yet have little. Further, recognition will help CPOs feel valued, which has implications for recruitment and retention as both are strained because people do not know CPOs exist. To support retention, potential CPOs must be exposed to prisons prior to starting in the role, and trained in the realities of program facilitation, so they have some understanding of the environment in which they will be working.
2. Invest in staff development through continued education, mentorship, and training, including in technology, digital literacy, advanced education, assessment administration, and facilitation skills, which will support both effective program delivery and CPOs' promotional goals.
3. Strive to better integrate participant needs during intake, case assignment, and program delivery by, for example, building systems to ensure program participant-CPO relational compatibility when assigning people to programs. This means developing clearer policies on how to assign program participants to a program facilitator, which may require separating participants based on readiness, risk and needs profiles, English language proficiency, grade level, etc. to ensure program group cohesion. Further, when assigning people to programs, ensure CPOs have the capacity to meet their program participants needs (i.e., assign fewer if needs are higher, recognizing the changes in the program participant population).
4. Support CPO discretion in program delivery by enabling facilitators to adjust language, pacing, and delivery for optimal psychological safety, comprehension, and relevance, without compromising program fidelity.
5. Incorporate experienced CPOs into curriculum design, try program co-design and consider adopting scenario-based learning models that reflect the unpredictable elements of program delivery into CPO training.
6. Reevaluate the need for the current certification process and reenvision what is necessary.

Are recorded evaluations, which many CPOs described as “demeaning,” required? Can facilitation flexibility, to accommodate participant needs (e.g., literacy, language, grade level), be considered and valued accordingly? With any facilitator assessment, ensure feedback loops are crisp and timely, which can help reduce certification stress by reducing wait times for feedback.

7. Revise performance metrics to value both quality and quantity, this means recognizing and accessing the growth and comprehension of program participants and prioritizing such over completion rates. Thus, consider delivering programs at the pass of program participants (which may be slower in pace) rather than to adhere to standardized timelines tied to metrics and include qualitative indicators of successful completion, such as program participant and facilitator feedback, changes in classroom behaviours (e.g., more engagement).
8. Considering training and enabling CPOs to be reflective and to adjust program delivery, thus allow for discretion, responsiveness, and autonomy during program facilitation to optimize opportunities for CPOs to develop relationships and rapport with program participants, which will best meet their needs and support their re-entry.
9. Reconsider timelines tied to report writing, thus ensure CPOs have the time and capacity to provide depth in their reports, including their documentation of their program participants' development. This means recognizing the changing complex and interrelated needs of the population in prisons and on release, and ensuring CPOs can work with these program participants to try to meet their needs, which may take variable time and require flexibility, patience, and even a reduction in the number of people in each program offered.
10. Ensure CPOs have access to confidential spaces (i.e., offices instead of shared cubicles) to meet with program participants and to complete their reports (i.e., quiet spaces that are comfortable where they can focus). If they do have access to confidential spaces, and if deemed appropriate and desired by the CPO, consider remote work one or two days a week for report writing as necessary.

## **1.2 For Specific Populations in Programs**

1. Consider diverse advisory and oversight panels in the redevelopment of program curriculum (i.e., include CPOs, Indigenous, Women, Transgender individuals) across regions and security levels. This means doing authentic community engagement, which is not just to include a representative or individual but to engage the community more broadly.
2. Increase awareness of the complexities (empowered versus limitations) experienced by men, women, and gender diverse individuals who deliver programs to diverse populations (including vulnerable and marginalized populations) and create supports for all based on unique needs (i.e., gender-informed boundary creation and maintenance).

### **1.2.1 Programming for People who Identify as Indigenous:**

3. Recognize the emotional labour involved in providing Indigenous (and other specialized) programs, given, for example, shared histories of trauma, for ICPOs and Elders, who must support each other and the program participants.
4. Co-design and re-envisioned program curricula with Elders and Indigenous knowledge keepers to ensure programming is both culturally grounded and practically feasible for facilitators. This includes reassessing program structures to reduce Elders' time commitments where appropriate to ensure sustainability, respect for and recognition of the value of Elder-involvement, and, as a result, enhancing the quality of Indigenous-led programming.
5. Sensitize others living, visiting, or working in prisons on the diversity of Indigenous populations and bands, to help all better support Indigenous programs, participants, facilitators, guests, Elders, and others. This can also help reduce stigma and discrimination tied to a lack of knowledge because all will learn more about the need of people who identify as Indigenous as knowledge can reduce ignorance and build understanding.

### **1.2.2 Programming for People Convicted of Sex Offenses**

6. Recognize, within work environments, the complexity of working with SOs to reduce CPOs', who delivery such programming, isolation and the stigma tied to their work.
7. Increase efforts to ensure the safety of SOP participants by acknowledging the hierarchies among SOs, among prison populations more broadly, and strive to reduce the challenges the SOP facilitators must navigate (i.e., risks to program participants as well as those to program facilitators).
8. Consider more in-depth training for SOP delivery, not just the content, the training must take from clinical sexology and strive to produce an understanding of how to make SOPs effective (without causing the CPO harm).

### **1.2.3 Programming for People who Identify as Gender Diverse**

9. Consider the unique needs of each transgender program participant to ensure their risks and needs are addressed through programming in ways suitable to their institution of residence and security level and that align with their conviction and gender history.

## **1.3 For Managing Occupational (i.e., Organizational and Operational) Stress**

1. Implement measures to ensure Community CPOs (CCPOs) are safe when delivering programs, particularly given the flexible hours they hold to help their program participants complete their programs according to timelines. This can mean CCPOs provide programs in the evenings or after business hours. Safety is essential and can be improved with training in self-defence, arrest and control, de-escalation and communication skills, as well as community-specific program delivery. Ensure CCPOs have immediately reachable support if a situation is to arise.
2. Ensure CPOs are aware of the unpredictable nature of correctional environments and

trained (see above) to protect themselves from harms, including when to report threats and perceived potentially troubling situations. PPA must be mandated to always be within arm's reach and CPOs must all know and be comfortable using security protocols.

3. Foster 'teamliness' or the capacity for collaboration and mutual support (thus reducing gossip and toxicity) by organizing retreats and interprofessional workshops for CPOs (including mixed with other correctional staff) to build shared understanding, strengthen relationships, and promote collective efficacy. A conference or travel stipend that is annual but can be accumulated over years could help encourage participation.
4. Consider increasing the focus on kindness, empathy, and listening between colleagues, other employees (including bi-directionally with management and supervisors), and those in their care to reinforce the provision of mutual support, thus reducing gossip, and enhancing compatibility, appreciation of others, and compassion.
5. Ensure CPOs staffing levels meet program delivery needs (i.e., reduce understaffing), which also ensures program integrity. Specifically, staffing models must align with realistic caseloads and session delivery expectations.
6. Provide mentorship and support to CPOs while also creating opportunities for co-facilitation of programs and joint problem-solving (including with parole officers) to encourage and support teamliness. Practices here may include creating shared learning spaces (i.e., for parole officers, managers, and CPOs) or collective decision-making opportunities where all involved in the case are heard. Thus, strive to improve the working alliance between case management teams and broader staff.
7. Formalize referring to participants in programs as "learners" or "program participants" to reduce the continued imposition of a criminalized identity in official documentation, orientations, and programs. This may help reduce stigma and support rehabilitative needs.
8. Ensure CPOs have the required material resources to deliver programs, including adequate classrooms (i.e., lighting, temperature, ventilation, space) to ensure all can pay attention to the material rather than feel strained due to physical factors in the space.
9. Supporting CPOs in creating healthy boundaries that ensure safety at work (i.e., in the classroom, with other staff if necessary) and in the community, to reduce tendencies toward hypervigilance and becoming over-protective of loved ones. This includes training on social media in privacy settings.

#### **1.4 For Social, Physical, and Psychological Health**

1. Provide CPOs training for recognizing and respond to their own and others' mental health needs, including trauma-informed approaches for both program participants and colleagues. This should include education on coping strategies (e.g., dark humour, boundary navigation), mental health disorders, physical and social health, moral harm, distress, and injury, and diverse forms of trauma exposures. This includes acknowledging cumulative and single-event trauma, indirect exposures etc. without creating a hierarchy or

judgement and instead supporting growth post incident(s).

2. Provide clinical support beyond the Employee Family Assistance Program (EFAP, which may report dissatisfaction with) for all CSC employees to help with the changes to self and health too often reported by correctional staff, including CPOs. People can change when working in correctional services and all need more effective tools to help manage these changes. Support providers must be knowledgeable of correctional services, programming delivery, and should have specialization in adversity and trauma recovery. An in-house clinical support person would be optimal as their knowledge of correctional services, the specific institution served, and rapport with staff will build with time as their presence becomes normalized.
3. Consider mandatory annual psychological assessments (i.e., a Safeguard Program) for CPOs facilitating SOPs. Given Safeguard is obligatory for police officers working in internet child exploitation and other such units where sexual abuse is being investigated, and SOPs are working with the same population aware of the same crimes this oversight requires remedy.
4. Ensure CPOs are aware of available programs at CSC to support their health (i.e., mental, physical, social) and are included and even appropriately targeted in mental health and wellbeing strategies. Consider offering self-care and health-supporting opportunities at work like for fitness, yoga at lunch, lunch and learns (i.e., teaching sleep strategies or creative packed lunches and nutrition), and social events to reduce isolation. An idea here is to have all employees support a healthy recipe for a CSC “cookbook” or a self-care strategy for a CSC “health book.”
5. Consider including CPOs, when appropriate, in post-incident debriefing to support coping with taxing and haunting interactions, and ensures CPOs are aware of the behaviours, thus needs, of their program participants which they can then target in programs.
6. Provide supports to CPOs who require long or short-term leave through insurance boards to help CPOs navigate organizational process, fill out forms, etc. to ensure they receive the help required.
7. Create conditions supportive of safe disclosures regarding health needs for support (mental health or social health needs, specifically). Include policies to protect CPOs from perceived retaliation and, instead, to be accountable and advocate with support for their own health. This includes recognizing the spillover effects of their work on their families and may require CPOs to have opportunities to rotate out of diverse program delivery periodically for reprieve, which could support their health.

## TABLE OF CONTENTS

<b>1</b>	<b>INTRODUCTION</b>	<b>11</b>
<b>2</b>	<b>LITERATURE REVIEW</b>	<b>11</b>
2.1	NON-SECURITY PRISON WORKERS .....	12
2.2	TEACHERS .....	13
<b>3</b>	<b>METHODS</b>	<b>14</b>
3.1	PARTICIPANT INFORMATION .....	15
3.1.1	<i>Table 1 – Participants’ Gender</i>	15
3.1.2	<i>Table 2 – Participants’ Age</i>	15
3.1.3	<i>Table 3 – Participants’ Racial Identification</i>	16
3.1.4	<i>Table 4 – Participants’ Level of Educational Attainment</i>	16
3.1.5	<i>Table 5 – Job Role</i>	16
3.1.6	<i>Table 6 – Years of CSC Experience</i>	17
3.1.7	<i>Table 7 – Region of Employment</i>	17
<b>4</b>	<b>RESULTS</b>	<b>17</b>
4.1	MOTIVATION.....	17
4.1.1	<i>Drift and Making a Difference.</i>	17
4.1.2	<i>Awareness and Recognition</i>	18
4.2	THE CPO JOB REQUIREMENTS .....	19
4.2.1	<i>Educational Requirements</i>	19
4.2.2	<i>Training</i>	19
4.2.3	<i>The Certification Process</i>	20
4.3	WORKLOAD AND JOB TASKS: THE STRUCTURE OF PROGRAMS AND THE CPO OCCUPATION.....	22
4.3.1	<i>Types of Programs</i>	22
4.3.2	<i>Pre-program</i>	23
4.3.3	<i>Prior to Program Delivery</i>	23
4.3.4	<i>In program</i>	24
4.3.5	<i>Program Delivery Variations by Security Classification.</i>	24
4.3.6	<i>After program</i>	25
4.4	CPOS’ INTERPRETATIONS OF PROGRAMS: A CONTEXTUAL SNAPSHOT .....	25
4.5	EXPERIENCES OF DISTINCT OCCUPATIONAL SUBPOPULATIONS .....	26
4.5.1	<i>Indigenous Correctional Program Officers</i>	26
4.5.2	<i>The Emotional Burden</i>	27
4.5.3	<i>Challenges with Elder Involvement</i>	28
4.5.4	<i>Lack of Cultural Support or Understanding for Indigenous Programs</i>	30
4.5.5	<i>Political Responsivity</i>	30
4.5.6	<i>Community Correctional Program Officers</i>	31
4.5.7	<i>Occupational Safety</i>	32
4.5.8	<i>Respect or Recognition</i>	32
4.5.9	<i>Social Program Officers</i>	33
4.6	CONSIDERATIONS ABOUT DIVERSE SUB-POPULATIONS.....	33
4.6.1	<i>Challenges Working with Sex Offenders (SOs)</i>	33
4.6.2	<i>Transgender Prisoners and Programming</i>	41
4.6.3	<i>CPO Gender</i>	43
4.7	COVID-19 PANDEMIC .....	46
4.7.1	<i>Managerial Pressure About the Speed of Programs</i>	47
4.7.2	<i>Relationships with Clients and Colleagues</i>	48
4.7.3	<i>Remote and Hybrid Work</i>	49
4.8	ORGANIZATIONAL STRESSORS.....	50
4.8.1	<i>The Organizational Culture</i>	50
4.8.2	<i>Report Writing</i>	50
4.8.3	<i>Specific Programs with Additional Administrative Burden</i>	52
4.8.4	<i>Quantity over Quality</i>	53

4.8.5	<i>Teaching more than Program Curriculum</i>	55
4.8.6	<i>Human Resources &amp; Understaffing</i>	57
4.9	RISK ASSESSMENT .....	59
4.9.1	<i>Risk Assessment Limitations</i>	59
4.10	LACK OF MATERIAL RESOURCES AND OUTDATED SUPPLIES .....	60
4.10.1	<i>The Physical Environment</i>	60
4.10.2	<i>Insufficient Workspace</i>	61
4.10.3	<i>Office Space</i>	62
4.10.4	<i>Technology</i>	62
4.10.5	<i>Remote Work</i>	63
4.11	MANAGEMENT AND MANAGERIALISM .....	63
4.11.1	<i>Process and Injustice</i>	63
4.11.2	<i>Supervisors as Direct Reports</i>	65
4.11.3	<i>Senior Management</i>	66
4.11.4	<i>Work Relationships</i>	68
4.12	OPERATIONAL STRESS & HAZARDS .....	69
4.12.1	<i>Imminent Risk</i>	69
4.12.2	<i>Increase in Violence</i>	71
4.12.3	<i>The Realities CPOs Witness</i>	71
4.12.4	<i>Safekeeping Strategies</i>	72
4.12.5	<i>Boundary Setting</i>	73
4.13	BURNOUT AND EFFECTS OF OCCUPATIONAL STRESSORS .....	82
4.13.1	<i>Accumulation of Exposures to Trauma and Stressors</i>	82
4.13.2	<i>Impact of Trauma and Work-Related Stress on Sleep</i>	88
4.13.3	<i>Spillover into Family Life</i>	88
4.14	CPO HEALTH AND WELLBEING .....	89
4.14.1	<i>The Physical Consequences</i>	89
4.14.2	<i>The Psychological Consequences</i>	90
4.14.3	<i>Moral Injury</i>	91
4.15	HOW PROGRAM OFFICERS TAKE CARE OF THEMSELVES .....	93
4.15.1	<i>Self-Care as Feeling Whole</i>	93
4.15.2	<i>Consulting Mental Health Resources</i>	95
4.15.3	<i>Acknowledging Mental Health</i>	98
<b>5</b>	<b>CONSIDERATIONS</b>	<b>100</b>
5.1	RECRUITMENT, TRAINING, AND RETENTION .....	<b>ERROR! BOOKMARK NOT DEFINED.</b>
5.2	SPECIFIC POPULATIONS IN PROGRAMS .....	<b>ERROR! BOOKMARK NOT DEFINED.</b>
5.3	MANAGING OCCUPATIONAL, ORGANIZATIONAL AND OPERATIONAL STRESS .....	<b>ERROR! BOOKMARK NOT DEFINED.</b>
5.4	SOCIAL, PHYSICAL, AND PSYCHOLOGICAL HEALTH .....	<b>ERROR! BOOKMARK NOT DEFINED.</b>
<b>6</b>	<b>CONCLUSIONS</b>	<b>106</b>
<b>7</b>	<b>REFERENCES</b>	<b>108</b>

## 2 INTRODUCTION

Correctional worker occupations are riddled with stress. Due to the unique challenges, conditions of work, and dilemmas correctional workers experience, which include working with vulnerable people, exposure to violence, and physical and psychological trauma, research reveals correctional work tends to be more stressful when compared to other occupations (Armstrong & Griffin, 2004; Cheek & Miller, 1983; Finney et al., 2013). While there is research on the occupational experiences and mental health of correctional officers (COs), given security staff are typically the largest occupational group in correctional systems (Larivière, 2002), fewer researchers have examined the experiences of prison workers in non-security roles (e.g., program officers, parole officers, chaplains). This constitutes a notable absence, given these frontline staff work in the same environment and face some of the same occupational challenges (with less defensive training) as their security counterparts. Yet, we are unaware of research specifically examining the occupational experiences, let alone health, of correctional program officers (CPOs) employed in Canada's federal correctional service – Correctional Services Canada (CSC).

Given the fundamental the role of non-security staff for operations and to achieve in any way a correctional service's mandate of rehabilitating prisoners, as well as the limited research focus on their experiences, our first purpose with the current study is to summarize the state of scholarly research on the occupational experiences, mental health, and well-being of CPOs, referring to staff who deliver correctional programs to people who are incarcerated. The CPO role is to “motivate and encourage offenders along the path to successful reintegration” (Correctional Service of Canada, 2022, para. 21). Our review of literature will provide some evidence for focusing our research on the experiences of CPOs. Our second purpose was to study the occupational experiences, including of organizational and operational stress, of CPOs under the employ of CSC. CPOs are part of the case management team for people in custody and those on parole. They share knowledge regarding a prisoner's accountability for their action and their progress. Their duties involve: implementing correctional plans; identifying risks (and needs), as well as associated programs intended to help reduce the risk of re-offense; teaching skills to support re-entry; preparing classes; grading the program participants work; and assessing their attitudes, degree of accountability, and progress, while also documenting their performance (and maintaining their CPO certification) (Correctional Service of Canada, 2022).

## 3 LITERATURE REVIEW

### **Contextualizing CPOs in the Correctional Service of Canada**

As of March 2022, there were 1,312 Program Staff working for CSC, either in correctional institutions (n=990), community settings such as Community Correctional Centres (CCCs) or parole offices (n=257), or regional or national headquarters (n=65). Together, these 1,312 Program Staff account for 7.5% of CSC's workforce (Public Safety Canada, 2023). CSC (2022) identifies three types of CPOs: correctional program officer (CPO), Indigenous correctional program officer (ICPO), and social program officer (SPO). In this report, we use CPO when referring to program officers in general and make distinctions of ICPO and SPO as well as Community correctional program officers (CCPOs) when appropriate. Generally, CPOs form part of an incarcerated persons' case management team, which works directly with their program participants to deliver

correctional programming (e.g., substance abuse programs), provide support and encouragement, and assess progress toward correctional plan goals. ICPOs have similar duties, however, they work exclusively with individuals enrolled in Indigenous programs and ensure programming is culturally sensitive and meaningful. SPOs, on the other hand, deliver a range of social and cultural programs geared toward the eventual reintegration of incarcerated people into their communities (CSC, 2022). CCPOs deliver programs in the community, rather than in prisons.

### **3.1 Non-Security Prison Workers**

Studies on prison staff in non-security roles have focused on chaplains, teachers, and institutional parole officers. Also relevant are studies on prison volunteers who, despite not being paid employees, perform labour in the same workspaces as correctional staff. Although focused on COs, Farkas (2000) provides a typology for understanding the professional orientations of prison staff and their correlation to certain stressors and motivations. Particularly two of the CO archetypes identified by Farkas (2000), “people worker” and “synthetic officer,” were associated with valuing reason, good judgement, and interpersonal skills when resolving conflicts with an incarcerated person, rather than authoritarian approaches. Further, COs fitting the “people worker” or “synthetic officer” type were more likely to value their work because of how challenging and interesting they found their occupational responsibilities. Although focused on COs, the “people worker” and “synthetic officer” typology items offer insight into how other correctional staff might foster similar sentiments in their work and, in turn, how those sentiments might mediate occupational stressors and outcomes such as stress, role conflict, and job satisfaction.

To this effect, Hepburn & Knepper (1993) found human service workers in correctional work had higher rates of job satisfaction than COs due to the intrinsic rewards they received from their work and because they experienced less role strain. From these findings, certain discrepancies in job satisfaction and other occupational stressors between COs and non-CO workers can be attributed to factors such as the type of work performed, the intrinsic rewards prison staff receive from and value in their work, and differences in role-related problems experienced by COs (Dowden & Tellier, 2004; Hepburn & Knepper, 1993). In addition, certain correctional attitudes possessed by prison employees (e.g., rehabilitative views over custodial views) have been shown to mitigate job stress and enhance job satisfaction (Dowden & Tellier, 2004; Liou, 1995). Despite the limited research on these factors as they pertain to non-security correctional workers, these trends in occupational stress consistently recur across various correctional job types, and hence, are not mutually exclusive to COs.

While research on occupational stressors for non-security correctional workers is sparse, the literature on health and mental health outcomes for this occupational group is even more limited. The most comprehensive study on the prevalence of mental health disorders across different correctional workers comes from Ricciardelli et al. (2024), who examined the variance in PTSD, major depressive disorder, and general anxiety disorder (among other disorders) across an array of institutional and community correctional workers (which included program officers, social workers, teachers, counsellors, and administration). According to their findings, prevalence of mental health disorders among correctional workers neared 60%. The Carleton et al. 2020 study, which stratified their sample of Ontario provincial correctional workers by occupation, revealed training and program-oriented correctional staff screened positive for at least one mental health

disorder at a prevalence of 50%. While correctional officers (COs) reported greater prevalence of mental health disorders—34% for PTSD, 40% for major depressive disorder, and 32% for general anxiety disorder—institutional training staff exhibited a similar, though somewhat lower, prevalence: 19% for PTSD, 29% for major depressive disorder, and 21% for general anxiety disorder (Carleton et al., 2020). Despite some limitations in scope and generalizability, these findings show non-security correctional workers share similarities with COs in their prevalence of mental health disorders. Thus, evidencing a need for future research to rigorously examine correctional workers and expand studies beyond COs to include other correctional occupations. In the next section, we review the existing literature on prison teachers, given their shared role in facilitating learning with CPOs.

### **3.2 Teachers**

Correctional teachers share notable parallels with and distinctions from COs and CPOs. Similar to trends in stress and worker turnover observed with COs (Castle & Martin, 2006; Dignam et al., 1986; Dowden & Tellier, 2004; Lambert et al., 2005; Schaufeli & Peeters, 2000), teachers can also be susceptible to high rates of burnout and turnover for several reasons, including: the demanding and taxing nature of their work; the lack of organizational support and guidance they receive via training and supervision; lack of organizational trust among correctional employees; the role ambiguity and role overload they endured from being undertrained and having to learn their roles on their own; and feeling underpaid and underappreciated for their work (Bannon, 2013; Belcastro et al., 1982; Garske, 2007; Haynes et al., 2020; Kamrath & Gregg, 2018; Smith & Hofer, 2003). Consequently, these stressors observed among correctional teachers can have downstream effects on correctional institutions as they can, for example, increase worker turnover in correctional educators, which in turn, can reduce the morale and productivity of other correctional staff; apply additional pressure on prisons organizations to finance and facilitate the re-training of new teachers; and can undermine the ability of correctional facilities to rehabilitate residents and address education deficits in their prisoner population (Cole, 2002; Kamrath & Gregg, 2018).

Despite these occupational barriers and stressors, correctional teachers are hard-working, highly motivated in their work, and generally report having high rates of job satisfaction (Bannon, 2013). In fact, correctional educators were found to be greatly motivated by their program participants and valued their job for the meaningful affect their work had on improving and transforming the lives of their program participants and contributing to their life by helping program participants work towards being successful beyond their time in prison (Bannon, 2013; Tewksbury & Dabney, 2004). Since correctional teachers found their work to be more rewarding and influential, the interpretation may be a mediating factor in job satisfaction levels and could explain why certain correctional workers like prison educators have more positive job satisfaction levels when compared to COs.

Although research on non-security correctional staff is limited, existing studies suggested differences in how correctional workers value and perceive their work may help explain the variation in occupational stress and health outcomes observed among correctional workers overall. As scholars, like Sundt et al. (2002), point out non-security workers like chaplains and teachers were not only quite satisfied with their job but they also found their work to be rewarding, influential, and transformative (Bannon, 2013; Hepburn & Knepper, 1993; Kort-Butler & Malone,

2015; Tewksbury & Dabney, 2004). Since security and non-security staff share some stark contrasts in their respective punitive and rehabilitative work nature, factors like the type of work, work attitudes, personal values, and intrinsic rewards can be variables mediating the trends in job satisfaction and occupational stress found in correctional workers. Although correctional workers, including chaplains and teachers, are among the many non-security correctional workers who are under-researched and under-acknowledged in the correctional services literature, we believe the existing research on the group represents a start in exploring the problems, challenges, and adverse outcomes experienced by non-security prison staff. Our current research focuses on CPOs – those responsible for rehabilitative programming which is, in essence, the core of correctional services as reflected in their mandate, mission, and title (i.e., “correction”).

## 4 METHODS

The current study uses qualitative methods of data collection and analysis to unpack CPOs’ occupational experiences and the long-term effects of their work. The study was approved by the Interdisciplinary Committee on Ethics in Human Research (ICEHR) at Memorial University of Newfoundland (file No. 20231269). All research assistants and transcribers signed nondisclosure agreements stating they would keep all information collected during the study confidential and would not transmit the information outside the research team.

Recruitment was conducted with the assistance of the Union of Safety and Justice Employees (USJE), who also funded the study. USJE distributed study information to CPOs in English and French. In total, we conducted semi-structured interviews with 102 participants, such that we encouraged participants to guide the conversation and share experiences or highlight considerations they deem most relevant, while enabling the researcher to ask follow-up questions for clarification or elaboration. In practice, our approach meant we came prepared with broad interview questions, and let the participant guide the discussion toward topics they felt were most relevant or front of mind.

Most interviews lasted between 45-75 minutes, thus a 60 minute or one-hour average duration. Interviews were conducted between June and November 2023. Due to geographic limitations, we conducted all interviews over the telephone. Although face-to-face interviews are predominant in qualitative research, there is evidence to suggest qualitative phone-based interviewing is sometimes optimal as a primary method of data collection (Lechuga, 2012; Self, 2021). Phones also provided visual anonymity which may reduce interpretations of judgment (Pridemore et al., 2005; Tausig & Freeman, 1988), and facilitating greater disclosures (Joinson, 2007; McCoyd & Kerson, 2006). The approach maintains rapport-building through paralanguage and nonverbals, enabling participants to discuss sensitive topics with greater comfort (Block & Erskine, 2012; Irvine et al., 2012; Lechuga, 2012; Mealer & Jones, 2014; Novick, 2008). We found the latter advantages with telephone interviews were particularly salient, given participants regularly discussed difficult employment realities. Most interviews were conducted in English (n=86; 84.3%) and the remainder (n=16; 15.7%) in French.

Interviews were transcribed verbatim by research assistants for data analysis. Initially, the transcripts were coded in an open-ended manner to identify emergent themes (Charmaz, 2014; Corbin & Strauss, 1990). The team of five independently and sequentially coded five transcripts

to develop an initial set of codes. Through regular discussions and reconciling differences, we ensured consistency within the research team via consensus coding. The approach, driven by our pursuit of discovery, established a qualitative variant of inter-rater reliability, to enhance the rigor and robustness of our findings (Hemmler et al., 2022). A codebook emerged from our process, guiding the coding of the remaining transcripts by the same team. This iterative process allowed for the refinement of initial codes and the emergence of new ones.

The method of data analysis followed a semi-grounded constructivist approach (Charmaz, 2006; Glaser & Strauss, 1967; Ricciardelli et al., 2010), meaning we ensured thematic findings emerged from the data (i.e., the words of participants) although we could not ignore our prior knowledge – both theoretical and empirical. Nevertheless, we remained ‘grounded’ to data. Transcripts were analyzed using NVivo, a software program used by researchers to manually organize data into primary, secondary, and tertiary categories which are then organized thematically based on their salience. Our focus was on the underpinning realities across and within themes.

#### 4.1 Participant Information

Of the 102 participants who took part in the study, 79 (77.5%) identified as women and 23 (22.5%) identified as men (see Table 1). Most participants (n=65; 63.7%) were between the ages 35-54 (see Table 2), identified as white (n=61; 59.8%), and 36 participants (35.3%) identified as being Indigenous (n=23; 22.5%), or mixed Indigenous or Métis and white (n=13; 12.7%). Four participants identified as racialized, while one declined to disclose their racial identity (see Table 3).

Most CPOs (n=65; 63.7%) had a university degree or had completed some postgraduate work (see Table 4), and an additional 14 (13.7%) had started or completed postgraduate studies. A further 11 (10.8%) had a college degree. The remainder had a mixture of high school diplomas (n=5; 4.9%), some college experience (n=5; 4.9%), or vocational training (n=1; 1.0%); one participant did not provide an answer (n=1; 1.0%) (see Table 4).

##### 4.1.1 Table 1 – Participants’ Gender

Gender	No. of Participants	% of Participants
Women	79	77.5%
Men	22	22.5%

##### 4.1.2 Table 2 – Participants’ Age

Age	No. of Participants	% of Participants
25-34	17	16.7%
35-44	29	28.4%
45-54	36	35.3%
55-64	18	18.6%
65+/no answer	2	1.8%

#### 4.1.3 Table 3 – Participants’ Racial Identification

Race	No. of Participants	% of Participants
People of Colour	4	4.1%
Indigenous	23	22.5%
Indigenous/Métis and White	13	12.7%
White	61	59.8%
No answer	1	1.0%

#### 4.1.4 Table 4 – Participants’ Level of Educational Attainment

Education Level	No. of Participants	% of Participants
College Graduate	11	10.8%
High School Graduate	5	4.9%
Post Graduate Degree	8	7.8%
Some College	5	4.9%
Some Post Graduate Work	6	5.9%
Vocational Training	--	--
University Graduate	65	63.7%
No answer	--	--

Of the 102 participants, most (81; 79.4%) worked in correctional institutions, then (n=21; 20.6%) in community settings, namely parole offices or Community Correctional Centres (CCCs)—although several participants had experience in both settings. While all participants responded to recruitment materials aimed at CPOs, some participants were working in other roles in acting or permanent capacities at the time of the interview. In these instances, participants reflected on their CPO tenures in the interviews. Within the three categories of employees who participated, 78.4% (n=80) were CPOs, ICPOs constituted 19.6% of participants (n=20), and 2% were SPOs (n=2) (see Table 5). As we discuss in the *Experiences of Distinct Occupational Subpopulations* section, these smaller occupational groups have distinctive workplace experiences.

About a quarter of participants (n=23; 23.6%) reported less than 10 years of experience working for CSC, while 41 (40.2%) had 10-19 years of CSC work experience, and 33 (32.4%) had worked in the organization 20 years or more; five participants did not respond to the question or did not provide precise answers (n=5; 4.9%) (see Table 5). The median years of CSC work experience among those who answered the question was 15.

Participants worked in eight provinces; there were no participants employed in Newfoundland and Labrador, Northwest Territories, Nunavut, Prince Edward Island, or Yukon (see Table 7). The most frequent province/territory of employment was British Columbia (n=23; 22.5%), followed by Ontario (n=21; 20.6%) and Quebec (n=19; 18.6%). All five CSC regions were represented in the sample (see Table 8).

#### 4.1.5 Table 5 – Job Role

Job Role	No. of Participants	% of Participants
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Correctional Program Officer	80	78.4%
Indigenous Correctional Program Officer	20	19.6%
Social Program Officer	2	1.9%

**4.1.6 Table 6 – Years of CSC Experience**

Years of CSC Experience	No. of Participants	% of Participants
0 to 4	12	11.8%
5 to 9	11	10.8%
10 to 14	22	21.6%
15 to 19	19	18.6%
20 to 24	18	17.6%
25+	15	14.7%
No precise answer	5	4.9%

**4.1.7 Table 7 – Region of Employment**

CSC Region	No. of Participants	% of Participants
Atlantic	12	11.8%
Pacific	23	22.5%
Prairie	27	26.5%
Ontario	21	20.6%
Quebec	19	18.6%

**5 RESULTS**

**5.1 Motivation**

Few CPOs knew of the CPO position before working for correctional services. Thus, occupational entry is often unplanned (Ricciardelli et al., 2021). In this section, we unpack occupational entry motivations, specifically the hope to “make a difference” and improve public safety—an observation identical to parole officers (Taylor et al., 2024) and correctional officers (Ricciardelli & Martin, 2017; Ricciardelli, Matthews, & Martin, 2023).

**5.1.1 Drift and Making a Difference.**

Many CPOs came to their job through occupational drift (see Britton, 1995 who focused on COs), where some “fell into corrections... I just kind of had a bad day and I decided to put an application in” (P29). Yet, they stayed due to job security, “stability” (P67), and “a pension” (P66) – and with hopes to make a difference. CPOs were highly motivated to positively affect the lives of program attendees. Like others, P1 revealed their passion in saying they desired a “lightbulb moment. And

the inmate gets out of prison. He never comes back again. That's kind of like a drug to the program officer." The CPOs recognized they teach program participants new skills informally, beyond the program content, like social skills and how to be their best selves. As P42 expressed "we have a direct relation on rehabilitation ... a big part of my job is motivating them and finding out where they're at actually." CPOs hoped to "sow seeds" for change which, eventually, will take root and grow. Thus, CPOs provided program attendees with tools to help manage realities of life, which equated to supporting public safety. The intention being to reduce recidivism and, thus, "decrease the number of future victims" (P46).

Of course, challenges can arise when the tools and strategies taught by CPOs during programs are not applied. P66 said "sometimes the change we create is very miniscule or none at all ... sometimes it's not very rewarding." Or people do not attend the program because, as per P73, "you've seen a group of offenders who refuse their programs at a maximum-security institution sitting in a group, and they're forced there because it's part of their special conditions and their parole. There's nothing worse than that..." P73 explained having more tolerance for "a disengaged staff person all day long" than disengaged "offenders" who have more to learn. With the desire to improve oneself among program participants, many felt the CPO job was "more like essentially babysitting. [laughter]" (P71). CPOs were largely motivated to change the lives of prison residents and to keep society safe by eliminating possible opportunities to victimize citizens.

### **5.1.2 Awareness and Recognition**

An element of the job context possibly hindering the motivation to become a CPO is tied to the recognition of the CPO role within the CSC and greater society, too. Alison Liebling wrote of COs as the "invisible ghosts of penalty", equally fitting is the CPO as the *invisible ghost of rehabilitation*. Even for those who choose to enter the field, unless they worked for CSC in another role (i.e., CO or parole officer) or they had completed an internship as a CPO, most were unaware of the job and associated tasks before occupational entry. Even P29, for example, who was prior a CO, admitted "if someone said: 'what's a programs officer?' I couldn't tell you [then]". As P20 said, "the public doesn't even know we exist." Regarding occupational entry, many started as "acting" in the CPO role, on temporary assignments and were surprised or felt unprepared for the role because, beyond the teaching, training, and connection with program attendees, they underestimated the psychological toll and administrative portion of the job (i.e., "I had no idea about all the administrative stuff. Not only is it tedious but it's very repetitive" [P61]).

Within CSC, CPOs felt their status on the organizational hierarchy was rather "low", which was attributed to CPOs being seen as "helpers," and non-security staff. P10 stated, "some of the staff, I would say either don't really know what we do" or do not have the same rehabilitative "mindset." As such, CPOs felt some staff viewed them as "not important and that we can sort of do away with them [CPOs] altogether" (P23). P49 described "a real divide... between security staff and the people in the roles to help them treat and rehabilitate." Here, participants described feeling devalued among non-security staff and experienced the hierarchy that places them below certain other roles. They expressed frustration at being viewed as less integral to the institution's mission, with their roles often overlooked or mischaracterized (e.g., "support staff" or "con-lovers" [P66]). One reason for this perceived inequality, as per P6, is CPO work is often perceived as lacking credibility, hearing comments that diminish the value of their efforts compared to those of security

staff who again devalue their work. Thus, some felt CPOs are positioned poorly on the staff hierarchy (“at the bottom of the barrel” [P12]) despite the belief that “programs are the only thing on the rehabilitation side of the house” (P66). Thus, some security staff were felt to be derogatory toward CPOs or fail to “respect the work that we’re doing. They think programs people just kind of do nothing all day” (P12). Given there are few CPOs, and CPOs do feel somewhat undervalued, some CPOs felt “isolated” (P5), treated poorly by other staff, and disrespected.

The poor treatment from some colleagues created frustration and the derisive language directed toward their role created harm: “we walk a very thin line between being what’s called a ‘con-lover’ and just being there to help the guys work on their issues” (P35), “so using terms, like that ... that’s tough” (P6). CPOs described disparaging remarks that belittled rehabilitative programming: “if they’re calling you ‘hug-a-thug’... Like, just things like that can be very frustrating” (P12). P62, a former parole officer, knew how CPOs were viewed by parole officers and P32, a former CO, alluded to tension between CPOs and COs. Being devalued as a CPO happened beyond the prison setting. P71, in a community setting, felt devalued too. However, the CPOs did feel appreciated in the role by program participants: “the inmates give me more recognition than anybody” [P70].

## **5.2 The CPO Job Requirements**

### **5.2.1 Educational Requirements**

Recently, CSC removed the requirement to have a degree to be a CPO (e.g., “you only need a high school diploma and then they train you” (P67)). The program officer qualifications differ from parole officers, who must have a university degree. However, P6, echoing others, explained how “personally, I’m not someone who will say ‘well if you have high-school you can’t do it’, ‘cause I’ve worked with people with high school who are excellent program officers. Much more excellent than ones that have university degrees, because again it’s the attitude.” Thus, intervention-focused orientation, not the degree, was thought to determine the quality of the program officer.

### **5.2.2 Training**

Regardless of the training offered and the academic background required, most CPOs felt “nobody really prepares you for what you’re actually going to hear. What you’re actually going to see” (P4). CPOs felt they lacked proper training: “when you’re starting out you get two weeks online... [but] how about having training [for] the really difficult conversations that might come up” (P42) or for addressing sensitive subjects or on how to maintain boundaries (e.g., “we do such a gross disservice to the women in our organization by not actually having courses on how to set and establish healthy boundaries” [P20]). Other examples of insufficiency in training were how CPOs were left “not feel[ing] qualified, and I don’t feel like I’ve got the appropriate training” (P67) as well as the mental health knowledge necessary to help the attendees or themselves manage difficult subject matter. The lack of in-person CPO training, including on topics like suicide and mental health, left some CPOs feeling CSC only offered some training due to liability rather than meaningful support. Instead, in the training norm “everything is basically passed along from generation to generation. Like an oral history. Every team is organized differently actually, which

is bit chaotic. It's really just you're onboarded by whoever is doing the job before you [after a "very rapid" training]" (P11). Onboarding is particularly affected because of the fast-paced nature (with crises) of the workplace environment, which means emergencies are prioritized over personal development and training. P40 explained CPOs are "expected to do three professional development days a year. However, there is no money associated with it and we have to find out what to do on our own." They viewed this as a demoralizing "slap in the face". Instead P40 would rather prefer "if every couple of years, they provided a training opportunity or a conference off our work sites, then that uplifts people. Gets people engaged. They want to do more. It reenergizes you. It revigorated you." Since this tended not to occur, some CPOs pursued their own education as professional development without the support of the employer.

In addition, P46 would like to see more focused training tied specifically to their occupational responsibilities, like program delivery, versus on political or social challenges. They, P46, explained how doing assessments was stressful when they are not confident enough in their interactions to do so effectively, specifically: "That's a pretty uncomfortable feelings when you're giving an assessment and you're not a hundred percent confident or even sure about how to explain your assessment." Thus, they felt obligated to make decisions about public safety while not having the information required to be informed.

### **5.2.3 The Certification Process**

CPOs undergo a process of certification. P9, echoing others, spoke to the challenge of fidelity to the program for certification, which is described as tone deaf, because the officer must "parrot exactly what the program says." P9 continued to describe the awkwardness because, for example:

in the multi-target program for example, in the maintenance program, there's one session on managing cravings, urges and temptation. In the multi-target programs, we do not have sex offenders. But in this script for this program, we have to say, "have you ever been walking down the street and gotten the urge to buy a cheeseburger, purchase crack cocaine, sexually touch a child in your care?" Word for word. You actually have to read the script to be certified because it's a structured program. I understand this, you need a structured program. Every offender that goes through our classroom across Canada needs to have the same material presented to them. Of course, you have to adapt to moving your classroom because responsivity principles. But the content needs to be very consistent. But it's insane that the certification program is basically that original program manager who may or may not has ever delivered a program. Or ever delivered a program in the strain that you are delivering that they're certifying you on. It's basically watching your tape, looking at how well you stuck to the script.

The participant's words revealed how they are penalized for any lack of adherence to the script. However, the script failed to be adaptable to participant needs and reduced the ability to optimize the responsivity principle. The challenge here arises as the emphasis and focus becomes on certification rather than meeting participant needs. P26 lamented how "They're pre-packaged programs. And we go through what's there and we have to do the video reviews. We videotape ourselves in the classroom and that gets sent to regional headquarters for them to review every couple of years. We're the only ones that have to do that." While P46 described the process as "nightmarish" because those who certify are perceived to be "very nit-picky. Very nit-picky." They

explained: “You have like a two-hour session, and it’s broken down into eight parts. And say part two is supposed to take 15 minutes long. If you take 20 minutes, they will nail you.” In this sense, an officer can be “nailed” for allowing participants to swear or simply speaking too quickly and not adhering to the length of the modules. Moreover, the recording fails to show how the program officers manage the classroom dynamics and the nuances they must mitigate in the classroom, such as screaming, conflict, swearing, and challenging participants.

Participants explained feeling they are “the only ones that have to go through this certification process... You will find no other staff member in the CSC organisation, who is going to be filmed and evaluated. Except in programs... And they say it’s because they want the programs to be standardized, given in a standardized manner” (P6). Thus, the desire for “standardized programs” created a process of certification CPOs find taxing, particularly given how “people can go through the certification process and not meet certification, and still be program officers for years and years and years and years” (P6). Which led to questioning the “point of putting the process in... there’s no consequence. So, you didn’t get certified the first 5 times, well just try again” (P6).

The certification process further appeared to bring forth diverse emotions, too often negative. P8 explained how:

program officers—unlike any other group in the CSC—have to record themselves for quality review... you can get certified for three years and then you have to redo your quality review. ‘You trained me. You put me in programming. You allow me to write reports that go to the parole board. But you don’t believe that I’m doing my work, so I have to record myself.’ That’s frustrating.

P9 called the process “insulting”, while P25 said “it’s kind of demeaning. Considering all the work I put into getting the job. And the trainings and everything else. And then you’re going to tell me I’m not doing it right.” Officers felt obliged to have to “prove to corrections that I am still capable of doing my job, even though I’ve been doing it for as long as I have”. Others, like P25, find the “practice... discriminatory because nobody else has to go through this thing, is they ask us to certify ourselves.”

Programming, including when seeking certification, is often affected by events and processes well beyond the control of the CPO. For instance, P9 described, how participants are “always different the moment you turn on that tape. It produces a dynamic in your classroom that you’re going to have to manage, because then you’re prioritizing this stupid administrative burden over their actual participation and engagement in program, because of this fucking-camera,” as a recording challenge when certifying. This was echoed consistently, the very affect of being recorded prevails, where, as per P25, recording is “very stressful because the women don’t participate as well as they would, because they know the camera is on... You’re stressed, you’re nervous, you’re afraid, you have to follow this stupid book by the letter, or otherwise you’re going to be told you’re not doing it right and you don’t get certified.” Combined with prolonged certification delays, seeming organizational dysfunction, and a lack of support, certification could be immensely stressful and the process unpredictable.

Additional challenges arise because even when the recordings are completed in a timely manner, those who review are, as per P25, “so behind in their work, the people who evaluate us—I recorded

myself a year and a half ago and I still didn't get my results." Beyond being the only employees who must certify, officers "have to do quality review every three years. It's annoying because once you've done it, you did the initial, then you did three years later and now you're six years in and you're like 'it's the same program' and then you can read what's going on.... Redundant at that time. Its a lot of extra work that you're trying to do and record and get guys get up and do whatever" (P83). P86 trains CPOs and does "quality reviews of the program officers" – that is, they are responsible for certifying CPOs, which entails "ensuring program integrity that people that delivering the program as they're supposed to be", also finds the certification process cumbersome. P26 finds the effect on morale saddening, they explained "you're responsible for your own training. There will be some videotaping. But people are upset if they don't get certified after their first program. It just felt like, it feels like the standards are going down and down and down. Which probably has an impact on the overall effectiveness of the programs."

### **5.3 Workload and Job Tasks: The Structure of Programs and the CPO occupation**

#### **5.3.1 Types of Programs**

The Integrated Correctional Program Model (ICPM) is the mainstream program which has replaced the "plethora of programs" (P3). Prior program participants were to complete different programs for each criminogenic risk to which they were deemed disposed. P31 explained how programs have changed, whereas CSC used to offer:

core programming that was all different—we had NSAP, substance abuse programming, appropriate relationships, COG skills, cognitive skills, and violence offender programs. We had all these different, we had maybe seven core programs. And when they developed the ICPM program ... they wanted to streamline it so the offenders could get programming faster. So instead of taking five different programs [they take one].

The ICPM ensures the CPOs "no longer" deliver "a dozen different programs to successfully be reintegrated. Now it's one program. So, you have a primer, you have a main program and then you have a maintenance that follows afterwards" (P3). The "mainstream program which is the moderate [about three months long] or the high [close to six months long]". CPOs then deliver one program with three stages (primer, main, and maintenance). In addition, CSC offers sex offender programs (SOP), Indigenous programs (ICMP), and the Indigenous introduction to the correctional model (CIICMP).

In terms of structure, P85 explained programs with 10 or fewer participants are run by one facilitator and those with more than 10 program participants are run by two facilitators. Moreover, as per P84, "the program structure is definitely based on the cognitive behavioural therapy model." The challenge however arises for program officers who have "to address the violent guy or the family, the family violence guy in the same room as, the crime for gang guys. That's tricky. But that's multi-target. But when a person's committed a sexual offense, that trumps everything else." Central to programming is also helping the participants understand "their crime cycle" (P4) and select the behaviours and thought processes they must work on as well as providing participants with "basic living skills" as well as addressing "substance abuse, violence and aggression, problem

solving, how to manage your anger and your emotions.” The objective, as per P4, is to help participants understand what factors led to their criminal actions and “how they can do things differently in their life going forward. So, they don’t come back to jail.” This is echoed often, for instance, P39 described their work as “teaching the offenders skills that they could work on, so they don’t end up coming back to jail.”

In both community and institutional correctional settings, P20, echoing others, described the challenges of delivering programs to low-functioning program participants and the efforts they place in trying to meet people at their level. P20 continued to explain how sessions are “about goal setting” which varies between sex offender and mainstream programming.

### **5.3.2 Pre-program**

*Reception.* P70, who worked at a reception centre, explained how once incarcerated, people have “about 90 days here, [and] in that 90 days we complete a primer program. Which is what I run. So, the primer program is about two weeks of in-class time.” CPOs assess which programs and where to place the participants (i.e., high, low). P12 spoke about a “criminal risk index” being used as the index “indicates which level of programming the guys will take.” They said:

within the first 15 days of arrival to federal custody, in some cases we do that tool even before they see a parole officer. And we do that so we can get the referrals in quickly so that they start their programs as soon as possible. And then same with the sex offender assessments. They get done within their intake time period. So, whether that’d be 60, 70 or 90 days.

After the primer program, once the program participant has moved to their home institution, CPOs are given a class list and “proceed to make a file on each guy”. They take the time to ensure individual in prison is suited to the class, conduct interviews, and do intake (P3).

P44 described running a sex offender (SO) intake program, for the eleven-session program that intends to “help the participants figure out what they need to be working on.” P44, given their intake role, prints all their program participants’ correctional plans to ensure all participants are aware of what they should be working on in program. The challenge for P44 was how:

as soon as I handed out the correctional plans, then they started saying, ‘but this is not true’ ... [thus,] sometimes I have to check some information that doesn’t necessarily line up with what I know. Sometimes I go to the case management file because if someone raises an issue in the classes, sometimes I connect with the parole officers or I get a call from a parole officer. ‘Hey, I was told this or that.’

Thus, they spend time learning about offenses to try to help participants take accountability when appropriate and to help correct the correctional plan and their narrative on file.

### **5.3.3 Prior to Program Delivery**

P21 spoke about spending much time preparing for classes. They explained how “you are preparing, you’re going through your lesson plans, getting them memorized so that you can be more dynamic rather than reading off a piece of paper.” Largely here, participants felt they spend

much time, but not enough time, preparing for sessions and, reminded, delivering programs is more than just delivering the program content. P22 described a noted challenge, whereby “we’re pushed somewhat to use less prep time and spend more time in the classroom” and suggested, as a result, the program participants can suffer. P22, like others, is “a seasoned facilitator” but still makes “sure that I’m prepared and stuff like that.” Thus, the efforts to run programs does not reduce with experience. Instead, these officers passed time trying to improve programs.

#### **5.3.4 In program**

When in programs, interviews discussed their time is passed “doing class prep”, including reviewing “what is written about your guys for the day” and being “in classes” which are one to two hours long (P3). P40 described their day:

As a CPO, I would say about half of the day was spent in a classroom. Or a third, actually. I would say a third of the day was spent in the classroom working with offenders. Facilitating the program. I would say the remainder of the day was broken up into various tasks depending on the day and what was happening. Sometimes it involved file reviews. Sometimes it involved marking the written work the offenders have done and reviewing it. Often at some point it did prepare for the next day’s lesson. I would say a third of the day was taken up with that. Also consider taking notes as well of the session and what happened in the session and anything that pertinent that I might want to keep in mind when I’m writing a final report. And doing make up sessions. So, if an offender has missed the program, then we are required to provide them with make-up sessions.... That is a frequent task that we do.

After class, sometimes program participants needed “extra help or assistance or some other—we sometime become default counsellors for some of these guys ... and then I usually follow up with the parole officers on anything that happens in class or outside of class with the offenders” (P3). P22 continued to state how “for me, I find that if we push guys too much and give them too much information, you just kind of overwhelm them.” P45, who worked with women, described running programs as well as “a lot of one-on-one stuff with the offenders outside of group.”

Often pressure arises because programs are crammed in to meet parole hearing dates. Timing is thus fundamental. P30 described how invaluable program participants completing programming in a timely manner is, explaining how in their role “one of the most important things is to have them complete their program at the right time” because of the “ripple effect.” For example, if the program’s completion is delayed, the participant may need to move their parole hearing.

#### **5.3.5 Program Delivery Variations by Security Classification.**

Speaking to security classification discrepancies in occupational responsibilities, P14 explained how “minimum is very, very different than being at the medium and max” because there “are really no lockdowns, shutdowns or anything here.” For P14, programs are rarely “shut down” at minimum, whereas “at the medium or max—well, they might be shut down for two days or a day or a week before of an incident inside or whatever.” This affected programs because of the delays created. At healing lodges, as per P74 who worked in one, which is low-minimum security, most CPOs delivered programs to program participants who are “wanting or needing a maintenance

program before they're inquiring to the board for a review." They were refining skills.

Conversely, P29, who worked at a maximum classified facility, struggled because "the movement of offenders to our program areas is very, very broken down, just because there's ... broken down populations that can't mix with each other. So that makes it so our programs tend to take quite a bit longer here. Same structure." Thus, in maximum, programs may require additional time to complete due to lockdowns and other challenges. Across security levels, P31 also found it "valuable to have a lifer in the room. Lifers always brings stability to program or just to any kind of situation." The stability came from their longer sentence, given many are in and out of prison rather quickly. Moreover, "when you have a lifer in the room, there's a respect level, I guess, like a hierarchy and so if people are in there being jackasses, it's actually a good place to start with when you're doing a group a round table. You're like, 'okay, Mr. Lifer, how are things going for you?'" (P31).

### **5.3.6 After program**

After the program, CPOs "review all their work. Do a final interview and then we have two weeks to write (eight page) reports for ten guys" (P3). Many participants, like P23, felt they spend most of their time at work "writing reports."

## **5.4 CPOs' Interpretations of Programs: A Contextual Snapshot**

Participants felt programs were vital for program participants. Programs are the actioning of the correctional plan, which highlights what a program participant must "work on" (P10) by intervening in factors that contributed to the offense and thus foundational to rehabilitative programming. The officers felt responsible for finding ways to reach participants, to help them manage emotions without resorting to violence. They recognized not all participants had been taught to regulate and avoid violence. They are responsible, as per P13, to help participants through rapport with "social skills, communication skills, emotions management."

Yet, the experience providing programming can be stressful, particularly, as per P14, who speaks to the "revolving door" of prison, explained program participants are out very quickly and thus, of foundational value is to ensure programs are completed. P19 explained "we're always trying to get all the programs done, get the reports done in a timely manner." Yet, while ensuring programs are "responsive" (P22) to the needs of the participant, thus programs must be "individualized" to be effective. In this sense, P22 explained programs are "broad and general in some ways but very individual in other ways."

P30 described program success as "of ten guys or six guys, if you're doing a high intensity program and when it's all said and done, if you have 50 or 60 percent of them remaining in your class for completion, you're doing really well." They explained their success rate is not as high as desired but recognizes how challenging it is to "keep them assigned to the program." In this sense, P68 explained "When it comes to public safety, when a guy comes into the program, I'll take him through the model, especially when he's struggling. You can see there's something happening, and I'll try to, if he's willing, to use that skill, or model." However, not all people are there for the programs authentically, instead some are just doing programs, CPOs believe, to earn parole.

Further, some programs are thought to fall short. The focus of programs on criminogenic needs eliminated opportunities to provide support for other challenges program participants face in their day-to-day. P71 exemplified how “When I was first given programs training, they said, ‘we don’t try to change the non-criminogenic things’ ... but we leave it alone. So, the example they would give us like ‘if he’s biting his toenails in class, that’s not criminogenic.’ You don’t have to address that.” Thus, the challenge arises as very off-putting behaviour or tendencies that compromise wellness and social health are considered outside the scope of programs but can be rather harmful to wellness and social reintegration. P71 continued to illuminate how “There’s no reason that if we’re having a conversation about social interactions and how we treat others that I don’t include that we treat people this way; equally and fairly and kindly. Whether we agree with their lifestyle or not. We don’t actually get to have an opinion on their lifestyle.”

Another challenge arises in how programming is considered a key contributor to CSC’s public safety goals, despite being unrecognized as such and under-researched. P49 described program delivery as “one of the primary roles.... But these are opportunities for these guys to look at themselves, make changes, make steps towards personal growth.” This was particularly impactful as CPOs truly believed in reintegration and felt programming was an essential component, despite programs having flaws. Here, P67 described how:

I believe in social reinsertion; I believe in the possibility to teach the inmates how to do better, and [make] better choices. I believe that the program is definitely a step in the right direction. I believe in what I teach, I try to apply when I teach. I believe that there should be more room for individual sessions. I believe that there should be more room for clinical judgment. I would appreciate being able to have more latitude when it comes to being able to modify sessions depending on what their current needs are. For instance, if I have an inmate who needs more individual sessions because he’s struggling, that implies then opening up a second program for him, and then that implies having to do a report, and implies— like it can’t just be simple. Everything is always a step and another step.

Evidenced in P67’s words are their belief in the impact of programs and their desire to try to make the programs individualized for unique participants despite confronting institutional barriers to program accessibility. Further here, interviewees, like P84, felt they lacked any authority to enforce participation or attendance in programs – further compromising program fidelity and utility: “I can’t enforce them to show up for a program. I can try to motivate them to do that”. Despite efforts, there are “no manuals for any of this. It’s not what I’m trained in. It’s not the way programs is designed to be—there’s been no information on that if this is even effective” (P81).

## **5.5 Experiences of Distinct Occupational Subpopulations**

### **5.5.1 Indigenous Correctional Program Officers**

In total, 28 of our participants (27.5%) currently worked as ICPOs or described previous experiences working in this role. Nearly all (n=26; 92.9%) of the ICPOs identified as Indigenous; the remaining two (7.1%) did not identify as Indigenous. Here, 23 (82.1%) were women, and the remaining 5 (17.9%) were men. These 28 ICPOs were employed in six provinces.

ICPOs deliver correctional programs designed to include Indigenous worldviews, be taught with assistance from Elders, and incorporate cultural elements. While ICPOs share many of the same occupational challenges as CPOs, they face three distinct sources of stress: the emotional burden of delivering programming on topics such as colonization and intergenerational trauma, while being indirectly or directly personally affected by these same issues; issues with consistent Elder support in program delivery; and a perceived lack of understanding of or respect for Indigenous programs found among some within the organizational culture of CSC.

### **5.5.2 The Emotional Burden**

The Indigenous identity of most ICPOs directly affected their experiences in performing their occupational duties, well-being, and mental health. The curriculum for the Indigenous programs is summarized by P86 as:

There are different elements in the program itself that speaks to colonization and the impacts of it: foster care, the child welfare system, and the impacts. And then we actually do activities where they do their own Indigenous family history.... So, they'll do a family tree and within mom or dad or whomever, they'll be an X. A brown X. Which is they were a substance abuser. Or a purple X: they were sexually abused. And then, go down that [that line of discussion] and people who received abuse or perpetrated the abuse, you reflect on that. And I've been dealing with that in a classroom setting. Like, '[let's] talk about all our childhood abuse together.'

For some ICPOs, program content, such as that described by P86, inevitably touched on experiences directly related to their own biographies or the experiences of loved ones. Thus, as a regular part of their duties, most ICPOs are routinely exposed to traumatic materials related directly to their own experiences and communities. Recognizing correctional workers involved in rehabilitation programming can be harmed through exposure to vicarious trauma (see Ricciardelli et al., 2022), ICPOs faced an additional potential exposure due to their own Indigenous identity and family or community histories. P54 explained:

Another thing that would be very stressful is that if you are Indigenous working here, you have the same history as the offenders. So with Indian Residential Schools, the Sixties Scoop, the sterilization of Indigenous women.... I know exactly what these offenders are going through because I lived through that exact same experience. And then, you're sort of stuck in this middle ground. The inmates can relate to you, but then sometimes your colleagues have no idea what you went through.... So it creates a lot challenging feelings.

P54 described a connection to the content they teach, which can be isolating given not all colleagues are aware of the connection and personalization. Further, like P24, some ICPOs were likely to also feel personal connections with the biographies of program participants:

When we read the files, they can be traumatizing.... [Other ICPOs] and I went through similar [experiences] to what these guys have gone through growing up. So, we have a lot of intergenerational trauma ourselves. But we bring it to the table, and we tell the guys what we've gone through, and you can make the choices that you want, of how you want your life to be, right?

As per P24, ICPOs shared experiences with program participants, possibly adding stress when readings elect case files. Moreover, the shared experiences of intergenerational trauma help them connect with Indigenous program participants, again adding a layer of complexity to their work. Other ICPOs similarly expressed the need to invest personally into the Indigenous training they deliver:

I come from the same roots as them. I'm a Sixties Scoop survivor. I was abused as a child. I was adopted by a Catholic family with strict rules, nothing to do with the way my brothers and sisters were raised who did get to stay with my mother. I have to use that because that makes me more relatable to [Indigenous clients]. And my mother went to the residential schools. I know the impact that it had on her... And I have a lot of the social history components that...we evaluate. And in a way I can show them that you know what you can move on from this and you can do something really interesting with your life. (P25)

P25 explained how delivering Indigenous programs necessarily involves bringing personal experiences to the classroom (i.e., as per P24, “putting a little bit of yourself in the training”). Such an undertaking can take a toll on ICPOs, like P86 who described the emotional labour of appearing supportive and professional, while simultaneously suppressing the emotional reactions to material that made him feel “triggered” due to his similar experiences. P41 too said: “you have to kind of put up a front” to hide the impact.

ICPOs’ personal connection to, and emotional responses elicited by, the content of Indigenous programs and the biographies of Indigenous participants in programs continued outside of the workplace. This was particularly challenging for ICPOs who were embedded within Indigenous communities suffering from the very issues taught in Indigenous programs.

For P54, the stresses caused by their relationship to the program content they were delivering as an ICPO, left to express relief at having moved into a different role in which they deliver mainstream, rather than Indigenous, programs: “I’m not working with the Indigenous guys now, which is kind of nice to be honest.... Maybe it's because I'm Indigenous and I have that bias. It's just you see that intergenerational trauma.... So it's a little bit lighter, you don't focus on their indigenous social history. It's lighter for me.” P54’s words highlight a conundrum facing CSC: the passion and personal experience that enables ICPOs to engage their clients and advance the organization’s goals of rehabilitation simultaneously wear down and burn out these individuals.

### **5.5.3 Challenges with Elder Involvement**

A second unique stressor identified by ICPOs was the availability of Elders to assist with program delivery. ICPOs are intended to deliver programs with an Elder from the community, who is contracted from the community. CSC contracts approximately 120 to 140 Elders (Stefanovich, 2023) and stated these staff are “invaluable resources within CSC in providing counselling, ceremony, teachings and guidance to offenders who are following (and staff who are working within) a traditional healing path” (CSC, 2017). ICPOs appreciated working with Elders, describing them as an “amazing Elder here, [name omitted]. I can’t say enough good things about her, she’s just she’s fantastic... and she goes above and beyond with these guys” (P19). Reasons included how “having that Elder just gives another avenue or another person they can speak to.... [who] they tend to trust and respect them more or speak more freely” (P77).

ICPOs identified Elders being involved as a vital part of making their work effective. However, they described a general shortage of Elders:

We do not have enough Elders—capable Elders—to be able to fulfill the wishes of the [program] manual.... The amount that they want Elders to be in the program is basically 50 percent. There are not enough healthy Elders to fulfill that. (P26)

A big piece of having success in the program is having that Elder involvement. And having kind of that support, for the offenders. I guess it kind of works through some of the trauma and some of those intergenerational impacts.... But then, when we are struggling to have enough Elders, it's also one of the biggest disadvantages or kind of failures in the program. (P78)

As P26 and P78 indicated, there are two downfalls: P26's words showed how the programming demand on the Elder is too much given, for example, their health, age, other commitments, and so on; while P78 showed the quality of the program is harmed when the Elder is not present. Thus, there is a need to address the time programs require of Elders. One of many considerations is to reduce the amount of time Elders are required to facilitate or attend programming. Reducing the physical demand and, in response, time commitment could enable more Elders to deliver Indigenous correctional programming.

ICPOs also spoke about having to shoulder additional responsibilities when Elders were not present, as per the program design. When asked about the biggest challenges in her work, P25 stated: "One is not having Elders. Not having the tools and the means to offer the program as it's supposed to be offered...." P25 explained the seeming misalignment between program as their "supposed to be offered" and what can be offered currently given Elder's availability. Thus, perhaps the role of the Elder required revisiting for feasibility, with Elder wellness and program quality/pedagogy in mind. There is also stress for the ICPO because they feel compelled to assist Indigenous program participants with their, often serious, struggles outside of program when an Elder may have been better equipped to intervene:

When guys are talking about suicide, I've had to assist in the sense of going to the units.... Because we're Indigenous [and] we don't have any program Elders here, we haven't had any for a long time, so they rely on [ICPOs] to help guys when they're struggling with stuff like that.... So, we're doing more above than what our program is. So, lots of stress on our end.

In these circumstances, beyond ICPOs having to take on the teaching work that was intended to be shared, they also bared the full emotional load of any abhorrent content inside or outside of class. Moreover, they do so without a support structure post-exposure. P86 explained how this can happen in a session: "part of the reason I think that the trauma is a challenge for the ICPOs is they don't have that support...that they are supposed in order to navigate some of these difficult sessions." The lack of support Elders would provide, which is coupled with the fact most ICPOs are themselves Indigenous, thus creating unique challenges. As P53 said: "A lot of [program] is working on their past. That Indigenous social history. We touch on residential schools. And a lot of it can be triggering for guys. And it sucks, because I'm not equipped, I wasn't trained, to really do this on my own." In such a context, Elders also helped the ICPOs. For instance, P77 was

provided with “more knowledge and being provided more teachings and Elder support,” which then informs future program delivery as they connects more deeply with their own culture. P77 was one of several ICPOs in our sample who, due to factors such as Indian Residential Schools and the Sixties Scoop, were not raised with a knowledge of Indigenous culture. Participants made clear how Elders can be a vital source of knowledge and support for many ICPOs as they navigate these challenging aspects of program content. Thus, they are needed both by people in programs and ICPOs delivering programs.

#### **5.5.4 Lack of Cultural Support or Understanding for Indigenous Programs**

Some ICPOs were concerned about institutional, employee, and/or organizational attitudes toward Indigenous programming and, by extension, the impact on and recognition of their work. P60 described the “systemic racism that goes on” within CSC, noting: “It won’t change. You’re never going to change that culture.” Evidence of the culture included actions interpreted as “microaggressions” with security staff (e.g., “We would be in the mid- ceremony and the correctional officers just open up the door and interrupt while the Elder is doing final closing prayer. [Or] when there is a count, they’ll go in and open up the door to the sweat.... (P56)). Such acts are thought to interfere with meaningful cultural practices in the Indigenous programs (e.g., if staff “soon as they smell smoke, they’re filing a complaint with Health and Safety. Then [management] say ‘you can no longer use smoke’ (P60). Like others, P72 suggested the disconnection may be in CSC’s efforts to engage Indigenous people in culturally meaningful correctional programming and their organization’s (i.e., all employees) understanding of Indigenous cultures. Some ICPOs described specific instances of being belittled or offended in the actions by other staff:

Just the way that [other staff] talk to you.... It can be very traumatizing as well. Like, if you’re calling [me] ‘hug a thug.’ Or [saying] ‘Indigenous team to the rescue!’ That’s the one I’ve heard before. Just things like that can be very frustrating. (P12)

When I joined CSC, and I started in [institution]...the old guard of correctional officers’ kind of viewed me at the start with skepticism: ‘There’s this Native woman coming in. Is she going to be compromised?... Is she looking for a husband?... A lot of them, not all of them, [acted this way].... A lot of them did regard me with a lot of skepticism. (P72)

The narratives of participants revealed there are still challenges to the acceptance of and knowledge about Indigenous programs and cultures at CSC, which can at times, intended or not, leave ICPOs to feel their work is not valued or is even diminished.

#### **5.5.5 Political Responsivity**

Several participants expressed concern about CSC’s response to the needs of Indigenous individuals, emphasizing how CSC must be accountable for the colonial history, Indigenous identity, and experiences. P60, reflecting on colonialization, remarked on the culture of CSC: “It won’t change. You’re never going to change that culture. That culture is embedded in the constitution. It’s embedded in this country.” There was a sense of helplessness to make change and to right the harms of the past at the organizational and more individual levels.

P56, for example, talked about how CSC “tried to policy culture. I fucking hate it.” They explained

how “I get really frustrated and disappointed and angry when a program manager is saying, ‘if it’s not in the book, if it’s not policy, you can’t do it.’ There isn’t the flexibility. They talk about a specific incident “when I say to them, I have four men in my program who have now talked to their grandmothers about their friends as children are in graves. The Elder thinks we need to do a healing and our manager’s saying nope.” Basically, P56 felt policies are privileged above human need and informal relationships prevailed. P86 felt suffocated under pressure to fulfill ICPO responsibilities which are outside their expertise – which they “can’t do.”

ICPOs also worry about how claiming Indigenous identity can move a program participant from high to medium security prematurely. P86 explained how “policy criteria is Indigenous offenders tend to be underwritten from a high to a moderate program based on if they’re Indigenous .... Social history contextualized their risk in a way that does not reflect their assessment, and we can mitigate it otherwise by supplementing cultural interventions.” They continued to clarify how CPOs “are supposed to in Corrections Canada consider Indigenous social history of offenders in every decision that we make ... [but] how are we considering Indigenous social history when we are using a standardize tool that doesn’t reflect that?”

Moreover, this is further complicated by “a lot of non-Indigenous people who are being accepted into the Indigenous program” (P50). Thus, there are concerns about people striving to cascade down security tiers or obtain what is perceived as a privileged stream of programming by claiming an Indigenous identity. The essence was a greater need to engage in dialogue with people who identify as Indigenous and to facilitate learning about knowledges in a collaborative approach that recognizes the dignity of traditional wisdom. Like all programs, Indigenous programs required being redeveloped with co-design, however, how this can be best done or done all in prison remains unclear.

### **5.5.6 Community Correctional Program Officers**

Most participants worked in penitentiaries. Approximately one fifth (n=21; 20.6%%) worked in community spaces. Community Correctional Program Officers (CCPOs), for many reasons (i.e., release data, breaches, job responsibilities), must be very flexible because of the variable and unpredictability of their work. P71 explained:

We’re constantly interviewing and intaking and doing file reviews for guys coming into the program. We teach programs on continuous intake. So, we are constantly running classes. Usually five, six, seven, eight classes a week. We are constantly exiting people from said classes because they’re getting suspended, they’re reaching warrant expiry, [or] they’re finishing a program in a positive way.... So, we’re constantly doing exiting interviews and the reports there as well.

CCPOs then, face several rather unique challenges: scheduling programs around clients’ responsibilities; occupational safety concerns; and lack of appreciation for or awareness of community-based program work, each of which we explain in turn.

#### **5.5.6.1 Scheduling and Program Delivery**

P15, who worked eight years as an institution-based CPO before moving into the community, explained challenges with scheduling and program delivery unique to the community because

participants are no longer in prison where the programs are structured into their day – they also have family and professional responsibilities: “A lot of guys’ work. Some of them got to take psychology. They’re fathers. So, the programming is usually done whenever you can .... The reality is, is nine times out of ten, you always got a guy canceling last minute.” Of note, participants who cancel may request make-up sessions, which also affects scheduling and program delivery. P15 explained how classes may be in the evenings because they try to accommodate parolees’ work schedules to help with employment and reintegration.

In the community, parolees must get to wherever the program is being delivered – area of town, building, etc. – from wherever they are (i.e., work, halfway house, home) and often using public transit. Arriving late is probable, and can be frustrating for CCPOs, who are already scheduling evening classes and being flexible – even when they do not feel the parolee is invested in the program (i.e., forced compliance). For example, a parolee said to P11 “like, ‘if you’re not changing your program times for me, I’m not coming” after accommodating an evening meeting around their work.

Some CCPOs also, particularly post-COVID, accommodated parolee scheduling needs through virtual/remote program delivery to address challenges to program completion, such as clients living in rural areas: “I have clients that are in [city] and [city] and sometimes up North. So, telephone contact has become very effective. It’s not the be-all and end-all but you can still build a therapeutic alliance or a working alliance and get to know the guy” (P15). Despite the benefits, virtual program delivery, when working remotely, blurred the boundary between work and home. Further, boundary blurring raises concerns about how to assess parolees during telephone or virtual meetings and “increased workload, because instead of having six guys in the classroom for a couple of hours, you had to make six separate telephone calls and talk to each guy for a couple of hours” (P26).

### **5.5.7 Occupational Safety**

CCPOs described unique struggles with occupational safety. Some CCPOs felt vulnerable to physical assaults, particularly when delivering a class at night and given, unlike in prison, there are no CSC trained security staff present. Community spaces may have private security or commissionaires, who are appreciated. However, the presence of commissionaires who were described as often program participants or retirees, was valued with caveats because the commissionaire role was “basically just a security guard, not armed at all” (P11) or “to call 911, basically, if we need 911 called” (P18). CCPOs, like P18, practiced safekeeping strategies such as asking colleagues to check on them if they anticipate a meeting with a “scary” client who may get angry. But either way, “at the end of the day, if [the client] decided to do something, I’d be fucked for a period of time until someone came to the rescue” (P18).

CCPOs also have a perceived increased likeliness of running into parolees in the community: “I am living in the same community as where the offenders live. And so, I will run into them at grocery stores or at the bank or whatnot” (P31). This proximity can create stress for CCPOs who gave examples of awkwardness, discomfort, or vulnerability inducing situations.

### **5.5.8 Respect or Recognition**

Some CCPOs felt underrecognized in their role. P68 explained how when community programs were implemented at the parole office, “a lot of the staff did not believe in it, [thought] it was unnecessary, so we were always looked at as being a problem.” Then added, despite improving attitudes, “I still experience that [negative perception] here and there.” Participants provided specific examples of feeling underappreciated or undervalued “in the community” due to policies around desks versus cubicles. P81, explained, how: “it seems silly, but it’s usually the silly things that tip us over the edge.” Nevertheless, not all CCPOs felt undervalued, like P56, who “since I’ve left the institution and I work in community...I feel like I am treated with respect. I feel like I am [treated as] a professional.... It’s like black and white.” That said, feelings of disrespect, particularly around workspace, are clearly a concern for some CCPOs.

### **5.5.9 Social Program Officers**

SPOs oversee recreational activities (e.g., hobbies and crafts), liaise with the “inmate” committee, coordinate with outside volunteers, and facilitate opportunities for specific prisoner subpopulations. SPO are paid less than CCPOs and ICPOs. Most stressful for SPOs was feeling lesser-than (i.e., P35 believed he is only respected “by 95 percent of the inmates [and] 75 percent of the staff”). Regarding management, P5 felt challenged trying to receive “an answer from management” because “no one can save time for us.” They felt their work was underappreciated or misunderstood and thus SPOs may struggle to have their needs met by management.

These participants described their role as overseeing the social hours of incarcerated people. Simply said by P5 is “social programs, we’re in charge of the inmate’s social life. Anything after hours basically. Social programs are only supposed to happen like not during work and school time.” Their work appeared programmed around hours – “generally like after 4:00. But here, we supervise the inmate committee” (P5). However, the ability to oversee social program hours can be compromised by competing interests for the resident, each valuable.

## **5.6 Considerations about Diverse Sub-Populations**

### **5.6.1 Challenges Working with Sex Offenders (SOs)**

There are challenges to delivering SOPs, yet people are more open to SOs with exposure to the population. P63 described delivering SOPs as “pretty difficult for me personally” because they find the delivery more “mentally taxing” although SOs appear more willing to attend programs and are more involved. P63 echoed others, explaining how a “challenging factor would be denial or just offenders in the group that are not willing to kind of discuss their offence or work through that or acknowledge it at all.” P36 described SOs in group as “a little bit more needy than the traditional population” and feels many “lack accountability. A lot of blaming.” Thus, this lack of acceptance of the crime, which can range from “child pornography to pedophilia to sexual assault or rape” can be difficult. For some CPOs, if the program participant is not accountable despite committing sexual harmful crimes, the clients can “induce rage” (P1). Particularly because those who commit sex offences, anecdotally and given their experiences, have “litigious” (P1) personalities, rather than accountable, which makes them challenging to teach or supervise. Other participants described similar challenges working with SOs, such as how P76 explained SOs “tend to be more deflectors...I do find them more challenging to get honest answers from or get them to

acknowledge that in the sex offender assessment.” P74 is annoyed by the lack of accountability among some SOs, where “at the end of the day, you definitely get sick of listening to the bullshit excuses. Just those stuck cognitions and patterns that you see over and over again.” Some participants, readily aware of concerns around victimization and sentencing, did disclose how, from their perspective, the shorter sentences which tend to be awarded to SOs with child victims are unwarranted. To exemplify, P46 described how “personally [I] really struggle with the really short sentences that the guys end up getting a lot of the time who have crimes against children.”

#### 5.6.1.1 Status & Hierarchy (SOs)

Consistent with prior research suggesting there is a hierarchy in Canadian federal prisons tied to i) gender presentation; ii) sexuality; and, more predominantly, iii) criminality (Ricciardelli, 2014), P57 recognized how “obviously the inmates don’t care for sex offenders.” While P72 recognized “there’s a lot of bias against sex offenders. There’s a certain image that goes with it.”

Speaking to the combination of SOs with diverse victims in an environment evoking a hierarchy against diverse criminality, P61 revealed the nuance around the relationships within prison spaces. In this sense, P26 too attributed the ease of working with SOs to the “pecking order” in the institution, in which “sex offenders are towards the bottom.” In response, they explained, SOs have “kind of trained themselves, or they’re trained, not to cause problems, not to make waves... They can be very compliant as far as that goes. So, they’re, for the most part, quite easy to deal with.” Thus, the hierarchy in prisons among those incarcerated can extend to affect programming and intervention supports.

#### 5.6.1.2 Programming Precaution (SOs)

Participants explained how, due to the hierarchy in prisons, there was a requirement for being conscientious around occurrences of SOP and, even more so, the criminal convictions of those in the programming. For instance, P36 believed when facilitating SOPs, due to at least in part the stigma against SOs, they “need to be isolated a bit more. The group needs to be more private. You have to be tricky about the way you phrase things.” P72 felt:

these guys are often reluctant to take programs because it could bring them to notice. Especially in given the nature of the institution I work in.” P49 recognized SOs are “a target in the prison.... They always got that stigma. You’re not protecting them from anything or from anybody. But you always have to be aware [of] how much they might be a target to other offenders.

Relevant here is how, despite not being responsible, technically, for prisoner wellbeing, CPOs did feel responsible. They, in delivering programs, are “doing the best to prevent it [SO victimization]”. Likewise, P57 described how “you have to be a little bit more vigilant with regard to them getting to and from programs in a safe way. You have to you have to try to keep the fact that you were doing a sex offender program you keep that knowledge as quiet as possible to the other inmates.” Thus, CPOs’ silence, for lack of a better word, served to protect the SO in the programs, particularly those who victimized children both historically and recently.

The hierarchy among prisoners, as well as programming constitution, appears to impede on program fidelity and effectiveness, given biases and stigma creep into the classroom where people

are not segregated by crime. Speaking to programs, P61 described how:

the manual doesn't help to differentiate [SOs]. They kind of put everything in one box. Everybody in one box. And nobody fits into that box whatsoever. That's one of the biggest challenges, trying to connect and build a rapport with each guy based on his particular crime process and offending and all of those things. And none of that fits in the manual. I have to make this up as I go.

The classroom is a dynamic space requiring careful management, largely shaped by informal structures influencing prison society, like the “inmate code” and hierarchy. The challenge, however, further emerged regarding how the program itself was thought to fall short in efforts to support SOs.

### 5.6.1.3 Stigma of working with SOs

P54 was very aware of how “society has a stigma around that [SOs]. I'm sure I can say that I probably somewhere inside of me I don't like some of those types of offenses. There may be sort of a scare of what's worse to what's a bit more [pause] not as bad so... society's bestowed their judgement upon them and then this is their punishment.” Thus, P54 was aware of the stigma but distances themselves from the implications for their self and their work. The consequences, however, of the social stigma were felt as pronounced, possibly affecting parole suspensions and the sentencing in historical crimes, two examples provided by participants.

Regarding the former, suspensions, P74 explained how their office is rather “conservative”, which they described as equating to many parolees being:

suspended a lot—like in my mind—I've worked in many different offices.... But I mean every office suspends at a certain rate. They just seem to suspend everybody. Especially sex offenders. Like if they can find a reason to suspend a sex offender, they're gone. They're not getting them six chances.

P74 says there is a misperception of SOs as more likely to breach, when they felt the truth was most SOs are not going to reoffend while they are serving a sentence. P74 continued to describe how “there are the chosen few that you need to be real careful with. But they believe the risk is higher than it really is.”

Regarding the latter, historical crimes, P74 explained how impactful stigma, using the example of:

a guy [who] molests his grandchildren. And he's a historical sex offender. So, he didn't get convicted and sent to jail until many years later. So, these grandchildren are now, say, 30 or whatever. He has no contact with them. He has no grandchildren. No nothing, right? So, this guy comes out into the community, and everyone is freaking out because of what he did like 35-40 years ago. But he has no victim pool.

P74 spoke to how, with historical offenses, the person being punished is not necessarily the same person with the opportunity or desire to commit such a crime in the presence. Thus, they question, like many others, how a person who has not been convicted of such a crime in 30 or more years, and thus is no longer a threat to society or public safety, still has to serve a federal prison sentence. The reason, as per P83, is simply how society is focused on the “most heinous crimes and that is

the social norm of what's the most heinous" to shape their understandings of SOs.

In a similar vein, there is a stigma tied to even working with SOs. P44 explained how they do SO programming "because there is nobody else to do them." However, they do not mind that "part of the job" because programming is "an important, important aspect of public safety. I think its huge because in my opinion—from what I've noticed, people are more horrified of sex offenders than people that commit a one-time murder." Here, P44 confirmed the SO stigma in society as well as in prisons found among some staff and people who are incarcerated.

The stigma of working with SOs is pronounced to P49, who experienced "that look or that question, that's just like, 'how could you even do that? How can you even stand to talk to them? Or look at them. Or have conversations with them. How could you even do that?'" P49 further explained how "there's a lot of doubt in whether they can be rehabilitated." The CPO felt the unknown regarding SO rehabilitation in select cases, where they, due to inherent sexual orientation-related reasoning, will likely re-offend, was hard for many to understand despite the low recidivism rates among most SOs, which society may be unwilling to accept as truth.

P49 spoke of the crimes of a rather notorious SO and felt challenged. They explained the SO is particularly "difficult to work with because he had no remorse at all, nothing..." Struggling for words, P49 continued: "In my job I have a lot of compassion and stuff like that. And I think it's a good thing to have that when you're trying to help people change. But I had no compassion for this guy. And that actually caused me a lot of stress coming out in different ways." Simply said, the person, not the offense, can make the work more challenging.

P57 does not feel a stigma working with SOs, but recognized how for "some people, obviously, kind of the 'it factor' gets to them. But I always say...'wouldn't you rather have them get every program [than get no] treatment at all? Especially if they're going to be your neighbour."

#### 5.6.1.4 Changing Interpretations of SOs

When asking CPOs about their experiences around delivering SOPs, four themes emerged: most had no challenges doing so, some avoided facilitating SOPs or even doing the training to be able to facilitate the programs, many spoke to their change in interpretation of the population with exposure over time, and, where challenges arose, some spoke to the fact i) some SOs cannot change and ii) some SOs lack accountability.

*Appreciating working with SOs.* Most participants who facilitated SOPs choose to do so due to finding the work fulfilling. P18 appreciated the program facilitation because they felt SOs "tend to be more, like, easier to work with as far as being cooperative. Being engaged in program." They, echoing others, find SOs more compliant and willing to learn in programming: they also "don't get suspended as often, they usually start and finish programs, they tend to be an easier population... they're easier to work" with. P6 did not find it difficult to facilitate programs to SOs:

I don't agree that it's a hard population to work with. I really liked it and I would go back to work with them again, but it's a hard population. And so, what they're asking program officers to do, with this national program, for me, it's not okay.

Thus, they found the work "hard" but enjoy the population and helping people deal with their

misinterpretations (including around consent). Participants felt they can make change in the lives of many SOs. P31 has been facilitating SOPs for over a decade. They exclaimed with confidence: “as soon as I got into the sex offender side of the house, I was like, ‘oh yeah, this is where I want to be.’ Because this is somewhere that no one wants to be. It seems like a lot of people don’t want to be there, but I found it fascinating, and I don’t know why I was so good at it, but I was really good at it and I kind of found my niche there.” Their words elucidated how the stigma stops others from the program facilitation, but also how they feel their work is meaningful in the same. P30 felt reading many of the reports at the same time can be troublesome, but, nonetheless, they appreciated the program delivery.

To perhaps, in part, protect against the realities of sex-offenses in some instances, a group of CPOs described being indifferent to the convictions of those in their programs. P74 did not mind working with SOs. However, required breaks because “they’re more work because there’s more assessment involved with it. The reports are longer. It’s more work but it’s also—sometimes like you try to disengage and not be emotionally invested in it, but some of this shit is pretty fucking disgusting. So, it bothers you sometimes.”

*The Stigma of Appreciating Working with SOs.* Many CPOs felt a sort of discomfort when admitting they largely enjoyed working with SOs and facilitating SOPs. For instance, P31 felt “weird people like teaching sex offenders.” P9 also never found challenging working with SOs, but they described the reality as “funny because like it never was for me before. In the sense that I can always wrap my head about a behaviour. And the context from which it occurs, without like endorsing the behaviour obviously.” Thus, despite all the “good” suggested about the facilitation, they still described their appreciation of the facilitation as “funny.” Others, perhaps in part due to the stigma, avoided such facilitation, even as a point of frustration to their colleagues.

*Avoiding facilitating SOPs.* P58 was asked to deliver SOP, as they were trained, but “resisted it.” P48 explained how “It’s not for everybody.” CPOs found frustrating when other CPOs felt unable to work toward rehabilitation with people who completed sex crimes, they have a job to do and not selectively. The narrative was quite common, as P22 admitted avoiding the facilitation of SO programs for “10 years”. They saw stigma as why some officers do not do SOPs rather than the programming and clients themselves. P51 explained how “there’s a number of program officers in our department that are not willing to work with sex offenders.” In response, they felt “sometimes we have to educate our colleagues about the best ways to work with some of our more complex offenders.” P76 opted out of “opportunities for training in that [SO] programs because it’s not something I’m interested in delivery to.” P37, who continued to refuse to facilitate SO programs, still felt “the SO program itself is fantastic, it is well organized. It’s well laid out. It is structurally sound as far as a program.” P43 has trained for SOP facilitation but “I refuse to do the program after taking the program and having my own experiences ... I can’t put my biases aside and I believe that if I ran that program, it would trigger me too much personally, so I refuse to do it.” P69 “didn’t really notice much” when working with SOs, explaining “it didn’t affect me negatively like it has for some of my coworkers.” Thus, CPOs, selectively, did avoid such program facilitation.

*Changing Interpretations of SO Program Facilitation.* P7’s opinion of working with SOs has changed over the years “quite a bit.” They explained how:

Before, when I first started, it wasn't very good. I just thought they ... weren't people. But as I got more involved and start seeing more things and stop looking at things so negatively and start just looking at them as people, my opinions have changed. A lot of these guys, especially the Indigenous [SOs], they have never had the opportunities that you and I have had.

Thus, like many others, P7 has compassion and empathy for the SOs and felt positive about working to support their preparation for reintegration post-incarceration. Likewise, P47, when they first started facilitating programs, felt "I'm never working with sex offenders". They justified their position in having "a nephew and a niece, and they were children, and they were really young," which made reading reports very difficult. They were also opposed because of their loved ones being forced into Indian Residential Schools. Later in their career, after coming across an advertisement for a SOP position, they decided to try the position. P47 felt doing the SOP was an opportunity to "try new things." P67 explained how, when he first started, he was "quite reluctant" to deliver SOPs. But working in a strong team, they learned quickly. In response, they said: "as much as I was initially uncertain about enjoying working with offender that committed a sexual crime...it becomes less confronting as time goes by, I guess. So, I kind of, like, felt more confident as time progressed." Across these cases, the CPOs developed more positive views of SOs in comparison to before their SOP delivery experiences.

*SOPs.* SOPs are about everything from "social skills" (P61) to abilities in communication, but with caution as required by the population and profession. SOPs are reported to have changed. For instance, P6, worked with SOs in the 1990s, and disagreed with some of the changes to programming CSC made since. They explained, how when "I was working with sex offenders, it was back in the '90s, and it was viewed as a therapy. And we were paired with a psychologist. Now, it's considered a treatment program." However, they felt the program shares challenges with the "multi-target" program and should not be delivered by just one facilitator, for reasons including the degree of "cognitive distortions" which they described as "so incredible that to try to be one person doing that [delivering a program], I just think it's ridiculous...That it's not therapy." Likewise, demonstrating the challenge was how COPs who had facilitated programming years ago, like P83, regretted a change from how a "psychologist [used to] work with us and stuff. They don't do that anymore. In fact, they changed so much that psychologists don't even deal with sex offenders in CSC anymore."

There is an exception, however. In institutions for women, a mental health staff member does co-facilitate the program, according to our participants. P27 found SOPs "weird" because they apply certain assessment only to the women SOs and not the men SOs. They explained: "I know it's not like gender diverse-specific, just in terms of the way we facilitate sex offender programming is different between the men's and women." They continued to explain how in the men's facilities, the program is facilitated by a CPO who has undergone SO training, while in the women's facilities SO programming is delivered by a CPO with a psychologist – or a "mental health person". P27 valued how, in women's facilities, "a mental health person is synced up to the correctional programs officer, so they work in tandem with each other. We get that extra support in the women's institutions, but we don't get that extra support with the correctional programs officers that are delivering the sex offender training facilitation in the men's sector." Like others, P27 viewed this as a disparity between the two populations and is "sorry" because they felt men SOs suffer as a

result. P28, who has delivered SOPs, although does not currently, says: “The program material is different [when delivering to SOs], explaining “some of the skills that are the same, but there’s additional, say, skills or information that is geared towards just sex offenders. But a lot of the other material is, is the same.”

#### *5.6.1.4.1 Other challenges related to SOs*

P83 felt working with SOs can be both “positive and negative.” Many, though not all, CPOs were affected differently by offering programs to people convicted of sex-related offenses. For example, P15 delivered SOPs and has “certainly gotten used to” working with the population over the years, such that “nothing has overly surprised” them. Echoing others, P15 felt “numbed” or “desensitized” to the “violent, sexual assaults” but is always focused on helping SOs make “better choices for themselves.” Thus, despite being desensitized, CPOs tended to not feel affected by the details of offenses or from working with the client. Yet, despite their self-reported desensitization, CPOs still did at times feel the ramifications of the realities they were exposed to at work. P1 felt “in the position where I can handle it” and described being “thankful” and “lucky” because “it doesn’t affect me like other staff.” P1, like most CPOs facilitating such programs, felt immune, although feels surrounded by people who are not. The narrative is “most officers really quite dislike delivering [SOPs].” P2 exemplified the dislike, as they found working with SOs “difficult” and, in response, have avoided delivering SOPs “the last couple of years”.

P40 admitted there are “a number of challenges” when they were facilitating SOPs, because they were doing phallometric testing early in their career (i.e., they viewed adult and child pornography and recorded the SO’s sexual reaction to the porn) and working with SOs to “decrease their arousal to the inappropriate stimuli and increase their arousal to appropriate.” The effects for P40 were extensive, but they only now are aware of “the impact that [the job] would have on me for the rest of my life [laughter]. The fact that I watched real child pornography at work. I still have some of those images burned in my memory that come back to haunt me from time to time.”

Complicating such exposures is the inability to talk about the offenses/SO, given “nobody wants to hear about an offender touching a baby. But you need to talk to somebody about that. The only person that I can talk to about that is, like, another facilitator who teaches the SOP. [they] can understand what I can go through” (P2). The work, then, can be isolating due to imposed confidentiality. In response, many CPOs facilitating SOPs try to compartmentalize their work such that “when I’m at home, my work didn’t exist. Otherwise like my daughters would have been—I don’t know. Locked to a radiator in my basement to keep them from being sexually victimized. So, I mean it’s weird. It’s a weird one.” However, like P49, CPOs recognized “that’s not my job to be judging this guy. I should be helping him.” Perhaps, for these reasons many CPOs do have spillover between their home and work lives. Likewise, P28 is always hypervigilant, including when facilitating SOPs. For P28, after “too many times [having] conversations with him [her son] about [how] you don’t let anybody touch you ... had to tell my manager I don’t think I can do one of those programs again... because it really impacted my home life and even my relationship with my partner.” Others, like P40, felt facilitating SOPs affected their parenting and, thus, homelife.

#### *5.6.1.5 Gender of Facilitator with SOs*

P46 expressed how situations have arisen where “it should have been a male working with them

and not a woman. At least to start out.” Likewise, P80 felt “being a woman in this career has been very hard,” affecting safety and her self-presentation “all the time, every day.” These CPOs valued being cautious to avoid boundaries being crossed and managing “sexual attraction towards me” (P80). Simultaneously, P31, a women facilitator, recognized how many SOs “carry a lot of shame and guilt”, thus some can start rather “guarded about sharing with me.” Thus, there are many dynamics to balance while trying to ensure rapport building. They strived to bring a comfort level to the programs yet still must navigate potential boundary crossing, if intentional or not. Some women facilitators admitted, given how programs are described as historically “very male dominated” in facilitation, they ask participants “how do you feel about being in a program with me, a female?” which is met with affirmation that a women facilitator is welcomed. P19 reported, in working “mainly with SOs,” being told “repeatedly by the sex offenders they much prefer a woman teaching it as opposed to a male cause they don’t feel judged, and they have told me that over and over and over again.” This is despite their boundaries and class rules, like never speaking about or to women “in a derogatory manner” or about their victim, never using their victim’s name, being intolerant of “victim blaming because when the victims are minors, they don’t own anything”, etc.

Overall, whatever the gender of the CPO, the CPO needed, as per P22, to be “used to talking about masturbation and fantasies, and preferences and stuff like that, and how to work through that.” P36 explained how, “in a classroom...I’ve become quite comfortable talking about things that I never thought I’d be able to talk to a group of men about,” being a woman. The participant enjoyed trying to figure out the “why” behind the offense, viewing their work as “almost like investigating, trying to figure things out. Like, close to half of these guys don’t know why they did what they did.” They believed understanding the client’s circumstance can help them understand their actions and prevent recidivism: “hopefully they can change things and go in a different direction in life.”

#### 5.6.1.6 Easy in Demeanor, Difficult in Need.

P46 explained how SOs “kind of go out of their way to be polite and personable.” Not surprising, CPOs found SOs easy to work with in class, professional, with “good jobs” and able to “function pretty well in society ... [even if the] content of their offences can be hard for some people” (P39). Likewise, P23 called SOs the “the easiest population to work with,” but reminded how the material and subject matter can be challenging.

For this reason, SOs are considered easy to work with but with high programming needs. P48, like P33 and many others, explained how doing programs with SOs is hard work, explaining how having four SOs in class is “like doing four different programs with four different guys.” P13 provided the example of how “you [are] doing a pre-program interview for two hours and a post-program interview for two hours, you’re also doing the STABLE-2007. So, that’s another almost two-hour interview.” CPOs felt the workload of facilitating SOPs as more intensive than other programming due to the diverse and additional tools required, assessment necessary, the additional training, and the scope of reports.

#### 5.6.1.7 Challenges with Assessments Cannot Change.

P80 described assessments as a “big, long procedure, but it’s a lot you do the STABLE and the STATIC-99 and some other work to do, to figure out what program they go into.” Yet, as per P44,

“It doesn’t matter how much training we have. You have to be able to defend your work.” However, the participant felt some of the SO assessments are challenging and does not feel confident in their administration. P31 explained completing “specific training for the program, obviously, but also with the risk assessment tools. So, we’re trained in the STATIC 99, the STABLE, and, also, the ACUTE... the ACUTE, we only run in the community. So those three different risk assessments are run.” They continued to explain the need to “follow the guidelines of when we’re allowed to run them.” For example, running the STATIC first. The concern with the STATIC, however, is that the STATIC scoring “rarely changes, because it’s all historical stuff.” The problem, despite if one never reoffends, the STATIC scores will remain consistent placing a person in a high-risk category than may be warranted.

For this reason, P31 preferred to run the STABLE, particularly when an SO is moved into the community. They are cautious of ensuring they run assessments within the timelines they are “allowed to do” and described how “it’s really kind of cool to watch... change, but it’s actually coming out in the risk assessment that I’ve been trained to apply to his case.” Thus, CPOs can see program effects when running certain, but not all, assessments.

#### 5.6.1.8 Treatment of SOs

Due to the trauma, stress of the job, or other operational or organizational factors, P44 felt there should be treatment or intervention, even debriefing options for CPOs facilitating SOP. They noted how:

managing certain high-level activities that cause a lot, a lot of hurt [is hard]. And ah we don’t have that [support]. Instead, you have EAP. I’m not going to call EAP to tell them that I just had another nightmare about this LTSO... But [if we had] someone that’s here inside. Or, I’m not saying 24 hours available to us, but I think someone that understands.

They believed such support would help, versus what P6 described as a lack of treatment for “people working with sex offenders”, stating there is “nothing provided to them.” They felt the lack of intervention and treatment is “absolutely again, horrific.” They recognized how, despite being fine working with the population, “it has a bigger effect on you as a person, then does the non-sex offender population.”

#### 5.6.1.9 SOPs and Remote Work

P9, a CPO, primarily delivered “sex offender interventions remotely [since COVID-19] from home. Because they didn’t have a body over there to do it.” P9 was concerned as they knew “we need to deliver to our offenders” but insisted “I’m absolutely not working with a sex offender over the phone. I have to be able to see them. Nobody is going to be masturbating while recounting their crime process to me.” But, with the pandemic, some CPOs had started to deliver SOP remotely, considered largely a less than ideal situation.

### 5.6.2 Transgender Prisoners and Programming

Working with transgender prisoners creates unique program delivery experiences for CPOs. Regarding the programming itself, P20 described, within the organizational aim to standardize, “it’s exactly the same material. The transgender people are just put into a separate group.” In

response, CPOs spoke of unique programming challenges with people who completed their crimes as men (i.e., sex crimes) and then transitioned and are now in women's programming. This created difficult dynamics and concerns about liability (e.g., "talk about a male—technically arrested male—sex offender [who] want to transition, but the female programming talks is just specific about [being] victimized by males. So, I think they're having some issues probably with that right now" [P83]). Here, CPOs pointed to the potential limitations for program offerings in meeting unique needs, and the convention of sex-based segregation tied to anatomy versus expression, and identity. Moreover, transgender prisoners in programs can create ambiguities, particularly when their transition has occurred after the crime. The operational practice appears to offer programs as per the current gender-identification, which can increase CPO workloads. Despite the drive to standardize, CPOs felt "there's not a lot of policy in regard to" gender fluidity (P8). The challenge here is aligning programming with lived experience. P8 explained how someone who has lived decades as a man "by putting them in a women's programming—if they are presenting as women, obviously they're going end up in a women's institution and in women's programming—but they may not have the same experiences" as assumed by the program curriculum. Given experiences are unique, as P8 stated, CPOs must navigate human needs despite the bureaucratic mandates. Yet, they spoke of a lack of flexibility (e.g., "it's hard for them, actually hard for them, and hard for CSC to adapt because it's a big system" [P33]).

Speaking to institutions for women, P19 stated their practice was

I made sure I introduced myself because it's important that they feel you know that staff aren't gonna judge them and so I always make sure I introduce myself to them all the time ... When I worked in the women's prison I worked with a lot of transgendered offenders.

Sensitivity to language, like pronouns (i.e., he/she/they/two-spirited), and lacking judgement were identified by CPOs as key when working with trans program participants. P19, speaking to prisons for women, continued to explain how they "never really witnessed anybody having an issue, like, offenders having any issue with [trans prisoners]. I don't think they really care. In the women's prison, they love the FTMs, love them." CPOs also talked about having relevant conversations about, for instance, abandoning male privilege (e.g., "I say now that you are transgendered, I say it's really important that you understand how women view relationships and so we just have a conversation about not being pushy not being demanding, letting go of some of that male privilege" [P19]). Thus, CPOs described their sensitivity to folks transitioning, especially for anatomical males entering women's prisons and bestowing the expectation of that space, addressing 'male privilege,' for the person transitioning into the sex-segregated place.

P22 described the tension between client welfare and wellbeing that arises at times, whereas some CPOs speak of confusion (i.e., "she referred to herself as 'she' but then she tells other people she wants to go by 'he', so I don't know if she officially would be considered transgendered cause she doesn't necessarily refer to herself" [P43]). P43 spoke of how, working in an institution for men "it's a little tricky sometimes" given transgender prisoners' unique needs in the classroom and sensitivity to pronouns through inclusive language, which can change quickly in select cases. Moreover, CPOs recognized not all prisoners are accepting of trans prisoners, despite many being accepting (e.g., "it becomes a challenge because not everybody there accepts that" [P4]). CPOs may find themselves coaching trans prisoners to navigate adversity among peers.

While some CPOs spoke of celebrating staff members' and prisoners' diversity (e.g., "we had a meet and greet last week for Pride month with staff and the offenders, and we had a little cake. It was really nice" [P5]). These moments of celebration were felt to help morale and culture, as well as contribute to the alliances and relationships among people in the space. Conversely, CPOs also spoke of harms, which could be also due to the relationship between the prisoner and CSC rather than their gender identity. P45 spoke of the experiences of vulnerable people because the organization itself can cause harms for the people within the organization. Some spoke of misogyny and homophobia:

We have had some transgender people in groups. And for their own safety [we have had to] finish the program one-on-one with them or suspend the people who are the problems. At the same time, it's like people who you don't think might be a problem, who could get pressure from other guys on their range to do something in the group. For whatever reason, the offender's homophobia and all that kind of stuff is very rampant within the inmate population. And most [men] inmates do not accept transgender people or anything else. So, for their safety a lot of the time we have to kind of keep them—keep them aside so they don't get hurt (P46).

Thus, in men's institutions, CPOs perceived trans prisoners as more vulnerable, whereas they are "loved" in women's institutions. Finishing a program one-on-one due to safety concerns a way CPOs focus on meeting participants' individual program needs. Yet, doing so requires flexibility, which is often hindered by developing standards. Thus, crafting program offerings to clients in an engaging way was a hurdle that complicated the didactic- and compliance-orientated approach to standardized programming. Either way, CPOs tried to ensure human dignity remained intact in the classroom (e.g., "the group guideline, treating everybody with respect. There've been no issues. The policy's quite clear... I always say 'that's your personal opinion; you keep it to yourself'" [P48]). At its core, CSC policy, according to P48, was interpreted as creating respect and setting a tone responsive to human needs.

Clear across CPOs' statements was a need to consider trans prisoners in program development, offering, and delivery. Some CPOs, like P40 and P34, reflected on how discussions about trans people's needs have changed over the years and there are still challenges navigating the workspace that was not intended for trans people, as CSC penitentiaries have always been sex segregated in design.

### **5.6.3 CPO Gender**

The gendered dynamic with diverse CPOs working together in prison and correctional workplaces was sometimes framed as necessary to establish stasis and equilibrium. But unique challenges for women working in a male-dominated industry, as well as engendered interpretations for men working in programming, remained as programs were, at least by some, understood as relatively effeminate work.

#### **5.6.3.1 Women CPOs**

P78 earned the "same level of respect as male facilitators" but there are still people in prison, just like "people in society in general, that have an issue with women in authority or within doing

certain jobs.” The workplace “remains to be a very male dominated” and in consequence P86 felt “if I was a man these characteristics [vocal, outspoken] would be very valued. Whereas sometimes I feel it might be looked at negatively because I’m a woman.” The consequence was, for some women CPOs, an interpretation of their work as undervalued or “emotional” (P86) evidenced a double standard in favour of men that could be patronizing. P71 felt patronizing behaviours from both program participants and staff, who she felt “don’t say it in that many words, but absolutely believe that women are not as smart, not as capable, and not suited for this job. So, you get a lot of questioning of your abilities or your decisions”. Such experience of paternalism, misogyny, and even sexism did occur, neither normatively nor sparsely. Some new staff felt women CPOs were viewed as inferior, which in part was attributed to the nature of select individuals’ criminal offending:

Most of the offenders that we work with have at least one incident in the past or the current offence of violence against females. But some of them just have such ridged, stereotypical views of women. Which I think is one of my goals to try and challenge in the sessions. Whether its women should stay at home. Or women are the caretakers. Women are overly emotional is something that I hear often (P84).

They’re violent and they’re manipulative. And at the same time, they’re human. I enjoy my groups where we joke, we laugh. We cry. ... They cry. I think as a woman in programs, it’s good for the men specifically. Because they get to see a different side of a strong woman. And I think it’s empowering to be able to show them, no. I am a strong, healthy woman. And this is what it looks like (P37).

Thus, women CPOs felt they had the specific role in programming of modeling pro-social behaviours and evidencing how women were not equal to prisoners’ interpretations. They felt responsible to show their program participants, for example, not all women were after their money or had material needs, etc. Instead, they modeled balanced and kind relationships as they could be had in free society with people of any gender. Nevertheless, the perspective of women as too sensitive was something women CPOs fought to change in their actions and facilitation. Some women had experienced particularly difficult challenges when facilitating programs:

It depends on the groups. Sometimes you have groups that are more respectful .... And [then] they [can] lack that respect. So, then you get a lot of people—you’re in a room full of men who are personally trying to attack you. They’re not there for the benefit (P77).

Other challenges arose for women facilitators if they felt sexualized in the classroom, which meant the facilitator had to reinforce accountability and exercise authority to ensure behaviours ceased. This boundary setting was critical in cases of domestic violence, and for some participants being sexualized was too much. P9 said “You’re being downloaded into a spank bank. Like you know this. But it’s a whole other thing to watch it happen in real time.” Therefore, for female staff, the experience of working with men was sometimes daunting – it was more work and a different kind of work at times – especially when the staff member perceived as attractive and received unwanted attention. Some CPOs had been sexually objectified and the dynamics of being a woman in a position of authority created an experience driving vulnerability and, in response, insecurity.

For some women CPOs, safety was directly to their gender. Yet, gender experiences were

unpredictable. A women CPO described, for instance, a reflexive approach to interviewing a male client while facilitating an assessment about sexual reoffending. P31 simply talked about being a woman facilitating programs and has a conversation about the challenges one may associate with their gender (e.g., “I had one guy that did not like having me as his facilitator, because he figured that the system he was being set up because he had a female”). Thus, the CPO was fighting against impossible ideologies and could not be held responsible for misapprehensions by program participants. Overall, tensions can emerge for women CPOs due to their work, which requires awareness and increase the emotional and work toll of providing support to program participants.

Of note, CPOs also drew attention to the need to have women in institutions intended to house men. A men CPO explained how sometimes a “the female officer can walk into that situation and kind of [talk] in a ‘mom voice,’ just immediately that offender is going to back down. It’s going to stop because they don’t want to offend the female. And again, it’s not all. It’s just some” (P59). The CPO speaks to a unique role of the women CPO, which is the neutralizing positioning they can bring in male-dominated environments.

However, the tendency to place the onus of responsibility on men to protect women invoked a sexist view, framing women as more susceptible to victimization, including by manipulation. Participants did acknowledge how boundaries sometimes slipped when one “missed the warning signs,” but rather than recognizing these incidents as problematic, they were framed as “how do we keep the women safe from these offenders?” (P20). P20 further elaborated on this, speaking to how relationships sometimes develop between CPOs and clients, providing an example: “they have these long social conversations that turn into more personal conversations because they would spend three to four hours alone together daily. And that eventually developed into them having, like, a closer relationship ... That relationship has, I believe, still continued to this day.” These words highlighted a contrast to the view of women as passive victims, showing women CPOs also make active choices. Relationships, whether compromised or intact, were complex, and the experiences within the workplace sometimes led to meaningful, though ethically challenging, romances.

Conversely, others described forms of sexual harassment and paternalism which imbued hostilities and compromised relationships in the workplace. For example, P16 has “had quite a few older men coworkers mansplain things to me and that’s very annoying.” While P37 speaks to how, due to potential sexism, “especially with programs because we do work closely with offenders you need to dress a certain way. They’re not your boyfriends. They’re nowhere near a potential partner. They’re clients and they’re sick.” Thus, CPOs described a need to remain vigilant about one’s conduct in the environment to ensure relationships are appropriate and remain intact. Particularly given, as per P61, program participants have decided (delusionally) “that he and I were in a relationship. We were in love. I was going to quit my job for him. All of these kinds of things.” Thus, women CPOs did navigate stressors that their men colleagues did not need to be as aware of. Of note, conversely, some men CPOs felt there was opposition to men facilitating programs in prisons intended for women. P26 explained:

They frown on that. I don’t know of any males that are actually facilitating female groups. And the reasoning behind that is they say a lot of the women would be scared of males, have been abused by males, and that type of thing. But they have a lot of females that will facilitate the male groups. And the reasoning behind that is they’re saying that they want

to show females as having their own brains and being more than just, uh, it sounds horrible, but just a piece of meat.

### 5.6.3.2 Men CPOs

Men CPOs explained feeling both empowered and limited by their gender. P59 spoke of their gender, in stating “it affects me being a man, is just the perceptions of strength that you’re supposed to have, both physical and mental, and also it’s still relatively not talked about so much.” Thus, P59 felt there is still a predominant stigma that pushes men to “just suck it all up and be fine,” despite the challenging realities they encounter. He explained “I’ve already seen a couple of male officers who’ve witnessed horrible things and had to try and help with that. And one of them, it took him thirteen months before he was forced to go seek help” (P59). Here, stoicism is apparent in his words, which described the capacity to reflect and situate oneself in relation to stigma, mental health, and well-being. The challenge is, then, how to normalize mental health needs while remaining in a climate of stoicism where “suck it up buttercup” has been the norm (P15). Yet, CPOs spoke of change, particularly given how they teach the program participants. CPOs explained a need to effectively role model and demonstrate leadership through programming to men by dispelling myths of masculinities and unpacking how being a man is understood. The reality is CPOs are “teaching problem solving skills and we’re teaching social skills and that applies no matter what the gender is” (P26). Here, the gender of CPO or program participant is indifferent. Women CPOs explained how they have “worked with men my whole life... Men are blunt, and they will say when they’re going to say and get it off their chest” (P8). Thus, differences in working with men versus women were recognized beyond CPO gender. The challenges associated with gender are considerable and required holistic attention because people cannot be reduced to a static expression such as gender.

## 5.7 Covid-19 Pandemic

Consistent with other correctional workers in Canada (e.g., Norman et al., 2021; Norman & Ricciardelli, 2022; Ricciardelli et al., 2021), CPOs too had their work routines and occupational stress deeply affected by the COVID-19 pandemic. Our interviews with CPOs were conducted in 2023, three years after the beginning of the pandemic and the implementation of most intensive public health restrictions (mobility restrictions, mandatory masking, etc.). For many participants, at the time of the interview, workplace routines had returned “pretty much back to normal” (P5) and the stresses that had emerged due to the pandemic were “getting better” (P25). Despite these commonly expressed sentiments, some CPOs described how changes introduced because of the pandemic have continued to affect their work.

These changes included: management expectations that no longer match the reality of a post-pandemic workplace; a loss of cohesiveness between colleagues; client expectations of flexible or remote program delivery, even when that was no longer feasible; technological issues affecting virtual work routines; and lingering mental health struggles for CPOs.

Here, we now unpack several additional ways occupational and organizational changes brought on by CSC’s response to the pandemic continue to affect the work of CPOs.

### 5.7.1 Managerial Pressure About the Speed of Programs

Most notably, the current pandemic-related stress identified by CPOs was lingering pressures from upper management to ensure clients move through programs in a timely manner, while facing the reality of how program completion slowed during the pandemic. P1 explained:

They put in interim procedures to manage the pandemic and our site is actually using the interim procedures and then the regular procedures interchangeably. So, [hypothetically] let's say that program that would normally take seven months, we might finish off in a month now.... How it started was, [management said] "hey, the pandemic's here, these inmates need their program completed – for valid reasons – can you maybe trim some fat if they're a smarter group?... But it quickly evolved into an unreal place.... The primer primes the offender for the main program.... It's a critical portion of the program and is the springboard. It's [normally] 10 days or 10 sessions. [Since the pandemic] we do it in a day or a session.

P1 expressed the view toward the greater pressure to condense sessions into a shorter time periods, to move clients through their programs, as a pandemic derivative. Several others expressed similar sentiments, particularly due to pandemic-related delays to clients completing programs. P42 stated management is "trying to push people through [programs], to things rolling really fast, because we were so backlogged [due to COVID-19] and stats are down." And P64 said:

Right now, I feel like we're back to normal for the most part, other than doing some catch up. We're a little behind with our waitlist because over COVID, things obviously slowed down and we couldn't have full classrooms.... So that really put us behind in our waitlists.... Now [Pos are] trying to do a little bit more catchup, so there's a little bit more pressure to stay on timelines and get guys through group.

Like P64, other CPOs described feeling a "pressure" tied to changes occurring at work since the pandemic, a pressure to "catch up" with their seemingly insurmountable workload. P61 stated, since the pandemic, "we're getting all this pressure from Ottawa: 'program completion, program completion'"; yet, that due to the increased workloads and demand for programs, "where it used to take three months to do a moderate [program], now it takes five or six." And P16 said the pandemic created "pressure to show that we're getting our programs done," they felt if clients were not completing programs, the blame was placed on CPOs who were then scrutinized. P16, like P30, felt there has been increased scrutiny from upper management, when compared to before the pandemic.

CPOs described additional aspects of their job duties as changed due to COVID-19, changes which have yet to return to their previous state. For example, P4 described stresses due to working exclusively with prisoners in protective custody, where a pandemic-related change (that aligns with historic program delivery, before the end of protective custody) to program structure occurred for vulnerable prisoners which appeared to be helpful for that population, yet the work has taken a toll on their mental health. Other CPOs described being given pandemic-demanded responsibilities that have not ceased with the pandemic's end. P21 explained they previously facilitated high-intensity programs with another CPO, yet this changed for safety reasons due to COVID-19: "the high intensity is supposed to be co-facilitated two facilitators for 12 guys, because of the high needs of the offenders. So, during COVID, they broke us into individuals and had us

run groups of six.” Yet, at the time of the interview, P21 had only just returned to having a co-facilitator share the burden of program delivery. P37 felt that a managerial focus on moving clients through programs more quickly is causing CPOs to maintain pandemic-induced less than feasible workloads.

### **5.7.2 Relationships with Clients and Colleagues**

Some CPOs described heightened tension with clients during the transition out of the pandemic. P62 felt COVID-19 caused “waitlists for people to get their programs, and that kind of upsets...the offenders who are on wait list for that. If they’re getting you know, their parole dates denied and everything, that that adds like a new frustration that they consistently bring up.” P45 expressed empathy towards clients who are suffering due to long waits to access programs, as well as frustration at facing hostility for pandemic-related factors beyond her control. P76 similarly noted that the only lingering impacts of COVID-19 were “catch-up related with waitlists or guys getting frustrated with it taking so long to get into their program.” These participants indicated how working in a highly relational role means CPOs must handle, on an interpersonal level, the ongoing influences of the pandemic on the lives of their clients, many of whom, understandably, have experienced additional stress about completing programs to increase their likelihood of conditional release.

Some CPOs noted the pandemic negatively affected their relationships with colleagues, leading to a less pleasant work environment. P3 described their workspace as permanently altered since the office was rearranged for safety reasons, with detrimental effects on collegiality: “I have a cubicle now. We used to have offices, but...a few of us got booted from offices. COVID separated a lot of us.” P70, meanwhile, found the increased flexibility of working from home—while positive overall for many CPOs—damaged relationships with colleagues: “working from home became much more the standard, and then you lose...a lot of the social connections to your coworkers during COVID-19, and I still think we struggle to get back to it.” P80 felt the stresses experienced by CPOs during the pandemic have led to a more contentious work environment, describing a “rippled [effect]. A lot of stress, I think. I’ve heard a lot of shitty things come out, like fighting, people being aggressive, and just silliness at work that there’s no need for... I think it’s just stress from people being stressed.” P40 felt the uneven staffing expectations in the early days of the pandemic, where some categories of employees still worked and others were sent home, left lasting damage to collegiality among employees at her workplace. However, reductions in collegiality created a less pleasant work environment for some participants, but in the view of P85 also negatively affected CPOs’ ability to do their work effectively and provide comprehensive support to clients:

We used to be more of a cohesive team. I feel more now we work in almost like silos. So, program is programs, parole is parole.... Part of that is definitely COVID. Whereas before, if we had a woman in program and let’s say we knew she wasn’t doing so well, we would do like a little case conference. We’d get the parole officer, the CPO, maybe the primary worker. Whoever was involved with that person, we’d all sit down, and we’d get the person and themselves...and really try to work together. I feel that’s completely gone, which makes our job that much harder.

As participants’ narratives indicates, at some CSC work sites, long-term collegiality has suffered

from pandemic changes with implications for CPOs, other CSC staff, and prisoners or parolees.

### 5.7.3 Remote and Hybrid Work

Participants expressed mixed views having the ability to complete some work from home, which was a normalized routine during the pandemic, and at some (but not all) workplaces remains possible for CPOs one or two days a week. The hybrid work routine benefits many CPOs:

I go in four days a week.... If I'm doing reports or casework records or any kind of thing like that—because I have a laptop—I work from home. That is working better for me because it's getting me out of the negativity and all the fighting and the arguing. Which now that I've been away from it, I can't go back to that. I can't go back to the stress of everybody not getting along. And I feel like I do a better job writing my reports when I'm home. I don't have interruptions 30, 40 times a day.... So, it works better for me physically and mentally to be not in that environment five days a week. (P4)

Other participants echoed P4's endorsement of hybrid work. P12 identified being "allowed to work from home more" as a "huge, huge" positive and a "good result of COVID." P20 stated that while "the job itself has not changed...we are able to work a lot more from home, which is certainly a lot more helpful." However, not all CPOs feel permitted to work at home. P36 stated, despite hybrid work is not "hindering or impeding me from doing my job," it "is not an option, even though we all have laptops, we all have the abilities. [It is] just not an allowance to do some of our work from our homes. It's a frustration." As P36 and P4 indicated, even though some CPOs enjoy greater flexibility with hybrid work since the pandemic, others do not feel their managers or colleagues support such work arrangements.

The challenge is how some CPOs felt the pandemic forced them to perform certain duties, like client meetings, remotely, and the continuation of these practices is having detrimental outcomes without office space or the ability to work from home with support. Whereas many CPOs are open to offering virtual or remote meetings, as a positive for both program users and facilitators as well as public safety goals, others felt normalizing remote and virtual communication constrained their professional duties. P26 explained:

[During the pandemic] we went to more of a telephone-based model. I really, really didn't like that.... You can't get any body language off a telephone...[and] you never know where [clients] are at, you never know who's on the other end.... So it made it difficult that way. It also, it also really increased the workload because instead of having six guys in the classroom for a couple of hours, you had to make six separate telephone calls and talk to each guy for a couple of hours.

Just as P26 expressed, the remote meetings limited their ability to engage and assess the risk of clients effectively, P83 was concerned their caseload of sex offenders was difficult to manage on the telephone: "I don't know what that sex offender is looking at or doing while I'm talk to him on the phone. My job, 90% of my communication of non-verbal. I need to read them." And P51 stated "having interactions with other people is really difficult by phone, and so you're kind of going on file information from their parole officer or the halfway house of how they're doing." Clearly, some CPOs were uneasy relying on telephone communication—a newly normalized practice since the pandemic—to engage clients and monitor their progress.

So, given with COVID-19, CPOs could telework. If they wanted to or not, telework did provide opportunities and flexibility for uninterrupted report writing, which was appreciated. Another perceived benefit for CPOs was boundary creation, in terms of the overlap between program delivery and report writing.

## **5.8 Organizational Stressors**

### **5.8.1 The Organizational Culture**

CPOs described their work environment as challenging, due to the “miserable hierarchy” with much “slipping through the cracks” (P29), where sometimes people would not have their needs met. However, as per P71, “the process for getting these things addressed is hugely traumatizing” because of CPOs being questioned regarding how the situation arose and why they could not meet their clients’ needs – as if they failed. Thus, CPOs, like P71, felt more vulnerable after asking for help, rather than supported. In part, in response P27 felt “CSC takes normal people puts them in the system, and then when they become broken, mentally... They just kind of push them out.” These “people” are both staff and program participants. Thus, CPOs did express frustration with a culture of indifference and a maintenance of the status quo rather than change or transformation. In other words, there was a lacking “just culture” (Dekker, 2017) where people felt able to report concerns proactively and feared reprisal when they did. This was apparent in the tendency to blame individuals rather than look at wider social structures within the organization.

The culture was also thought to be unresponsive to human needs, both those of program participants at times (i.e., when the program structure does not allow for additional time on a top “these guys want to talk about” [P12]) and those of CPOs (i.e., not having adequate space to deliver programs), and limited by budgetary restrictions. The culture was also thought to be dismissive of CPOs, like P19, who “had contacted region about the issues and I was basically poo-pooed and said: ‘it’s not a problem, it’s you’ and I said ‘no, there’s this problem, this problem, [and] this problem.’” Asked to “figure out how to fix it,” which was interpreted as “snarky” rather than supportive, they did so over months. The essence here is management reacts to feedback, like suggestions, defensively, dissuasively, and as being imposed upon.

However, many described the organizational culture as responsive to accommodating their needs for inclusivity (i.e., disabilities). P31, who identified as disabled, has “people asking me, how can we make this work?” They provided an example of security staff being “like, alright, we’re going to have to figure this out” to help them complete the training despite their ability.

### **5.8.2 Report Writing**

Undoubtedly, and entirely overwhelming, report writing was the most stressful and challenging part of the occupational role. There was only one participant who enjoyed report writing, P45, who enjoyed most doing “the intervention stuff”, said they also enjoyed the report writing or administrative “side.” Beyond this exception, participants, like P3, described the stress, stating at “the end of the program, it’s the same thing. We review all their work. Do a final interview and then we have two weeks to write reports for ten guys. Basically, it’s like one report a day you’re trying to crank out. An eight-page report.” In part for the labour-intensive component, P6 named

report writing as the most challenging part of the job. P13 lamented “report writing. I’m a slow report writer as it is... And I just find those reports take me over a day.” They explained they are “very thorough and I’m reading the second assessment and PBC decisions and just making sure that it’s, like, ‘okay, this is what they’re saying the deficits are. Did I see any change in program? And what are some examples of how they’ve used these skills?’ So, I give lots of examples and I’m going through.” They spoke about how much material there is to cover to ensure the progress of the participant is well captured, expressing the process is highly administratively burdensome.

P11 called the job “really demanding... the workload that is expected of us is insane”, drawing attention to the limited time to meet with a participant who completed a program and to write their report. This is compounded by the need to write the report within a day. P30 explained the stress arising when CPOs at the institution are “called upon during crisis times” (i.e., institutional lockdown) which further impeded their ability to complete their workload, including the reports, because of other tasks they become responsible for overseeing. This is particularly disheartening when CPOs, like P14, take their job to heart and do not view reports as “ticky boxes.” Yet, P82 sometimes felt like “a ticky box” and “being told you’re a ticky box. It’s not very nice [laughing].”

P18 thought “75 percent of the job is sitting and writing reports that that no one really reads” instead of streamlining the processes to ensure more time is spent with program participants. P18 admitted to having “stages in this career where I’m 20 reports behind” and being unable to catch up due to other competing responsibilities, like delivering programs and meeting clients. P38 explained how writing a report “one a day” is “really hard for me to do it in a day. I work on the weekend. I work in the evening. I’m still doing that after 22 years... I would think my writing has improved, like a lot, throughout the years. But I still get stressed trying to do it well.” P53 wished “they can give us a day and a half per report” given they are “up until the morning, until late at night, and sometimes on the weekends, or I’ll call in sick and I’ll write that day because I’m behind on time,” which they described (i.e., taking a sick day to catch up) as a common practice.

P68 found the “paperwork, reviewing files” most stressful. This is all compounded by wanting to do a good job given a CPO is likely to “end up in court.” P41 referred to the “admin work” as most challenging, specifically the “paperwork. A lot of entering information”, which included report writing. P42 found report writing particularly challenging given they are also “responsible for doing case notes and casework records and the security incident reports if need be and then report writing.”

Parole officers are also a source of stress, as some are felt to not to understand the nuances of the CPO job, including the time required to write reports. P57 explained how “because regional and national says ‘oh well, you’re taking too long for reports,’ the parole officers look at us like we’re dragging our feet.” They continued to speak to the outcomes of such, namely feeling disrespected by parole officers too: “I’ve never fought with so many or been disrespected by so many parole officers as I have in the last five years.” Likewise, P14 found the “time constraints” most daunting, again tied to report writing, feeling constraints were imposed by parole officers rather than management. This is largely due to the perceived positive affect of programming on parole hearing outcomes. P14 felt there is a “push them out” mentality that “pushes” program officers to need reports completed immediately following program completion. In response P14 struggled: “I’ve got the pressures—and that causes me a lot of anxiety.”

Writing a report every day for 10 days would be fatiguing and repetitive, which could create room for error and that error can lead to legal vulnerabilities, as well as in terms of their employment. P75 explained: “You are just leaving room for error. And when you have to type 10 of these huge, massive reports out, by the last, nine and 10, your brain is bleeding basically. So, it’s not as well written as your first couple. So, I feel there’s a lot of room for error by forcing that timeframe.” Thus, a drawback of a report to be written each day is the fatigue of CPOs which affects the quality of their report.

In addition, P75 spoke to the administrative burden of paperwork (i.e., “it’s just like never-ending, stupid paperwork”) but, rather than focusing on deadlines, they felt the reports at time which the case management team wrote were overly lengthy, with unnecessary depth and daunting repetition:

Some of those reports as a parole officer—like, it is not necessary for them to go on and on and on in these reports. The stupidity is beyond me. Like, if you go into a probation office and you look at the documents they have, we could simplify this whole system, but we don’t! We just keep doing the same stupidity over and over again.

The repeated errors across reports (due to cutting and pasting) and unnecessary detail at times is expressed by P75, whose focus is on the ecosystem around programs. They link reports to parole which is hindered by cumbersome “repetitive, stupid, paperwork” processes. They questioned: “We can still cover our ass by writing what we need to write. But we don’t have to cut and paste 60 times the same shit in 20 different reports, right?” Thus, they recognized the need for documentation to protect against legal vulnerabilities (Dekker, 2017) but simultaneously contribute to redundancy, inhibiting purposeful outcomes of the work.

Recognizing paperwork is limited by the Offender Management System (OMS), participants did highlight how the system requires updating, not in appearance, but in how OMS is used, that is, the software itself.

### **5.8.3 Specific Programs with Additional Administrative Burden**

#### **5.8.3.1 SOP**

P61 felt the report writing and timeline collectively make impossible being prepared for class, explaining, “the problem with that is—especially with sex offenders—is we’re supposed to do a full file review, talk to the offenders, interview the offenders for the program, etc.,” which they simply do not have the time to do. In consequence, they combined interviews to maximize time. CPOs working with sex offenders found conducting the STABLE interview and assessment draining and time consuming given competing responsibilities, such as report writing. Particularly, P62 highlighted how the “sex offender stream...has way more work to it. And then you’ve got the Indigenous sex offender stream. And we’re all being given the same amount of time.” Thus, they believed considerations for what is involved in diverse programs should inform administrative responsibilities and timelines. P62 advocated “a change in timeline” away from “a one size fits all kind of mentality.” Thus, for many, “timelines and expectations” (P63) are most stressful.

#### **5.8.3.2 Indigenous CPOS**

P72 described the increased workload with Indigenous programs, where they must “include the

Indigenous social history, all those factors that affect them and their families to help create the person who's taking part in this program ... We also have them do what we call a healing journey plans for the future." Thus, these officers have more work but the same timeline as other CPOs, which created a sense of unjust and unfair practices and expectations. They felt, like P73, that "we're not acknowledged as having the extra work. We're given that same deadline. That applies for all of us given the ICPM."

P86 felt writing a "Indigenous program report" within a day is impossible, "or even a multi-target program with an Indigenous offender ... properly, [as] we need to be considering their Indigenous social history throughout that entire report." Specifically, weaving in risk deficits, progress, the cultural intervention, working with Elders, the observations of Elders, trauma history, Gladue, etc., requires additional time and attention. P86 continued to denote the vicarious trauma that comes with the "procedure itself for the program. Even outside of the design and the report, when you sit down and do preprogram interviews with the offenders for Indigenous programs, you're having conversations about their Indigenous social history. So, you're talking about trauma." The challenge further arises because many ICPOs are Indigenous themselves, thus, not only are they "eliciting vicarious trauma ... you as the program officer are kind of trying to support and manage that and stay on tasks and not be triggered by your own similar stuff" (P86). All the while, P84 explained, managing dynamics in the classroom is challenging—while being cautious of time—as they are navigating trauma, providing support, coordinating with Elders, and their own social dynamics, and work/personal life.

#### **5.8.4 Quantity over Quality**

P10 spoke to hinderances to their own performance review. Explaining they, too, are held to targets in the number of program participants: "If they don't get out on their earliest eligibility date, then I have that performance review because I didn't meet my targets." This is exacerbated by compromised health (e.g., "And I'm clearly sick"). The pressure to have the report "done by the deadline" (P10) created stress for the CPOs. Most centrally here, many CPOs felt programs, overall, came down to numbers, an effort on the organization to pass as many people through programs as possible to "look" rehabilitative. P83, in this sense, felt they "carry, like, 40 people. The point of our job is more qualitative than quantitative. I find that becomes a problem at times," largely because quality may be more successful but reduce numbers and thus can be negative for the ability of the organization to appear to meet their rehabilitative objectives and mandate.

Affecting the numbers is, as per P17, the "continuous intake," which they described as a "hamster wheel" that "can be overwhelming." Compounding the open intake are people being placed in programs when "it's not the right fit or it's not the right time." P31 echoed about the stress caused by "continuous intake." P17, like P31, felt CSC is "a numbers theme and so it's getting people out, and it's getting people through programs really quickly sometimes. It's drives me, actually, really crazy, because sometimes they haven't even really landed in the institution and realized they're serving a federal sentence and we're like 'okay, let's do programs.'" The challenge is being ready to meet participants where they are and providing the programs that they are ready for at the right time. Here, is the echoed interpretation that programs are about actuarial quantity over quality, confirmed by P77, who felt "over time we keep getting more and more admin duties" too.

There is a need for more opportunities to individualize programs, given there is an intensity to the

connection with participants, beyond what the officer learns about the participants, as they respond to their needs and those illuminated by parole officers and other employees. Here, P21 explained how:

you're sometimes meeting with guys who have missed sessions to do complete makeup sessions. Depending on if you've got behavioural issues with guys you're meeting, members of his team to kind of bring that forward and document concerns. Sometimes you're meeting with guys to just kind of motivate them.

CPOs tried to ensure their participants completed all program requirements yet also were aware of how there are concerns programs do not address which do require committed work. There are opportunities to pursue areas of needed intervention, like how P84 explained "I know that I am permitted to use that full two hours to go in depth if it was a guy who is lower functioning. I can take my time to explain the worksheets." Yet, there are also areas which are beyond the scope of the programs. This affected CPOs who, like P22 and many others, tried to be "responsive" in trying to "individualize" programs. However, they must do so while under pressures tied to the quantity of people who complete the programs, which is further hampered, when, as per P46, behaviour can lead people to be removed from programs they otherwise would benefit from:

Say a guy stabs someone else, which happens all the time, Now he's at the SIU. He can't be in the program anymore. Every now and then guys will get their medium and then they'll get transferred out to a medium. And then now he's not in the program anymore. So, like there's so many reasons why he'll start with 10 or 12 guys. And then a few months from now you're down to like five. Just because so many of them have done things that they'd have to just go somewhere else.

Thus, program participation can be contingent on prisoner's behaviours, which can have them removed from programming. In addition, lockdowns in institution pause programming and other organizational or institutional factors can also present as barriers to program completion in a timely manner, thus affecting the completion rates.

#### 5.8.4.1 Time Pressure

Participants described how the pressure to perform and demonstrate their productivity created stress that could hamper their work quality. The integrity of programming was affected by time pressures and the need to "finish". P17, for instance, described how "we do things at such a fast pace .... I wish we didn't rush them as fast 'cause I think we would see greater success." They felt driving program statistics were rates of recidivism and funds used, etc., but felt gender, identity, or criminal history did not lend itself neatly to such categorization. Thus, CPOs were concerned about valuing statistics over program success in driving participant wellness and health. For example, P77 felt CSC "prioritize[s] stats over mental health, well-being of staff...." Basically, the consequences of representing work predominantly by key performance indicators was the introduction of economic incentives more tied to quantity than quality of programming and success. The outcome included CPOs feeling their work was undervalued because "it's just numbers. There's no human kind of contact connection there, like, to truly understand somebody's role or what they've been through, nobody has a clue" (P80). Quality included care, while quantity may instead undermine care work for static outcomes.

P40 explained how calling the ICPM “superficial,” reduced efficacy and instead the programming becomes “counting ... Its more about numbers than it is about quality and effectively of the work.” In this sense, the efficacy of interventions was not thought to be ‘countable,’ yet CPOs felt pressured to “count”. P59 evidenced, through experience, how “some of these guys don’t care at all. They’ll just jump into it. They know that it’s a checkbox and it looks good for their parole... at the end of an entire program—Without doing half the work and with being a complete shithead, for lack of a better word, without showing any change, they still get a checkmark that they’ve passed.” These “checkmarks” and passes were thought to demonstrate CSC’s productivity rather than ensure program participant success. Overall, CPOs shared the sentiment of how their work was measured as detrimental and misaligned to positive prisoner and parole needs and, thus, outcomes. The key performance indicators as conveyed through metrics, for CPOs, undermined their works integrity because of time pressures, the misrepresentation of their work, and quality of the program being facilitated issues.

#### 5.8.4.2 Limited Sessions

P1 explained stresses in completing the required materials in programs within the allocated time. Recognizing participants “need their program completed for valid reasons”, they lament that activities which should take “10 days or 10 sessions” have evolved into “we do it in a day or a session”. This is attributed to “statistical performance, objectives they have. And one, maybe, to lower the suspension rates of a certain site,” rather than a focus on the needs of program participants. P3 here explained program timeframes are now embedded in Commissioner’s Directives, which translated into a lack of autonomy in how programs are delivered where CPOs cannot do longer make-up classes because they are limited to five or fewer sessions per week. P8 spoke, too, of the challenges of having “to run a condensed program,” where they are cramming material into classes due to restrictions on the timeframe for program delivery.

A further challenge was identified by P75, who found most difficult how CSC “constantly comes up with policies and ideas and everything that restrict my ability to be efficient. There’s always something coming up that is just preventing me from reaching like efficiently. I think that has been the most irritating part of my entire gig in CSC.” Thus, to manage the stresses of putting people through programs at an unprecedented and unfeasible rate, P85 felt “you have to be realistic. A two-month program isn’t going to all of a suddenly be the end all.” In this way, small victories required celebration.

#### 5.8.5 Teaching more than Program Curriculum

CPOs also felt constrained by having to teach social behaviours, language, and other factors beyond the program curriculum. Here, P44 pointed out how limited communication skills can affect program success: “they have not only poor ability to communicate but also, they have to do things in writing and end up with guys in the program that cannot write.” Thus, participation is challenging in programming for people with “deficits”. P4 explained how:

often with programs, I found that it’s so much more than just teaching the expected curriculum because a lot of our guys do not have the typical social norm skills. You almost have to teach them things that you would teach a small child. Just on manners and how you carry yourself and how you communicate. Above and beyond what the manual wants you

to teach.

As per P4's words, they spend much time teaching social behaviours or even language (i.e., with an English as a second language program participant) rather than program content, which is quite disruptive to the overall class.

#### 5.8.5.1 Need to Revise Program Content

P21 found the material constituting the program content stressful. They said: "I'm teaching a lesson that's been pre-designed, someday you're gonna look at it and say 'whoever wrote this, wrote it terribly and [it] needs to be fixed.'" Thus, program material can also create stress. P75 explained some programs are "way too wordy." They continued to note the "people that design [the program] is shit. Should be people that have been on the frontlines, not people that went to university and then got some master's degree and then went to region or national. You need to be in the trenches." In response, P85 felt when "making changes to actual program material, [they] keep coming to us because we're the ones on the ground." Programs are also thought to be written at the wrong skill level. For instance, P46 says "the majority of the offenders we have, have maybe a grade seven education... But a lot of this material is written for people who are way more advanced than that." They explained the material is "obviously for like a year three university student." Here, the participants believed more participants for programs would benefit from the Adaptive program because it is less complex in presentation.

There is a vast need, the predominant theme among CPOs, to revise and make programming more accessible and applicable. The challenges here are systematic/organizational, as well as in terms of content and individual needs being met. For instance, P86 felt "lost" because "of how programming is offered in the region and some of the barriers there which tie into the larger systemic issues," where, in consequence, they felt compromised because their participants are simply not receiving the optimal interventions. This is in part due to "a lot of the barriers in terms of operational issues but also issues in policy and procedures." Here, the operational and policies barriers harm participants' ability to engage in programs.

Another challenge arises in program integrity, where P55 found "there wasn't a lot of adherence to integrity in programming. I found that it was just a ticky box: 'let's get the men through the programming.'" This is reinforced by P55, who talked about drawbacks of programming, saying programs are "not meant to be delivered individually... And the program integrity, everything was thrown out the window. I challenged it a lot, I questioned it a lot, and I was told by management this is our new norm this—we're doing what we can to adhere to our numbers." Thus, adherence to programming is challenging, which is further impacted by perceptions of the quality of programs as less than satisfactory. Here, P22 explained how many of the "manuals" are not "very good" and should be "revised". P44 felt programs are "outdated", for example the substance abuse program is thought to compromising positive developments by, for instance, talking about safe drinking which may not be possible.

All programs are thought to be compromised and thus discouraging. For example, P61 challenged the ICMP, feeling "it doesn't do anything to address sexual risk. Nothing. It's very fluffy and everything on the surface. Because in the old programs we had a psychologist as one of the facilitators. So, they were qualified to deal with paraphilias and all of that kind of stuff. And we

are so not.”

As noted, some, like P73, questioned the design of the Indigenous programs, calling one a “very cumbersome program. They took the main program and like slapped an Indigenous thing on it. Sometimes things really work together well.” They also commented on some token symbols of Indigeneity which they find embarrassing, for instance “they put like headdresses on them. And it was really inappropriate. And they did that with a lot of different things. [Participants] were like, ‘okay, this is not super okay.’”

Moreover, mental health needs as well as those tied to neurodiversity or brain injuries must be recognized among prisoners and CPOs when revising programs. Regarding the latter, P68 would, if they could change anything, “have more experts that are there to help staff because it’s going to happen. There, I think every staff member is going to go through trauma in this program, whether it be direct, vicarious. Just like you go see a doctor for your yearly checkup. Why not go see a psychologist for a yearly checkup?” While, given the former, many of the incarcerated people require mental health and other such supports. Interviewees, given the support was lacking, found meeting program participants diverse needs while attending to program requirements for the greater collective of program participants challenging. Here, P27 explained “I have a fellow in my class right now that has early onset dementia. I’ve had guys in my class with ADHD, maybe like borderline SASD. Significant mental health challenges. This is completely beyond my scope.” They explained the challenge working with participants with “cognitive difficulties” who would benefit from participating in the “adaptive program” but instead are “streamlined into the main program.” Thus, participants called for a better way to allocate people to different programs that may best meet their needs.

### **5.8.6 Human Resources & Understaffing**

Participants describe a lack of support when being hired or accepted into the CPO role:

They do a 10-day session, You get up, you do the 20 minute facilitation, and you either pass or fail. And that’s it. And that’s your facilitation piece. There’s no in-class support ... It’s one of the hardest things, you either sink or swim. I was just told ‘oh, here you go, here’s your six guys, you interview them, you do the program.’ Nobody helped me (P48).

As P48 described the organizational support was minimal from the onset of training and lacked ongoing offers, mentorship, and resources to ensure integral program delivery. As others described, the frequent movement of staff is suggestive of high turnover intention. P50, for example, spoke of CPOs making lateral moves was a strategy to progress on one’s career path. Others reiterated variations of this observation when working in “a more rural area. [Major city] is just over an hour away. That’s one aspect for people. ... we get people who start here with in intention of transferring” (P1). Intention to leave among CPOs intensified understaffing. For example, P82 described CPO roles were enticing to other staff members who had endured the tolling work in other departments as a form of reprieve, rather than necessary interest or motivation. Consequently, the shuffling of staff into “acting” roles meant confusion and could be interpreted as elaborate schemes for securing promotion or organizational status. For instance, P73 spoke of the ability to move up hierarchically sometimes meaning lateral moves even when accepting positions with insincerity or bad faith. Further, a lack of staffing presented barriers with

implications for correctional programming efficacy that had a “ripple” effect (said by many: P28, P30, P51, 76, P86). P59 described the experience of constant staffing in flux meant frequently changing roles or positions within the organization. Not surprisingly, human resourcing was a salient issue by which CSC was seen as understaffed, under-resourced, and a challenging environment to negotiate. Chronic understaffing was reported vastly by CPOs. P1 explained how CPOs have “high staff turnover, they’re always looking for new staff.” P2 stated the turnover extends to management too where “we’ve had a lot of turnovers with managers.” P5 said “we’ve been short staffed since I’ve been here,” likely because “a lot of people are just leaving CSC right now and moving on.”

The ratio of parole officers to CPOs is reported by some as 10 to 1 which makes the delivery of programs more challenging given the limited staffing. P9 explained how rehabilitation rests on “the back of the CPOs. ... What they do with sort of hiding correctional program officers and not talking about the work that we do very publicly”, thus they feel unrecognized yet with excessive occupational weight placed upon them, being the people most responsible for program participant rehabilitation. Thus, the participants felt recruitment and retention were difficult problems requiring solutions. P10 explained acting in a “heavy job” because “nobody else could do it,” and yet, despite being entitled to annual leave, vacation, and sick days, they were left having to make up missed programming; thus, the result is more stress when returning to work after any leave of any type. P23 evidenced short staffing, explaining “in the last few months, we’ve gone from six program officers in my office to two. For various reasons. Some are on mental health leave, some are on actual illness leave, and some have moved on to other positions.”

P22 explained how CPOs also are called into other responsibilities because of chronic short staffing across the institution: “if there’s not enough security staff on at the time and we need our guys and they need to be escorted, then we just go ahead and do that. Some of us have a security background so we’re comfortable with that, and some don’t, so, but they have to do it anyways.” The effects of short staffing were physical as well as psychological and social. For instance, P23 described how, with the decreased staffing, they have “developed a twitch in my eye, and a rash in my neck [laughter]. And so it definitely has affected my well-being for sure, less sleep, that kind of stuff.”

P71 described being reprimanded for working “extra” but had no choice because they are “chronically short staffed. And I had been working overtime. And I didn’t know that in the community you’re not allowed to put in for overtime.” Thus, they described being reprimanded for doing their job well and trying to meet program participant needs. This is particularly the case in programming, where CPOs felt parole officers are hired more often to accommodate workloads but regarding CPOs, “they’re not hiring anybody else” (P71).

P75 explained how program staff are so few quantitatively that CSC contracts providers through external organizations where people are trained in CSC programs (i.e., Salvation Army, John Howard Society). The challenge is CSC is perceived to be conflict with itself, where “they want these contracts, and they don’t want them. They want the program officers and CSC to run everything.” However, CPOs cannot run all programs because of short staffing.

#### 5.8.6.1 Indigenous Programs (Staffing)

P86 described staffing challenges, where, for example, they do not have enough staff for the Indigenous programs, which created waitlists and impeded people from being granted conditional release. The waitlist appeared to be used often, which leaves some potential participants who qualify for the Indigenous program to instead join the “mainstream” program because they can complete the program in a timelier manner. The challenge however is CSC is obligated to provide Indigenous programs to Indigenous prisoners, a fact noted in the CCRA, but is not always actualized due to staffing shortages and vacancies. P86 then felt there needs to be more consideration of current needs to ensure who is eligible and enrolled in programs, particularly for Indigenous prisoners. They stated “we need more staff. We need to get recruitment upwards, up and going.”

#### 5.8.6.2 Promotional Opportunities

P47 voiced the perception that there are more opportunities for career advancement as a parole officer in correctional services, however, this cannot be confirmed and seems unlikely given the program and parole officer roles are consistently and similarly classified. They believed programs equate to two possible career promotions: program manager and regional manager but felt parole officers may have more opportunities (i.e., National Parole Board).

### 5.9 Risk Assessment

CPOs alluded to how risk assessments affected participants’ programming intensity and security ratings, but not the specific program content. In consequence, program participants with diverse risk profiles attended the same sessions, which can challenge safety and trust development. P36, for instance, highlighted how risk assessments do not directly shape program content, such that people come into programs with different behavioural needs but, for example, are grouped by their Indigenous identity rather than specific criminogenic needs: “The risk assessment in terms of their behaviour, responsivity—those things are important.... How the risk assessment correlates with programming, well, it plays a factor in the criminal risk index which puts them at a high or a moderate intensity level for the programming need. But why they’re here and their behaviour—we’re teaching all the guys in the same group” (P36).

P76 explained how complete risk elimination is not possible, emphasizing how even partial improvements in lives are valuable (i.e., “you’re able to improve someone’s life even if it doesn’t mean that they’re going to stop doing drugs or stop doing crime, which is helping them understand pieces of their journey that they may have not known. Or give them a skill”). Thus, reduction in risk requires recognition, too.

#### 5.9.1 Risk Assessment Limitations

Risk assessments themselves were laced with challenges and limitations. P27 felt assessing risk factors for intimate partner violence, especially for transgender prisoners in men’s institutions, was compromised by inadequate tools. They spoke of not having scales designed for trans men or trans women, noting “it will be interesting if the Ferris scale and the family violence risk assessment was now applied to that offender, if they’re in a male institution.” Likewise, P44 expressed discomfort around the lack of qualification in conducting complex assessments which they felt

should be reserved for clinicians. Instead, P68 said “we’re constantly assessing risk levels” using what P44 referred to as “very finicky assessment” where “I don’t feel qualified. I don’t feel it’s my place. I can do it, I know how to do it, but I would be in a very awkward, awkward position if not impossible to having to defend my work.” Likewise, P75 critiqued the effectiveness of risk assessment tools, especially for low-mobility (i.e., elderly or historical crime) program participants who pose minimal risk, especially in context of sex crimes.

Other concerns noted, like by P54, included the imposition of mainstream values onto Indigenous people through risk assessments that are felt to overlook cultural and situational factors, as well as social histories. In this way, CPOs described how bias and risk sensitivity is enculturated through the assessments that failed to account for the unique cultural and intergenerational experiences, especially of Indigenous people. Instead, assessments encouraged a generalized approach that overlooks the influence of social history, mental health, and the situational variability of behaviour. For these reasons, CPOs, like P36, questioned the relevance of standardized risk assessments for determining program placement, especially for Indigenous people.

P33 drew attention to difficulties assessing sincerity among program participants and P39 noted the challenge of assessing risk when the program participant is struggling with mental health and addiction, too, which can result in struggles with “their emotions...even their suicidal thoughts.”

## **5.10 Lack of Material Resources and Outdated Supplies**

CPOs described a lack of fiscal resources and material supplies in their role. Shortages had a ripple effect on the CPO role, they spent added time securing resources (i.e., cultural materials for Indigenous program, teaching materials). This was thought to be more difficult because of how unknown the CPO role is within and outside of CSC, which hinders provisional budgeting. Cost and fiscal concerns were a preoccupation due to the constant lack of resources. P76 explained they work in an institution with 700 prisoners and deliver programs in two different building, because of resource limitations. P76 explained how “compared to other institutions we are hanging onto our last like three or four working overheads. We don’t have projectors, we don’t have smartboards. We’re [using] whiteboards, overheads, and flip charts.” Such material disparity provided challenges for program delivery.

### **5.10.1 The Physical Environment**

Beyond being offput by working in cubicles rather than offices, participants also reported a lack of windows (e.g., “our offices have no windows” [P13]). P13 described the lack of natural light, which is found to be challenging, creating a lack of access to a therapeutic landscape, or “healthy blue space” (Jewkes et al., 2019). Office infrastructure was also viewed as hazardous. For instance, P21 worked “in an office with two door entries” in a “60-plus year old” building where air quality is compromised (e.g., “I’m in a building that was one of the oldest ones, so we cover the vents above us for the air exchange, even though they don’t want us to. But...every time we leave those things open, you’re hacking and coughing because it’s probably years and years of dust and crap sitting in there”). P1 too described dilapidated unkept infrastructure for programs. The officers described occupational hazards in their infrastructure and provided examples of the space can be harmful to CPOs (see Montoya-Barthelemy et al., 2022). P42 described how they taught in an area

“one time for a program and it used to be old food services and that was awful. There’s a fridge and a freezer, the lighting was poor, the area was completely filthy. There’s no door or no window on the door, so you want to leave the door open because you couldn’t be closing a door with no window on it, because God only knows what could be happening in there, right?... There was a bug trap in the corner that hadn’t been cleaned ... the whiteboard was like by the sink, it’s dirty.” Thus, sometimes programs are taught in environment unsuitable for learners and educators.

Thus, the toll of the workspace on CPOs was also upsetting. Moreover, the dysfunction in the space infrastructure, such as malfunctioning doors, created security concerns and was rather off-putting for CPOs, creating a pervasive sense of risk while also complicating the movement of program participants into the classroom. P12 explained: “the movement, for example. ... So, I think that some of the main issues would be the logistics of getting your offenders to your classroom.”

### **5.10.2 Insufficient Workspace**

Relatedly, lacking material supplies was compounded by an insufficient level of classroom space necessary to facilitate education and learning. Some CPOs talked about being split between two building and the stresses of running around an institution to deliver programs. The challenge, in part being:

Our classroom was built with no consultation and not built to the specifications that they expect you to adhere to the job. It is the correct number of square feet. That is all. It is impossible to set up the classroom the way that the manual dictates that you set up the classroom. So, we send out stuff in for quality control. And we have to send a disclaimer they’re saying, ‘I know my classroom is set up improperly. Please don’t fail me on this. I can’t set my classroom up properly.’ This configuration cannot exist in the space we were given. You are expected to teach women’s programs, multi-target programs, sex offender programs, Indigenous program—all of those programs in the same space. All of these programs have different visual aids. How do you rotate these in the one space? And we have a facilitator who’s in a wheelchair who cannot move any of the visual aids. So, how are we supposed to have all of these things in our classroom that we’re supposed to have? The answer is we don’t. We don’t have those things that are part of the accredited program. So, now, not only do we not have our classrooms configured properly, we also don’t have visual aids we’re supposed to have. So, they make it impossible to do the job by doing that (P71).

The space for program delivery often fell short meeting program requirement and even created discord through misalignment between stated objectives and quality control. Some CPOs reported constantly teaching in new locations, which again affected lesson planning. Thus, they desired “a building that’s for programs and that’s clean and upkept,” rather than “working out of falling down trailers” (P42). CPOs also realized program participants have to be comfortable in the space too, if they are to learn, where many are already uncomfortable and less amenable to learning. As space could underpin the CPOs’ pedagogy and, in response, lesson facilitation. P42 simply explained the level of disrepair and insufficient space in their programming infrastructure, which lacks the resources necessary to offer teachings let alone enable rehabilitative insights given the physical environment feels unwelcoming and austere.

Some CPOs described their classroom space as too small to facilitate a full group, leaving them incapacitated when trying to create a safe and therapeutic learning environment. This is particularly the case when programs are held in uncomfortable portable trailers which, for instance, one “conveniently has no air conditioning this summer [laughter]... With about 30 offenders that are part of that, it doesn’t always work out the best.... [If] it gets too hot we just cancel it [class] (P30). Thus, the lack of adequate facilities meant classes were sometimes canceled. Other noted challenges included “anybody walking past the window could see what’s on the flip chart or what’s on the wall or whatever. Or see who’s in the classroom for that matter”—which can cause risk to prisoners whose social unacceptable crimes who are then outed and countered the ability to maintain attendee confidentiality. CPOs talked about the lack of discretion afforded by the infrastructure making access in learning spaces difficult and complicated.

The lack of space also made CPOs feel undervalued and, they felt, communicated an undervaluing of programs to everyone, staff and prisoner/parolees alike. The lack of space hampered opportunities for interpersonal knowledge development or engagement in programming material. Others described disparities in material goods as indicating the need for “a nice, clean looking classroom” (P86).

### **5.10.3 Office Space**

In some institutions, CPOs did not have private offices to conduct their interviews with program participants which they felt was compromising participant confidentiality. For example, P6, explained “cubicles for program officers is really not recognizing that we deal—we have to work with these guys on individual basis as well, and it’s private, it’s personal stuff, we can’t sit in a cubicle and talk to an offender.” Thus, physical office space is also a concern and the lack also impeded preparations for lesson planning: “all of the program facilitators are in cubicles. And low cubicles. They have four-foot walls” (P73). CPOs working in such spaces described them as “cubicle land” (P22), which can be a hotspot desk (i.e., no one owns the space, everyone can simply use the space). P61 suggested “try writing a report in cubicle land. It’s not fun. And there’s, like, no privacy. If we were doing training, we need headphones or something to be able to.... It’s not so fine when you’re actually trying to get work done.” The limited privacy in what many referred to as “cubicle land,” which CPOs described as a place of limbo, creating disparities, and made CPOs feel undervalued. The CPO’s words evidenced the interpretation of parole officers’ work being more valued (i.e., deserving private space) over CPOs who received less than ideal working conditions.

### **5.10.4 Technology**

Technological or digital literacy, of CPOs or parolees or any program-involved person, can limit program delivery and communication. P30, who described himself as “not an overly techy guy” is “not a huge personal fan of online training.” They, working as a program manager, reflected on how technology, when difficult to use, can limit program capacity and compromise relationships. Others, like P59, talked about how security-driven software could change the dynamics of the room, yet, this did not inhibit the necessary move online with COVID-19. Yet, P81 did feel more forethought was required with how technology was used for programming because of imposed limitations to pedagogy. Others did not know, beyond the “smart boards in the classroom,” what

technology was used, exclaiming they did not even have PowerPoint. Thus, the hope was for technological upgrading to a minimum standard to respond to disparities in service delivery and even reinvigorate program delivery by making the offerings more commensurate with how the program is advertised. P26 further felt there was a need to upgrade program participants technological capacities without purchasing personal materials they largely could not afford.

### **5.10.5 Remote Work**

After COVID-19, participants explained being “required to be in the office three days a week. And I can work from home two days a week.... But now we have to share workspaces. Our office is now shared. It’s myself and another program officer. So obviously, we can’t see offenders in the office because it just lacks the privacy” (P23). These words highlighted changes tied to the demand to be back on site but without the proper infrastructure. Thus, for some, the inability to work remotely combined with the shared space (and, thus, distractions and lack of privacy) was challenging.

Some CPOs wanted to minimize their exposure to the prison workspace, given its toll on wellness, and felt a way to do so was a few remote working days weekly. The reason given being “it takes a lot of focus to do the work we do. And sometimes I think that we forget that” (P73). Remote work was a complicated issue, valued by many who wanted the space for administrative work but devalued by others who felt being present with program participants and being physical assessable was important too. Others worried about working remotely as bringing home the realities of their work and compromised work/family life balance (see Spillover).

## **5.11 Management and Managerialism**

Among other trends observed in correctional services more broadly, CPOs faced challenges navigating various levels of management and the overall organizational structure. They expressed frustrations and experiences of organizational injustice, particularly in their interactions with supervisors, upper management, and CSC’s processes.

### **5.11.1 Process and Injustice**

When someone has mental health accommodations, CPOs described the process as bureaucratic, inevitable, and lacking confidentiality. P6 felt, “CSC does a really bad job of ... helping people understand that they can get accommodations. And that you don't have to have a physical disability to get accommodations.” Similarly, participants requested more preventative efforts, rather than interventions which are “too little too late. It’s insufficient” (P22). In part, this was seen as a function of organizational hierarchy, which mediates staff mental health through the reporting structure in ways which felt incapacitating and undermined personal agency.

Well, the toxic work environment is very much a top-down organization hierarchy where we still have that we still have racism and sexism and everything in our in our jail so we have bullying harassment from your leaders still, there’s tons of that stuff going on (P43).

In the words of P43, the environment is toxic due to the didactic and hierarchical governing structure—an assessment echoed by P66:

And but there's a lot of people because CSC is a hierarchy, it creates this power thing right. ... And people think that 'if someone's above me' and actually I just had a personal situation a friend of mine, is very stressed at work. And she was afraid to do anything if she might get disciplined. ... And I was like, 'what are you talking about?' It's progressive discipline, you've never been disciplined, that's not how it works. But she is so petrified because she comes from the CX ranks and everything's about this hierarchy right. ... And like if the warden enters the room, things change.

The stigma and distress generated by this hierarchical structure made navigating internal processes more difficult for CPOs, particularly when related to mental health or burnout. Making complaints often left workers feeling unheard and misrecognized. Further, ambiguity around what happened to filed complaints deepened the organizational mistrust.

Participants described a pervasive sense that raising concerns, particularly those related to mental health, was futile, not because of a lack of solutions, but because of the absence of organizational responsiveness. As P35 said: "I would say that's what CSC could best do to be supportive. And the solutions are there. But the ears just aren't listening." When issues were brought forward and ignored, the result was a demoralizing cycle. Despite hiring committed and capable staff, the lack of care and follow-through left workers feeling discarded: "thrown out like yesterday's bathwater" (P35).

The experience was not necessarily attributed to individual managers, but to the structure and culture of the organization. P9 reflected on this distinction: "It's not them. It's the system really ... because I'm so outraged at the direction of the employer. And it's never at my direct manager." Despite largely positive relationships with immediate supervisors, the problem lay in the overarching machinery: "The humans in these positions are the cogs and wheels. ... They're trying to be the best little cogs that they can. ... So, I have generally been blessed in terms of my management. ... It's the fucking system" (P9).

The lack of transparency or closure on submitted complaints further eroded confidence. P38 drew a sharp comparison to the criminal justice system: "So I said, when you're in the court system if you're a victim you know what happens to the accused, why don't you know what happens with this?" Without transparency, accountability collapsed. "It just seemed why would people want to put in harassment complaint if you don't know, what the outcome is?" (P38).

The sense of misrecognition was often experienced as a fundamental lack of respect. P45 described a growing disconnect between front-line effort and upper-level acknowledgment: "I think there's a general lack of respect within CSC for its employees right now. ... When you feel you're working really hard and kind of going above and beyond and then there's nothing from upper management."

Some carried this cumulative weight over decades of service, leaving them deeply disillusioned. "And to get to like twenty-three years and have someone treat me—and have an organization treat me that. I mean, I have shit on many times in this organization" (P75).

Even when individual managers were informed of serious issues, inaction reinforced the perception of systemic failure. As P80 recounted, "the day that it happened ... when the manager was informed, he didn't do anything about it. ... And then when I reported it ... I said that if somebody doesn't do something about this and address it, then I'll take it and I'm going to put a

formal complaint in.” The issue, left unaddressed, affected the entire department and made the victim feel blamed rather than protected: “She didn’t do anything wrong” (P80).

### 5.11.2 Supervisors as Direct Reports

Regarding direct supervisors, P64 felt frustrated, not with program participants, but with the “bureaucracy” imposed by management. They felt unsupported, which generated more stress “than the actual work.” They added: “I have a boss who’s not been on site barely at all since COVID, and so it just feels like it’s a little chaotic right now in our department. So it’s stuff like that that makes for a less enjoyable working environment.” Beyond being absent physically, some felt an “unresponsive” (P64) supervisor was detrimental. One possible outcome, according to select participants, was dealing with bullying by colleagues (P52) or simply workplace toxicity. Overall, however, many felt that having a direct supervisor who had “actually done programs before” was beneficial, as the supervisor will consider their safety and will “get it” (P46). Others, however, felt the message from managers could be “lip-service” and thus lack meaning and reinforce toxicity. This is, however, unsurprising given management have privileges which reduce the extent the environment taxes those in command. CPOs want their jobs understood. For this reason, P56, like others, expressed appreciation to the community workplace beyond prisons. Some even accepted short-term manager positions, like P26, despite how such a move could breed apathy and irreverence (i.e., “why the fuck is there always late reports in our agenda? I said, ‘who the fuck has late reports?’ Of course, I know who has the late reports. No one says anything. They just look down” [P15]). P34, too, noted the toll of correctional work, referring to the dedication and sense of ownership described by CPOs suggesting they needed a voice if reprieve was to be possible.

Perhaps, in part for these reasons, P19 found program managers “inconsistent” and “stressful,” particularly given the lack of backfill (i.e., the reliance on “acting” managers). They report much turnover in program managers, to the extent many questioned if managers are “trying to use it [acting positions] as a stepping stone” (P19). Despite their trajectory, program managers “lock reports” and provide a necessary oversight which affects CPOs, like P2, who does not feel supported by CSC, yet does by colleagues and immediate managers. Management, particularly direct supervision, can be a source of stress. For example, P75 is stressed occupationally because, at times, they do “not have the support of your manager to suspend them or remove [harmful participants] for the betterment of the program and the other group.” The lack of support links to the lack of autonomy CPOs described, resulting in CPOs being left to work “with guys who shouldn’t be in the program yet or aren’t ready. Or won’t work well with you as a facilitator. But might work with someone else. But not having the ability to remove them because of numbers.”

Moreover, direct supervisors feel upper management’s focus on austerity or statistics, despite the lack of resources for CPOs and the negative affects of inconsistent policies on workplace efficiency and morale. P38, just speaking to austerity, explained how “there’s no money...Even the equipment we use in the classroom. We’re still using overhead projectors, and we can’t find bulbs for them.” Others, like P60, have experienced “out-of-touch managers.” P60 described having a “racist” manager:

It’s racist. Again, coming back to our culture and our ceremonies and things. It’s pretty racist, but they hide behind policy in order to cover it up. I will tell Indigenous people—I

said, ‘well, it may not be the career that you think it is. Does it pay well? Absolutely. But you have to sell your soul for it.’

Other managers, perhaps not racist, still demanded relentless workload assignments tied to a lack of time to decompress and pressures compromising CPO job satisfaction. P14 explained how “the pressures from your manager” leave them rushed and “unable to breathe” when facilitating programs. The most trying concern, however, arises after rushing to complete reports, working extra-long hours, and, after all the effort and time, having “my reports ignored by case management a lot. The only reason I get any sort of respect for my reports from some of the parole officers is because they know me and I’ve worked with them for a long time. And they know I kind of go over and above when it comes to dealing with my offenders” (P61). Thus, they feel they work hard to no avail and stymied in helping their program participants develop due to management.

P2 struggled in part due to unstable management, noting collective trauma from ineffective leadership related to efficiency over efficacy (i.e., “we’ve had a lot of turnovers with managers. And we’ve had some ones what were abusive”). Perhaps for this reason, P58 stressed a need for skilled managers, including those “who are highly trained and recognize the type of stress their staff may be undergoing and find ways to help people become aware or and address it, rather than it becoming a performance problem.” The concern also arose here about a lack of a workload standard, which results in inconsistent productivity demands (i.e., “it would be really nice if we had workload formula. Because everybody else seems have a workload formula” [P8]).

Some CPOs felt a lack of autonomy under their direct supervisors/managers. For example, P6 lamented their lack of oversight regarding who was included in their programs because they did not have control over the social dynamics entering programming. They said “the first thing, we don’t get to select our guys. The list of guys is given to us, however what we do have to do is, well, first of all, make sure they all consent.” Consent, however, is complicated by social dynamics, where a prison resident’s status in prison compromises their effective participation. Instead of a focus on effective participation within the social world, the emphasis is placed on “making sure they meet the criteria, ’cause sometimes there’s some that fall through the cracks.” Conversely, P31, unlike almost all other program officers, feels they have some flexibility over who is in their program. They explained “I’ll just kind of, like, read their files and be like, ‘okay, these two guys can go together’, or ‘these guys cannot go together’.” Thus, some CPOs felt autonomous but other did not.

Most CPOs felt a lack of autonomy in their scheduling. P81 explained how there is no “routine” in their work. Instead, their workload “changes quite regularly, depending on caseload. And again, it’s because I’m the only one.” Beyond this majority view, a select few, like P12 described a structuring perk, saying: “unlike when you’re facilitating program, the schedule is kind of on your own thing. If you take holidays, its stops. Things like that. You can only do a max of six sessions a week.” However, these sentiments were not felt by many interviewees, who instead felt limited in their autonomy.

### **5.11.3 Senior Management**

CSC is a bureaucracy and the purview of management, as per CPOs, means CSC puts forth national directions with, often, hopes for standardization and optimal outcomes. Yet, being “very

standardizing in the way we do things” means doing so “without taking a minute to really look at really case specific elements” (P86). Thus, the push for standardization from management impinged on needed individualized treatment plans for incarcerated people or those under community supervision. Moreover, preoccupation with management was focused on standardization they seemed inflexible and non-collaborative (i.e., “it was pretty obvious, the Warden who I was working with for many years was very much a dictator” [P42]). In practice, CPOs often felt unable to report concerns proactively or communicate effectively with management. They rarely felt consulted about changes in their very occupational roles (i.e., “decisions [are] made without consultation” [P3]), often without recognition of the implications of such changes. Of course, strength of communication was very dependent on the direct supervisor’s leadership style and how concerns were communicated up the hierarchy. However, CPOs did feel there were too many managers and not enough on the frontline doing the work. Such experiences were stress-inducing, driving P57 to take a few months of leave because they “just couldn’t take going online to some of these meetings and just hearing upper management crap all over what I do.”

CPOs were concerned about informal relationships trumping working relationships, where ulterior motives prevailed in determining outcomes, like promotion and who obtained which opportunities. The bigger challenge, however, was the frequency of manager turnover, which compromised any relationship built (i.e., informal or formal). P41, for example had “six to eight different managers. It’s pinball. It’s different personalities that are trying to manage you. Some of them are supportive. Some of them aren’t. So, it can affect how you do your job.” Thus, frequent turnover was trying and affected how work was performed on the frontline.

Participants described how negativity was at times ‘toxic’ with how the administration operated dependent on management’s personality and style. P57 described CSC as “toxic” saying “I work in a toxic place... But it’s not because of the people I work with, it’s not because of my clientele, it’s because [of] management... [Management] assumes we’re not doing our jobs and so the first thing they do is shit on us.” Thus, improvement to how CPOs do their job was very dependent in possibility on their management’s support. P50 said: “we can make these changes, but it’s only if it’s beneficial to management.” Often, CPOs felt, statistics were most beneficial to management (i.e., more people through programs): “it’s unfortunate cause it’s actually numbers” (P48). Here, participants described inconsistency and misalignment between the mandates of upper management and the human service element of correctional work. This included an incongruence apparent in the disconnected statements between self-care and taking sufficient reprieve, which, from participants’ perspective failed to align with their needs.

CPOs also spoke to consequences that arose from reporting operational concerns. P1 spoke, for example, of a “very violent” program participant, noting they were “terrified because this guy could easily extort me. And I went and reported it. They [CSC managers] threaten me, and I ended up going off work for almost six months.” P1 described being “interrogated, mocked, and made fun of,” explaining “that was really difficult to go through. Because these are the people who I should be relying on for safety.” In response they refused to turn to the employer for support, intervention of help. P12 explained how a CPO “reported something. Resulted in an officer getting disciplined and now she is being harassed by all the other officers. Even when you go to report things, the aftermath of that can be very traumatizing. Which leads people to not report things.”

P16 was “part of a group grievance” to which retaliation meant employees “started treating me badly after that or treating me differently.” Thus, lack of managerial support with operational concerns and colleague reactions and actions led many CPOs to not report what they are experiencing for fear of having to deal with other, even more traumatic, consequences. CPOs tended to feel complaints are filed, they backfire, reinforcing that it is better to remain silent.

#### **5.11.4 Work Relationships**

For some participants, beyond the hierarchy they perceived which placed CPOs “beneath” (P3) security staff, relationships between colleagues were becoming an ongoing stress, which some attributed to the aforementioned COVID-19 challenges. Others attributed the lack of cohesion to the bureaucracy of CSC, “the competing interests that goes back to the bureaucracy... you get really frustrated if you buy into it and take it personally” (P15). Thus, the pressures to do their work and push people through programs laced with “red tape” was thought to affect relationships.

CPOs felt not being included in vital information regarding case management which affected communication and harmed the sense of togetherness within case management. P80, for example, has “asked numerous times can we please work as a team,” which was the case in their prior institution but not in their current workplace. They described feeling disrespected in program participant meetings by other, non-CPO, staff. Thus, the hierarchy between staff in different roles can affect case management. Moreover, the hierarchy between security and non-security employees was also, often, daunting. CPOs described being diminished by their orientation to care ethics, because of the privileging of security within CSC. For example, P20 described how programming was seen by many staff as blurring the lines between participants and staff, where boundaries remained crucial.

CPOs discussed, how, in certain spaces, “they have this crazy little system where you have to compete against your fellow coworkers in this kind of competition. Which right off the bat puts everybody on odds with each other” (P4), explaining how the organizational structure itself can be harmful to relationships. The tension could also arise from lack of resources or “not being on the same page” (P22), which too can place CPOs in competition, creating confrontation rather than collegiality. Such concerns can translate into fears around “career mobility” caused by “rub[bing] people the wrong way” (P86). Further, challenges can arise in how people work together. P4 explained “you have this little vision in your head that all your fellow coworkers are going to be great, caring, outstanding people. And everybody is going to work very well together... Only to realize it couldn’t be further from the truth. ... They are all very cliquy and people aren’t treated fairly... And so, you’re not sure if you push your PPA if they’re going to come or not when they find that it’s you, because they don’t like what you said about their friend.” P43 described the work environment as “toxic work” where they have “experienced tonnes of bullying [and] harassment in my working years.” Experiences with hostility along the lines of bullying and harassment were not uncommon. Thus, some CPOs found their work was riddled with cliques and tension between colleagues (and with management). How some workspaces were rife with in-groups inhibited some participants’ sense of safety.

For safety, CPOs make a habit of always notifying their colleagues where they are in the facility. P39 explained needing to be “aware of what’s going on. Not putting yourself in a situation where if you’re going to be alone in the building that you let others know.” As P39 explained, good

communication helps others know where they are, making locating them easier in the case of an emergency given how large penitentiaries can be.

By communicating with other staff, CPOs are using precautions to monitor the safety of other staff. For example, P62 discussed communicating with colleagues in the context of conducting interviews in their office, stated “I won’t interview somebody if I’m the only staff member in the building. Some people are more okay with that. Personally, I’m not.” P45 too detailed how they communicated with other staff to secure their safety, stating “I always have lights on. ... I always have them on so people knew I was in that room... And I would always say like if there was going to be a tough conversation.” These CPOs’ words showed how strong communication helps CPOs collaboratively work with other staff to secure their safety. When interviewing their program participants, CPOs will not just let their colleagues know their situations but also inform them of warning signs and other things to make note of, so their colleague knows when their situation is unsafe and how to respond accordingly. Likewise, CPOs will be vigilant and gauge the safety of other CPOs when they conduct their interviews. In turn, strong communication with other staff helps CPOs develop trust with their colleagues and secure a safer working environment.

## **5.12 Operational Stress & Hazards**

Operational stressors include those realities inherent to the job, that cannot be changed, and are largely unpredictable. P75 acknowledged physical risk, explaining: “there’s always a risk. Any day you go into work, there’s potential risk for something going wrong when you’re faced with a room full of 10 guys.” The participant recognized prisoners are humans but also has in the back of their mind that “they’re there for a reason” (P75). This is compounded by the recognition by CPOs of “always kind of have this feeling that you’re being watched” (P6), which revealed the feeling of vulnerability and insecurity. Such feelings could escalate in open spaces where unpredictability prevails as many prisoners are roaming. P80 explained “I’ve had friends taken hostage... Just it’s not a good place.” P68 described how a “program officer who was probably around [redacted] years old ... was attacked and his jaw broken.”

Witnessing death was also trying for CPOs. P22 handled the body of a potentially murdered prisoner and found their proximity to the death was profoundly impactful. Moreover, P76 described a recent prison murder where the presence of weapons, drugs, and a general sense of danger prevailed in the environment.

### **5.12.1 Imminent Risk**

Types of risk are vast, from “riots” (P49) to assaults to threats. P49 spoke of “sit-ins [where] inmates decide they’re not returning to their cells. And they’re sitting outside in the yard because they’ve got a grievance that they want to have heard. And could easily escalate. It only takes a couple of guys to escalate into something worse.” Here they described how the prison environment can change on a dime, introducing a riot or other catastrophe.

Others, like P58 shared experiences of threats and the fear of being assaulted, illustrating the constant danger faced in the workplace. They spoke of: “being threatened... by offenders, the fear of being assaulted... sexually assaulted, taken hostage.” Concerns about being taken hostage or involved in a riot were widely echoed. P17 spoke of a hostage taking while working, feeling the

“terminology from hostage taking to confinement sort of minimizes [the gravity of the situation]. P42 recalled “one of my colleagues was taken hostage,” and had guilt because the CPO had to switch work areas with them. P10 felt ill equipped when a hostage taking occurred across when they were working. The operational risk tied to hostage taking is pronounced and if the individual has the intention to take a hostage, the risk can be felt as unavoidable. Others expressed concerns about rioting and the associated violence and exposure to death possible in prison environments. P28 described a “riot or a standoff with offenders.”

P24 spoke too of the trauma of seeing death, albeit by suicide or “overdose,” and, despite unpredictability of the event unfolding, how they “should have did more for him, I should have did more,” suggesting much internalized guilt about such incidents. P35 “had an inmate threaten to kill me” and P44 “was insulted by a sex offender who was offending against young girls.” P44 also spoke about program participants becoming “angry” with them over what they write in their reports, even accusing them of “lying and all this” (P44). P61 discussed “another guy, who he didn’t like my report at the end of the day” and tried to retaliate, thus requiring “a threat risk assessment done” which “put him on a behavioural management plan.” P2 spoke of security risks tied to gang-affiliated program participants and fears of retaliation to their reports. Overall, participants described a heightened sense of vulnerability and inadequate safety measures in managing violent offenders, facing intimidation, and enduring constant scrutiny, all of which amplify their daily risks and anxieties.

P36 felt unsafe with a client but eventually developed a positive relationship after receiving the client’s recognition and gratitude for helping them change their life. Yet, P68 described hardship when managing volatile encounters between prisoners, recognizing too how the resultant stressors contributed to an overall hostile work environment. The prison was a “triggering environment” where “the security alarms are going off, you witness fights, and you witness violence at every corner.” Echoed often, P12 described feeling threatened when “one [prisoner] jumped on the other one’s back and I think they were about to fight, and I didn’t have my alarm with me at the time so I couldn’t press it and then the door was locked.”

Here, many participants described witnessing violence in their occupational role, like P3, who said “I’ve seen staff get knocked out in front of me... gun shots go over my head... inmates running at me with bloody—they just got shanked.” They expressed, in consequence of witnessing violence directed at prisoners, when “you’re humanizing them in the first place, you feel like ‘oh my gosh, this guy just got’—so, how do you cope with that?” (P3). Thus, not only is the violence a challenge in itself, potentially a traumatic experience, but so is seeing prisoners harmed. Such situations can be a challenge, one that the participant is attentive to because of possible “residual impacts, whether you compartmentalize it or you numb it, or you embrace it” (P3). Many described both the trauma of witnessing the violence and that of being unable to intervene, which negatively affected their psychological wellness. To summarize, P54 explained how “over the years there’s accumulation of either firsthand trauma or vicarious trauma.”

There was also risk inherent in working with participants with cognitive distortions and/or mental health needs. P15 spoke of a CPO being assaulted by an “elevated... mental health guy” who “didn’t get his meds that morning. So, I guess it didn’t take much to aggravate him.” In addition, CPOs reported feeling emotionally drained by the trauma stories participants in programs shared, especially those with complicated, intergenerational histories, which many find personally taxing.

P36 explained how “every group is going to be different. There’s obviously going to be people that trigger you. And sometimes you’re not even aware of those triggers until they happen unfortunately ...”

### **5.12.2 Increase in Violence**

P22 described prisons as trending toward being more violent, explaining: “I’ve been working in this kind of setting for 20 years or more.... There’s more violence and less safety for staff.” Perhaps in response, P29 explained how, due to the omnipresent potential for violence, they “always have to be switched on [at work]. You always have to plan for the worst and hope for the best.” P72, too, described “a lot of violence.” The constant potential for violence was discussed by many other participants, like P63, who described their biggest challenge at work as “an overall mentality or attitude of violence and aggression. It’s kind of always present,” which, they explained, “builds anxiety”. P65, too, observed rising aggression among program participants and heightened concern for personal safety due to increased volatility. P64 was “always conscious, because I’m always aware that anything could happen at any time. I’m probably more concerned in recent years than I have been previously about personal security, only because the type of offender that we’re having. There’s a lot of discontent, there’s a lot of hostility.... I’ve been finding the men that we’re dealing with are more and more aggressive than in the past.... We’re definitely feeling it in the classroom.”

### **5.12.3 The Realities CPOs Witness**

Some CPOs felt they had come face-to-face with much adversity and difficulty when processing all they witness during a day of work. CPOs were affected from being a part of the incident in different ways with diverse proximity to the people involved. The exposures were diverse, and the range of incidents were vast. In some cases, incidents originated from program participants, like watching parolees reoffend. P51 explained, an “offender that I was working with went UAL. So, unlawfully at large, went on the run. And then committed another offence where there was [a] new victim created. Someone that I thought I had a good relationship with. And that he was motivated to change. And that was unfortunately not the case.” P61 was affected when “I didn’t witness anything, but one of my offenders was beaten to death by other offenders in the unit... That was a little traumatic for me in that I knew him. Like, fairly well.” What these CPOs had in common is being affected from when people they delivered programs to were harmed, particularly when they appeared to be progressing in programs.

P25 spoke to the harm in watching program participants being, largely, set up for failure by the inflexible programming scheme intended to push participants through before they were ready. P53 explained how seemingly forced participation by participants who were “not ready” ensures CPOs were ineffective: “asking a guy to open up when he’s not ready to... You can’t force someone.” P58 described unrealistic expectations, where CPOs feel pressure which they balance against participants’ needs and readiness where “you’re supposed to be performing some kind of a miracle.”

Incidents could also be violent (i.e., assaults, deaths), rooted in manipulation, or disturbing content in files. For instance, P7 faced “two deaths in custody,” P75 described navigating a violent prisoner

overdose, and P54 saw “self-harming or barricading” and the “trauma of being in a violent place where somebody is angry at you.”

CPOs reported reading files, especially victim statements, as highly distressing. For P44, and others, sometimes detaching emotionally after encountering these painful narratives was impossible. P83, consistent with other CPOs, found being immersed in disturbing cases, like those involving sex offenders, affected their behaviours (i.e., “if I’m reading about child pornography or sexually offending young children all day, I don’t want to go home and [laughter]—I’m not sexually motivated”). Instead, CPOs, like P25, struggled with feeling anger and sadness from these narratives. P20 too was impacted after working in a unit with “10 of the most serious self-harmers in all of Canada, and they put them together on this really tiny range. Despite all evidence that says that they should never be put there. And it was horrific, like really horrific.... Many people [redacted] are so seriously harmed by the unbelievable, bloody, awful, mess that occurred.”

#### **5.12.4 Safekeeping Strategies**

Given the array of safety concerns and situations CPOs can encounter, many participants discussed the different strategies they deployed to maintain safety within their institution. Broadly speaking, safekeeping refers to the precautions a person takes to protect their safety and mitigate risk to themselves and others. CPOs utilized various safekeeping methods to navigate the institution, interact with inmates, and protect their safety both inside and outside of the prison. These safekeeping strategies included but were not limited to wearing their personal protective alarms (PPAs) within the institution; setting certain boundaries with their program participants; building strong rapport with offenders, being alert and attentive both inside and outside of the classroom; and having strong communication with colleagues (e.g., other CPOs and COs). Each of these safekeeping styles will be discussed in further detail.

##### **5.12.4.1 Personal Portable Alarm (PPA)**

The use of PPAs was a prominent safekeeping measure CPOs deployed while on the job. P46 discussed how, “we have the alarms on our belts whenever we’re with offenders, [which] we can press that for help when we need it.” Because CPOs are often working with high-risk and violent individuals, PPAs were a vital safety measure as they not only serve as a deterrent to program participants, but they also to provide a direct form of safety via notifying CO in emergency situations or when a CPO felt unsafe.

Despite how integral PPAs are to maintaining their safety, the PPA had limitations. For example, the “panic button” will only drive a response from COs to “that location” where the CPO is facilitating class (P36). In consequence, as P37 said, “if I go to another building and hit my PPA, oh well. It’s not going to be as effective” because, as per P67, “during that whole time that you’re walking there you don’t have a panic button, because the panic button isn’t linked to your person, it’s linked to your office.” Thus, the safety and security are compromised even with PPA, which requires awareness of surroundings.

In addition, with the PPA, P62 noted, “People [can] become complacent with [it]”. From this, P62 described how— in addition to always carrying their PPA— they developed the habit of “always let[ting] everybody know where I am and ... where I’m going to be meeting with people”. Such a

measure is widely practiced among other CPOs as well. CPOs rely on good communication with COs and other staff to facilitate their programs in a safe manner. In the event of an emergency or unexpected situation, the practice from CPOs is to notify other staff members who can help responders (e.g., COs) to quickly get to and deal with those scenarios. This enhanced the broader purpose and efficacy provided from their PPAs, since those devices are designed to immediately alert security. Strong communication is also important because, as previously discussed, PPAs are location-specific to the building CPOs work in, as opposed to the exact position location of a CPO.

P59 shared a similar point around using strong communication to use their PPAs more effectively:

The staff members wear ... PPA. ... So, every day when you go in, you call main control on the phone when you get to your office or your classroom or wherever you're working. And you call main control— And say "Hey, this is who this is. This is where I'm working, and I'd like to test my PPA." And they say "Sure, go ahead." And we push the button on it, and it sends that alarm to there. And then the officers who's running that post—they read it back to you. They tell you which one it is and confirm the location, confirm who has it. And they say, "thank you very much." That way they know throughout the course of the day that if that alarm gets hit, that they're sending responding officers to your location.

As P59 outlined, CPOs must do more than just always carry around their PPAs. The PPA is the bare minimum for ensuring safety. Instead, CPOs must (and do) deploy proactive measures when using their PPAs to protect themselves within the institution. As a result, the overall utility and level of safety PPAs provided to CPOs coincided with the strong communication and relationships CPOs have with COs and other colleagues. In addition to this safety measure, CPOs routinely assessed their alarms to ensure they are operational and ready for use (e.g., by checking the batteries and testing the device). With the incorporation of these proactive measures in their routine PPA usage, CPOs not only protect themselves and others but also enhance the overall efficacy in the safety measures PPAs provide.

CPOs spoke of wearing a PPA in prisons, but in the community, CPOs did not wear PPAs nor, often, have security staff present. P80 highlighted inadequate safety measures, like the absence of alarms, made managing high-risk program participants in the community more potentially compromising. The community process is "making sure that someone is free to call 911 if you need them to" (P81). But, understaffing, specifically a lack of sufficient personnel, too contributed to safety concerns. In prison or the community, being outnumbered created vigilance. This could be exacerbated by infrastructure inhibiting security (e.g., "I do a high intensity program so there is 12 offenders and 2 facilitators. There's no windows, there is no cameras, I mean there's a window in the door, but there is no windows on the wall" [P28]). Moreover, the CPO can be in a part of a building where "it would be a long time before I would get responding officers if there was an emergency" (P1).

### **5.12.5 Boundary Setting**

Participants emphasized the need to maintain firm boundaries to avoid being manipulated by program participants (i.e., "you have to have really good boundaries" [P13]). Here, professional boundaries are instrumental as there is a need for, as per P76, "professional standards." P71 felt

setting boundaries can be difficult but is required to stop manipulation, particularly given “guys [clients] just have really poor boundaries. And you really have to work really hard to keep that separation.” Likewise, P53 described confronting a manipulative prisoner who wrote about them in their journal, emphasizing the need to uphold strict boundaries despite the unsettling attention. Overall, participants highlighted the ongoing struggle to maintain emotional distance, especially as the actions of program participants, in prisons or the community, repeatedly test personal and professional boundaries.

Moreover, many CPOs emphasized the importance of establishing boundaries with program participants to maintain safety. Broadly speaking, the practice of boundary setting revolved around CPOs establishing clear rules or guidelines with program participants pertaining to 1) how CPOs want to be treated; 2) general classroom rules around what is acceptable and unacceptable behaviour; and 3) placing control and safeguards within the conversations they have with program participants both inside and outside of the institution or parole office. P37 provided an example of how they would vocalize personal boundaries with their program participant:

But we’re not outside the institution. So, I’m not going to hug you. But just know that I’m hugging you in my head. And I’ve actually said that to guys. Because I have to get it out of my system. But I want them to know, too, that that was impactful, and it was powerful, and it was beautiful that they were able to share that. In any other environment I would show them human compassion physically. Like with a hug. But I can’t because we’re in jail.

Here, P37 balanced their role as both a helper and ally for change in their program participant while also recognizing they must set certain boundaries to avoid compromising their safety and professionalism in the process. CPOs understood even when fulfilling their job roles around rapport-building and rehabilitating program participants, there are certain dynamics they must be mindful of, and, in turn, routinely make sure that they are always following the rules and safety procedures of their institution while facilitating programs. P3 shared other everyday examples about how they would set personal boundaries with program participants:

I live three hours from where I work. So, for me, you know, I’ll talk about—we do a round table about how you’re feeling today. And say that was the day that I drove into work. ... I’m tired because it was a three-hour drive. So, then some of the guys are trying to do the math on where I live. ... I won’t give them like “Hey, this is the town I live in.” I’m not going to do that, right? So, I think that’s kind of that boundary setting ... I share things about my family but I don’t share like intimate details. I’ll share that you know, I’ve got a daughter that I’m working with. And here’s the challenges of being a father. And the reason why I say it is because some of the guys in class are fathers as well. So, now they can feel it. And they start to reflect on what it is to be a father. Or better or worse father. Hopefully better father. Whereas other facilitators won’t even mention they even exist as a family—they don’t even have a family. Won’t even exist as that, right? Which is to each their own. You know, I’m a very public person. So ... I’m not trying to hide anything that’s not already public.

As P3 highlighted, CPOs set these boundaries with clients to protect their privacy. Even when CPOs are trying to be more personal and relatable to the program participants they work with,

there is a certain level of privacy CPOs maintain when interacting with them to ensure their own safety. P3 demonstrated how setting effective boundaries with a program participant is ultimately a balancing act where CPOs need to be authentic in how they relate to and share their experiences with program participants, but also, on the contrary, need to be discrete and mindful of oversharing details which can potentially compromise their safety. In these moments of being more personal and relatable to program participants CPOs must be mindful of their safety and set certain boundaries to protect their privacy and safekeeping within the class setting.

In fact, these instances of personal relatability from CPOs are a vital component to building strong rapport with program participant, which was another common safekeeping strategy CPOs deployed. P22 further explained why having positive relationships with their program participants can be integral to ensuring their safety:

You can be kinda adversarial with these guys, or you can show them that you're trying to help them. They can still turn on you. But if they've got a positive attitude towards you, then it's less likely that they're gonna do something to you. So it just makes sense on a lot of different levels to develop rapport but you know [pause] let them know that you're kinda for them rather than against them. And that if they're gonna go after somebody, they're likely to go after somebody that is against them, rather than someone that's for them so. You know, trying to keep that in mind when you deal with these guys.

Although CPOs have a more rehabilitative role when compared to other correctional staff (e.g., COs), some program participants can still hold unfavorable views of CPOs due to their institutional position. Nonetheless, P22 outlined how, through programs, CPOs are in a unique position because their work is directly tied to the rehabilitation and self-improvement of each. For CPOs, setting the groundwork for rehabilitation early by showing program participants they have their best interest in mind and want them to succeed in programs goes a long way in challenging the adversarial perception the program participants may have of CPOs. Ultimately, the broader empathy and respect CPOs show towards their program participants helps them develop rapport, which can instill positive perceptions among the those with whom they work. As a case in point, P44 shared "I've built really good rapport with the offenders, so the offenders that I deal with generally like me, or at least respect me. So, I don't feel that need for ... safety". P8 made a similar comment and referenced how being safe within correctional service can sometimes be contingent on "relying on the fact that you have a really good working alliance with some of the other offenders. That if something went down, they know that they would not stand for it".

This may also explain why many CPOs reported feeling comfortable and secure around working with their clients: if program participants generally have favourable views of CPOs, their interactions with CPOs may also be less confrontational, making CPOs feel more secure when working with them. As P45 best explained:

To be honest because, like I said before, taking that time to meet with them and see where they're at in the beginning before program even starts. And then having those constant check-ins throughout program, I think it really helped. Like I'm not going to say they probably didn't get mad at me at some point because, you know, you bring up a lot of stuff that's hard in programs. But I never felt threatened or worried to enter a classroom or anything like that.

This is not to say that CPOs depended on the positive perceptions program participants have of them to ensure their safety, but rather outlines how the positive relationships CPOs have with their program participants can make them less hostile and foster safer classroom environments for CPOs and other program participants. To this effect, these conditions can make it easier for CPOs to teach their programs and feel more secure when operating in the classroom environment.

#### 5.12.5.1 Setting Classroom Boundaries

Boundaries are also set in classrooms to structure program delivery. Furthermore, the boundary setting CPOs practice also extended to how they facilitated their programs in the classroom. P60 explained how they establish classroom rules around decorum and behaviour with their program participants:

I'm setting limits in the classroom [around] far aggressive behavior and really being firm on that as well because I've been finding when we're not firm enough on those limits, that there's far too much of limit testing and it can be very easily [go] sideways. So, I've been really less tolerant of disrespectful and aggressive behavior in the classroom than ever before. So, those are the kinda things just to prevent a lot more ... things.

Setting classroom boundaries is about being early and proactive in outlining the rules of the classroom and firmly enforcing those rules when they are broken. By setting the tone with their program participants early on, these participants are promptly made aware of the what the rules are and how CPOs will enforce them. This proactive measure is vital to institutional safety because it serves to address and prevent misbehaviour before potentially escalating, but the measure also puts CPOs in a better position to proactively control their classroom climate. One ICPO further emphasized the importance setting boundaries with their program participants and establishing rules around appropriate behaviour, for instance, with what language (i.e., no swearing) program participants can use in the classroom. Because CPOs are responsible for teaching the skills and lessons to self-improve and lead them towards a path of successful reintegration, they establish a standard of conduct and decorum in their class intended to encourage rehabilitative ideals. For instance, P19 sets classroom guidelines to prevent derogatory or victim-blaming language, especially in sexual offense cases. CPOs set those boundaries with Indigenous program participants to show more respect for their Indigenous roots and to encourage them to meaningfully engage with and be more in tune with their Indigenous culture. Ultimately, these boundaries are aimed at creating positive and productive class environments where program participants develop the introspection to reflect on their behaviour and foster appropriate discussions centred around learning from their mistakes and self-improvement. If program participants are trained to be more mindful and respectful in how they view their crimes, victims, and other people in their life, these boundaries can encourage them to meaningfully reflect on their behaviour and worldviews, and in turn, can help them make better decisions from their renewed understanding and using the skills they learned from programs.

#### 5.12.5.2 Boundary Setting Outside of Programs

Sometimes, CPOs may also have to set boundaries with program participants when they are outside of the workplace. For example, many CPOs described situations where they might encounter former clients in their private life (because some CPOs often live in the same community as an

released person) and scenarios where program participants try to contact them outside of programs. P3 provided an account of how they would navigate these sorts of situations:

If guys reach back out and I'm 100 percent willing to help them with whatever they need to. And again, its boundaries too, it's clear—at that point, it's a little more awkward. So, when you're reaching out, outside of work, you have to set the boundaries with those people. Be like, I have to contact your parole officer. I'm going to let them know. I'm going to write a casework record that we'd had this discussion. I don't know if this guy is being followed by the police and all his social media is being looked at. So, I don't need that. I just make it clear that everything is kind of recorded and managed.

As P3 expressed, many CPOs overwhelmingly value the growth and self-improvement their program participants gain through programs and take great pride in working with them to achieve successful reintegration. While many CPOs, like P3, wanted to remain as a valuable resource and support network for their program participants when they are outside of programs, they, at the same, also have to set clear and firm boundaries to ensure their safety and privacy. These boundaries might include setting time frames for when they are available to be reached; letting program participants know if they are comfortable with communicating with them outside of programs; outlining how they would like to be contacted (e.g., via in-person, phone call, social media); and by letting program participants know which topics on and off limits with them. The key is CPOs set the boundaries early and remained firm about preserving their boundaries if they are crossed.

Similar to P3, CPOs like P31 mentioned how, in the event of seeing or contacting a former program participant outside of programs, they would also contact their parole officers. CPOs did this not only to be transparent with CSC and to ensure that these interactions are formally documented, but also to, in their words, “cover their ass.”

Other CPOs discussed how they navigated in-person encounters with their program participants in the community. P31, who works in the community, provided some examples of how they handled these situations:

So, I am living in the same community as where the offenders live. And so, I will run into them at grocery stores or at the bank or whatnot. I'm aware of it. It doesn't bother me, but ... I've always told my family if I get stopped—if I'm walking downtown because our office is right downtown, if I'm walking downtown and someone stops me and I don't introduce you, just keep walking. And they're like, “okay.” And just keep walking and, do not stop because ... that's your cue that this person, I'm not introducing you to them for a reason. The same thing with the men in the community is that I don't approach them unless they approach me. Because I'm not going to out them as being someone that knows me, just out in the community, unless they want to do that themselves. I reported it to his parole officer and just said, “oh, I saw, I saw [name redacted] in my neighborhood . And he's like, “do you have any concerns about that?” I said, “no, not at all.”

In advance, CPOs would discuss with friends or family how to handle their public encounters with current or former program participants. As P31 explained, they establish specific cues and signals with their family and friends to provide information regarding how to respond to those scenarios. P31 also noted how they mutually respected the boundaries of said clients by not going out of their

way to “out” the relationship they have with each other (unless, of course, the client gives their approval beforehand). CPOs explained the boundary setting they practiced is also about listening to and respecting the boundaries of program participants. Since some program participants, and similarly some CPOs, may also find it awkward to encounter each other in public (e.g., a situation where program participants are out in public with their friends or family), CPOs are both cognizant and respectful of how clients choose to navigate those potential encounters. In the same way, CPOs wanted to respect the boundaries of program participants, current or former, so their working relationships are productive and safe as opposed to being antagonistic and stigmatizing. Hence, CPOs would discuss both their and the program participant’s boundaries during programs so that, in the future, both they and the program participant know how to navigate any future encounters they might have with each other.

Overall, some CPOs, like P31, are more restrictive and may, for example, either leave and avoid certain places when they could see a program participant, they knew to avoid a confrontation, or they will not actively go out of their way to confront them (unless the person initiated the encounter first). Others, like P11, have a more open and relaxed approach when dealing with these encounters and accept the natural play out of these scenarios. Likewise, each CPO has their own boundaries around if, when, and how they would like to be approached while in public, boundaries which they establish with their program participants either prior to or upon their encounters. Regardless of how CPOs may choose to set their boundaries in their public encounters, CPOs preface those boundaries around prioritizing their privacy and safety, which serve to create a broader, firm separation between their work and private life.

#### 5.12.5.3 Social Media

Other effects on daily living include limiting social media posting (e.g., “we have to be really aware on our social media and things like that. To make sure that we’re not, identifying who we are” (P2)). In a similar vein, P3 discussed the challenges of social media interactions and the need to set clear boundaries to avoid potential safety risks.

#### 5.12.5.4 Latent Risk

The CPOs discussed inconsistent security screening as increasingly risky. P67 explained how “depending on the guard that’s there, sometimes they’ll just be, like, whatever goes through, and other times they’re gonna wait until you find what’s beeping in the detector. That inconsistency also doesn’t necessarily make you feel always safe.” Thus, CPOs explained risk increases when security screening is not completed as mandated. Some participants took some comfort in how “we’re on camera. Someone is watching us,” which meant someone would respond to adversity if necessary (P46). Often, CPOs collaborated with security staff to ensure sufficient coverage and oversight. Staff report numerous challenges in managing security risks, handling program participants with complex needs, and facing institutional barriers to effective intervention. Interpretations of structural inadequacies compound risk, making the potential for adverse events more possible.

Participants also voiced safety risk arising from not following protocols or taking “shortcuts” with protective equipment. P7 described how a colleague “stumbled upon a suicide some years back. And he wasn’t wearing proper equipment, and that changed his perspective. And of course, I set

off that and realized, I'm taking shortcuts too." Others, like P38, pointed out safety risks stemming from inexperienced (newer) staff who lack awareness of security protocols, contributing to feelings of vulnerability. They said: "Some of the new people have no clue. I find that frustrating. 'You forgot to lock this door at lunchtime.' That kind of thing." The unpredictability in the environment necessitated proper protocols for safety, which was an exacerbated concern when there were fewer security staff present (e.g., "Even the fact we only have one security guard in our area is a safety concern to me. And if anything was to go wrong, how long is it going to take for more security to get there? And if you were an offender and you were trying to get revenge on someone or to hurt someone or deal with one of your problems.... It's just such a vulnerable place" [P77]).

#### 5.12.5.5 Hypervigilance, Attentiveness, and Strategic Positioning

Many CPOs discussed the importance of being aware and attentive as a safekeeping measure. Participants used words like "alert", "attentive", "vigilant" and "observant" to describe their safekeeping while facilitating programs with inmates and working within the institution (e.g., in their office). Because working in correctional services can be very turbulent and unpredictable, CPOs acknowledged the importance of always being aware of their surroundings and being "hypervigilant" when working in correctional services— especially in the context of working with inmates. As P4 explained:

You got to be vigilant. Something can go wrong all the time. So, you have to keep your head up. You have to know your surroundings. You have to watch for things. You have to be on high alert from the minute you walk in that gate to the minute that you leave. There's no doubt about that ... it's unlike any other job that you could have in that you have to be sure in your classroom what you have out and what you don't.

As P4 noted, program participants can be erratic and engage in deviant acts in correctional services. Because of this, CPOs had to mentally prepare themselves to handle potential safety situations, and to this effect, are proactive in how they manage the safety of their classroom. The same is true for how CPOs managed and navigated their safety in other spaces within the institution. For example, CPOs often conduct interviews with program participants in their office as a component of programs, meaning, they have to heighten their awareness while operating in those spaces. P62 gave an example:

I find just being cognizant of who's spending time around my office because the movement is so open. At other prisons, they could never just walk up to your door because you know, they've got movement, and gates, and officers, and locks. Here, literally anybody could stroll up to my office. So I'm just cognizant of who's around. If there's people that I haven't really spent much time with and their lingering more often or their speaking to me or, if a lot of my group participants are coming to my office more and more, I'm mindful about that.

As P62 highlighted, the hypervigilance and awareness CPOs practice is not unique to programs as hypervigilance carries on to their navigation of other areas in the institution. Because CPOs cannot always tell what program participants may be up to or planning, they gauge their behaviour and body language to proactively secure their safety. CPOs will also examine their surroundings and be mindful of who is in the room with them so they can gauge the safety level of the spaces within

which they work. Such strong situational awareness from CPOs helps them to anticipate potential problems, make quicker and smarter decisions, and hence, be more prepared to handle unexpected situations.

Furthermore, many CPOs attributed their proactive safekeeping to having good situational awareness of the class environment and being aware of how their program participants behave during programs. For example, P3 stated:

I set the tone right off the bat. I'm always got one eye opened. And I'm always trying to read the room and read the situation and the institution. I walk in, try to see—you know, if inmates are weird when I walk in, then there's something else up. And then I got to read my classroom and see where they're at. And if they're kind of off too, then try to get to the bottom of it. I haven't worried about my safety in a long time. There's been moments where you know, someone disagrees with you in class.... I've had a book thrown at me. Or I've had some threats and stuff, but not in a long time. I try to read the situation of the day. I try not to be just aloof when I walk in.

CPOs acknowledged how being vigilant and aware helps them stay on top of what happens in the classroom, avoid making security mistakes, and have a better grasp of the overall classroom climate. As P3 also noted, being hyperaware also helped CPOs address potential problems both when they happen and before potentially escalating since it puts CPOs in a better position to actively monitor the behaviour of program participants, and thus, to take the necessary steps to address misbehaviour or other issues when they occur.

The situational awareness CPOs have on the job often extended to how they facilitate programs and work with their program participants, too. For example, P59 explained how good attention to detail was vital to staying safe while working with program participants:

I'm sitting there trying to talk to them about their feelings and how to manage their emotions. So, everything that we talk about triggers things. And I guess it's being aware. Knowing that you follow the rules and doing all the safety and putting everything in place the way it's supposed to be. And also, really being aware of what the divide is, right? So, [do] I need to cut my class short today? Do I need to—if the guys come in and they're quite agitated—and it could be anything. It could be breakfast was late. They didn't get a good sleep last night because somebody did something stupid and [COs] had to search all the cells. Maybe they couldn't go the gym. So they come in and they're all very agitated. Well, if they're in a miserable mood, I'm not going to accomplish too much by poking at them and saying "Hey, tell me about your feelings. Tell me about that time that you did that horrible crime. What would it make you feel?" Right? At that point, I'm just throwing gasoline on a fire. So, I have to be able to read that situation and try and keep them positive.

Similar to the boundary setting CPOs practice, CPOs use their situational awareness when working with clients to develop rapport, gain mutual respect, and to mitigate hostility. CPOs' efforts to understand program participant triggers, and how they think and how they act, make them mindful of how to avoid agitating program participants during programs and, to this effect, permit them to develop and facilitate programs that minimize hostility and maximize rehabilitative progress. P63 further outlined why a CPO's awareness of external factors outside of the classroom can be integral

to how they safekeep and secure their classroom:

We're diffusing situations, we're ... trying to gauge participants, you know, every time they come in the room. How is everybody's body language? What are the things that are being said or unsaid? We typically start with kind of a balance checking in on how everybody's doing over the last little while, you know, what can be said about that what are some stressors that they're facing? So just trying to be aware and kind of gauge where that's at and then when it comes to kinda like— what I was saying about accountability and programs— you just kinda know gradually getting to those points that are maybe most sensitive or people are maybe are prepared to acknowledge those challenges or those wrongdoings and just kind of being careful in how you approach different behaviors or crimes, things that have happened.

As P59 and P63 highlighted, being hypervigilant extended to how CPOs read the body language, mood, and behaviour of their program participants, but also their ability to recognize when external factors are affecting their program participants. Since certain factors outside of programs can affect how program participants behave, and subsequently, the overall tone of the classroom, CPOs are routinely cognizant of how these factors can disrupt their lesson plans for the day and undermine how focused and engaged their participant programs will be during programs. For example, if a program participant is in a bad mood (e.g., because there was a recent lockdown in the prison), a CPO may take steps to not push a participant during programs or may modify their teachings to be more lax for the day. Similarly, a CPO may be mindful of how they phrase or ask questions related to a sensitive topic or the crime a participant committed to avoid making them more hostile and to foster more constructive engagement. By being aware of these factors, CPOs use their introspection to facilitate programs in a manner which avoids further agitation and keeps their participants meaningfully engaged with the programs. Thus, CPOs' awareness level helps them foster safe and secure class environments by creating class climates which are less toxic and more productive to the successful reform and rehabilitation of their program participants.

#### *5.12.5.5.1 Strategically Positioning*

With the context of safekeeping via being hypervigilant and situationally aware, CPOs also discussed the value of strategical positioning while working with program participants, particularly in prison setting. This safekeeping method is used by CPOs to safely position themselves in a specific spot to 1) maximize their vigilance and safety in said location and 2) mitigate risks which can compromise their safety. Several CPOs gave unique examples of being strategic in their positioning both in the classroom or other areas of their workplace (e.g., their office).

For example, P23 explained, "I make sure that when I interview offenders or I'm delivering group that I always have [physical protection] and I have a way out of the door very quickly." Likewise, P39 discussed the importance of "placing your desk closest to the door [and] not having your back to people." P62 also followed this strategy when meeting with participants outside of programs, explaining: "I will always have my back to the door, and I will put them in the furthest point across from the door." P45 detailed another example of strategical positioning:

I always make sure there was a clear path from me to the door. If I was meeting with an offender in a room, I'm closest to the door and I'm facing them. Like they're not going to

be behind me. I always have my keys and stuff around my neck. On a breakaway cord. I always have lights on ... so people knew I [am] in that room.

In each of these examples, CPOs took pre-emptive steps to optimize their ability to protect themselves. By positioning themselves closer to the door and wall, CPOs maximized the vantage points they have in the rooms they occupy—which can enhance their ability to be situationally aware and monitor said rooms. This also kept CPOs safe by minimizing their chances of being put in a dangerous or unsecure position. In the event of an emergency, CPOs are better positioned to safely retreat when they are closer to the door. Likewise, when CPOs position themselves facing their program participants (as opposed to their back turned away), this allows CPOs to see what a client is doing and have better control and awareness of what occurs in the room.

### **5.13 Burnout and Effects of Occupational Stressors**

Participants collectively highlighted an organizational system required to prioritize operational demands over individual readiness and nuanced care, leading to programming practices that place undue pressure on both the participant and the CPO, the consequence being also harmful for the CPO who experiences frustration, a diminished sense of accomplishment, and, potentially, ‘burnout’. Burnout here is fatigue felt by the mind and body tied to the emotional labour of supporting program participants, including compassion. P14 described how “it’s made me I guess bitter and just tired. I’m exhausted. Being a program officer...it’s definitely emotionally and mentally exhausting.” P43 felt “if I was not doing my job and I was doing a job that didn’t involve so much trauma, I would probably be more stable, more healthy.” P53 called the work “draining” while P74 caveated “mentally draining”, and P57 felt they’ll “lose my mind. There are days sometimes I come home from work, and I just go to bed.” These experts revealed the fatigue, particularly of mind, accompanying such emotionally laborious work.

#### **5.13.1 Accumulation of Exposures to Trauma and Stressors**

Most CPOs, like P36, were unable to “narrow it [what sticks] down to one specific event”. Instead, feeling their entire career has had adverse effects overtime which can “affect your mental health. The way you operate. The way you carry yourself.” CPOs spoke of the cumulative strain of repeatedly facing or hearing about adversity. Changes in self, for example, did not simply occur after one exposure, although for some change could occur so quickly. Most often, change happened after an accumulation of exposures over one’s career, many participants noting the “seven-to-ten-year mark” (P55) as most strenuous or where they reached “a saturation point, I think there’s just too, too much violence for one’s psyche to take on” (P55). The accumulation of trauma is thought to take a “toll, mentally.” P41 described how residual effects are cumulative... it’s like piling on and piling on and piling on to the point that you’re like ‘holy shit. Like I am affected’... It does affect you... It’s kind of like animals. When they’re sick, they’re sick. When they start showing they’re sick, they’re really sick.” The cumulation appears to, overtime, affect how CPOs enjoy their job (e.g., “getting to the point where every time my alarm went off in the morning, I’m like ‘shit, I don’t want to go to work.’ And just not looking forward to the day at all. Whereas I used to love my job” [P61]). Prolonged work stress clearly affects CPOs.

CPOs spoke of cumulative stress stemming from difficult cases, report writing, and engaging with clients' traumas, all adding strain to daily responsibilities. P21 called the work a "slow drip" as they believed occupational stress caused long-term damage and CPOs were often unrecognized in being susceptible to such harms because they are not in uniform. CPOs explained how exposure to human suffering and building connections with program participants creates unique stress, as professional duties require finding humanity in difficult situations. P54 noted "that created its own unique stress... you have to find the strengths in that human being." P55 spoke to the cumulative effect of working with people with violent histories (e.g., "...the level of violence, when it came time to put offenders through my program who were serving sentences for murder and extreme violence, those are the ones that I got to a point where I had had enough").

Exposure to ongoing stress and traumatic content accumulated, affecting personal well-being, family relationships, and health, especially when professional responsibilities require such exposure. Trauma, CPOs noted, accumulates gradually with constant exposure. P83 described enduring the emotional cost of helping others and the cumulative emotional toll affecting personal life and relationships, like being "dad" or a spouse. Likewise, P66 said "it impacted my home life. At points my husband's like 'what is going on with you?' He really thought there was something wrong with me."

With these words P7, who experienced "two deaths in custody", described workplace events which no longer affected them but did require treatment and, to cope, has learned to move beyond "what people were saying and just listened to myself." Here, residual effects are more rooted in learning to trust oneself, acceptance, and being alone, evidencing posttraumatic growth, rather than being socially dependent for determining personal self-worth. This self-doubt is common. For example, P68, given the work realities they have experienced, spends time "questioning my response. I'm questioning my sanity. Am I thinking clearly? How do I know I'm thinking clearly?" Their words again reveal a cumulative effect on self where their work creates self-doubt. Thus, not all have experienced posttraumatic growth but there is hope in that some CPOs have. Within this context, we unpack how trauma exposure lingers to affect CPOs overtime.

#### 5.13.1.1 Changed Self

Asked "How do those kinds of experiences affect you long term?" P5, after a short pause, responded by stating their "confidence, you never know what's going to happen. I don't know, that [an incident] was so traumatizing I actually left here and went to a different site for a year. Like [I] couldn't get in the door in the morning." P63 thrived on "wanting to see and kind of support the good in those people [criminalized people] so that they can change and get out. It's not always an easy process seeing that,... [It's] hard to not see it as an extension of some of those policies and systems that have happened,... [It causes] definitely a lot of anxiety and guilt towards things, just negative thoughts overall." P70 changed, too, describing themselves as becoming "jaded" from their work and "more cold" as they struggled with "not judging people a little more harshly." Moreover, after interviewing a program participant, they can feel "pretty messy", thus the work does have effects – lingering and acutely.

Many participants felt they changed by becoming much less trusting of people, in prison and outside prison. For instance, P16 felt their work has "made me a bit more, like, suspicious of people and less trusting." They described "seeing the world with a more negative lens," almost a sort of

judgment where they expect the worst rather than best from people. P17 echoed, explaining how their lack of trust affects their personal life, too: “I’m pretty skeptical of most people.... I keep my stuff fairly private.” They continued to speak of “bolting down” objects which could be stolen from their home because of their ingrained distrust, revealing the challenges of their work. P28 struggled, simply said, with “just trusting people.” Recognizing the role of the job in creating distrust, they explained how they struggled with “reading files, and you’re just reading lot of information that, a lot of sometimes terrible information that can be hard to process. Probably the brain’s not meant to process that type of information on a regular basis.” In response, P28 volunteers, “it’s impacted my anxiety level.” They explained how they recognize if an event continues to affect their wellness through their experience of “increased anxiety about something.”

Another common way CPOs changed from their experience is via “dark humour.” P17 explained how, generally, “we people from corrections have a lot of dark humour [laughter] to cope with it, but it’s kinda gross.” Isolation also was a way people changed, where, for P39, the residual implications of their exposures to abhorrent materials and adverse realities are a need to isolate in their personal life. They explained they “definitely have isolated. I don’t feel the need to gather in groups. I don’t like going out where there’s many people where things could happen. Even within my own family, I feel like I’m short with them sometimes.”

#### 5.13.1.2 Hypervigilance

A common way CPOs changed is by becoming hypervigilant. P11, who started working as a CPO at 18 years of age, attributes to the job how “most of my job issues or experiences that would have triggered mental health issues kind of started around that time.” Although unsure if a direct effect of work, P11 explained how they experience “hypervigilance and endurance ... and the longer you work for CSC, the more jaded I can be.” Their growth after trauma may be less than ideal, speaking to having “developed this, I guess, tolerance, if you will, for what traumatic information.” They continued to explain how traumatic information becomes a norm one does not “realize” because of the abhorrent materials one is exposed to in the course of one’s work.

P21, who like most interviewees did not start at 18, is also hypervigilant. They explained how, after working in prison for years delivering programs, “you learn to sit in a restaurant.... You tend to sit in the corner so you can see who’s coming. You learn to walk down a walkway with your head up rather than your head down buried.... Just all those small subtle things you do to be aware of their surroundings, and that trickles into your life of course.” Perhaps for similar reasons, P25 is continuously stressed (e.g., “I’m on stress all of the time. I just can’t shake it. You just know too much. And you suspect everybody. It’s stressful”), which they attributed to their hypervigilant tendencies at work and at home.

P45, who made light of their situation, noted “I’ve also picked up a lot of not-so-helpful things. [laughter]. Like anxiety [laughter] and the constant having to remind yourself that not every human in this world is a bad person. Or out to hurt you, or out to hurt your children, or whatever. That takes a big toll on somebody.” P59 had “sleepless nights because of talking with these offenders, working with them, and knowing their entire nature of their crime. But also hearing from their view. It can be beyond disturbing listening to it. And where you’re sitting face to face talking with that person and you already know what they’ve done.” They explained their vigilance is tied to their family, as P59 worried about their “kids” because “I work there, if my family’s information

gets out.” Being an approachable program officer left P59 so informed about their program participants’ criminality that they always “think about how scary some people can be.”

P67 explained they are “not the same person as I was before working at CSC.” They became hypervigilant at work and outside of work (e.g., “I now have a security system at home with cameras” and “I see danger everywhere because I know what some people are capable of”). Their worry is to “meet an offender on the street that I once had in program and that may be displeased with a report that I wrote.” Thus, they practiced vigilance (“facing the door because I wanna see who’s coming in or out [at restaurants]). However, P67, did not talk about their vigilance and worries because, like most in our sample, “we need to project an image of being tough and we need to project an image of we’re working with the toughest criminals, so we gotta be tough.” Overall, they spoke to changing as a person due to their work (i.e., what they have read and seen), which cannot be undone and how their work affected their understanding of people.

P76 was hyper aware of the “public aspects” of the job, yet described “days where I come home, and I can just feel that the day was heavy. I’m feeling more overwhelmed, I’m having trouble kind of washing the day off.” They at times felt “just emotionally depleted when I get home,” which they believed indicates “when certain things have been triggered or heavier.” Thus, they accurately feel the effects of their work and feel an accumulation as well, which challenges their ability to engage in their personal life without suspicion and concern. A derivative of the job is clearly an ongoing sense of heightened alertness and vigilance in response to workplace risks, which they felt contributed to anxiety and cumulative emotional strain that affected their overall well-being. P63 described having an underlying anxiety and hyper-awareness around potential violence and aggression, contributing to a constant state of alertness. And P59 articulated safety concerns permeating into their personal life, affecting interactions in public spaces, and contributing to hypervigilance. They said “these concerns about safety also shape your experience as when you are off duty. Everything down to daily interactions. How we want to sit and stand being in crowds.”

#### 5.13.1.3 Haunted

Another way the accumulation changes CPOs is the lingering long term affects. For instance, P3, who described seeing “inmates change” as their favourite part of job, felt their work is “also really draining as well. Because if you put a lot into it, it takes a lot out of you. But ... I think I see my results with their interactions with me afterwards. And the years later that they still interact and still appreciate.” They spoke to a “residual impact whether you compartmentalize it or you numb it, or you embrace it,” which is suggested as an after effect of working in prisons and witnessing incidents. The residual effect is also thought to present as linger thoughts “haunting” CPOs. For example, P10 explained how some work experiences (i.e., deaths in custody) continued to haunt them. They explained how a certain incident:

still messes with my brain sometimes. Like, I just will think about her. We had another inmate who had passed away. I see her a lot. She’s not there but she had this specific jacket. I know it’s stupid, but it was a ski jacket. A Roxy ski jacket and it had like all these colours. And whenever I go to the ski hill or anywhere, I see her. I’m sure I see her. So, that freaks me out because I know she’s passed on. She’s not even alive.

The CPO continued to explain how seeing the challenges some program participants face can be heart-harming and a “mind break” because such incidents seem far from rational. Thus, here, posttraumatic growth comes with acceptance of illusions, whether from others or one’s own (i.e., seeing the prisoner on the ski hill). Recovery, then, appeared to be experienced differently among individuals when and if recovery is truly possible.

P17 also cannot move past some of the realities they have faced in their work: “I would say definitely, I’ve got some stories that are fixed in my brain that I’ll probably never rid myself of.” Although continuing to provide examples, the essence here is how some realities cannot be unheard and that “when you read it or when you hear it from the women [clients], either way, it’s like you get that visual in your mind about what have happened to that person, and that does definitely sticks.” This is echoed again by P18, reiterating clearly the most predominant theme, who explained the residual effects of the work, stating: “I think the longer I do the job the more I realize the vicarious trauma, and how just having access to this information, and having this information inside of me for so many years, and how it does affect, how it changes you. I like what I do.” Most CPOs felt competent in their ability to run programs and build rapport to help incarcerated people. However, the job does take a toll on these workers. They felt for the incarcerated people, despite their crimes, as well as for the victims of their crimes. P18 recognized “there’s a kid out there, and this is happening to them, and it’s so horrific. And I would just, like, end up weeping at my computer and having to take a break from it because it’s so, it’s fucking awful, what’s happening.” Not surprisingly, P18 found “it’s hard, it’s difficult. I have found it very difficult to process.” As such, the realities, like such detailed knowledge a child’s victimization, do stick. Moreover, after writing a report, the CPO still had to reread the report, thus creating multiple exposures which make the realities “stick” more comprehensively. P45 too felt “you can’t unstick that [exposure] from your brain.”

To manage the lingering thoughts, P77 strived to be constantly “creating a lot of boundaries around you when you’re at work” but lamented how “you carry that over to your personal life. So, you don’t let people get as close.” Which can make maintaining relationships difficult and starting new relationships near impossible. They described themselves as “more closed off” since starting to work at CSC. P74 felt “some very horrendous things that I’ve read and things have triggered things in my own past. I’ve had to deal with [that]. And it continues to happen.” To manage the accumulative effects of trauma, they strive to not become “part of their stories” through separation between the self and job. They advocated for “some ability to separate work from [life] when you’re leaving the site at the end of every day.” As they warn, if not, the work will affect relationship with loved ones. P85, who “I consider myself skilled at self-care and really good [at] boundaries. But there’s certain ones that just don’t leave my mind.” Thus, evidencing how some realities penetrate deep in the psyche and are challenging to overcome. They described “dreaming about certain things” and become hypervigilant when in public spaces. Moreover, they felt the effects on their relationships, often feeling people are dishonest in general, which left them very “cautious.” The effect on self then, is described, as “very hard to get over.”

Boundaries served P66, who has been “fearful of the offender,” who had threatened them, which shaped their experiences. They try to remember: “what a person presents to me in programs, that is not always what they’re presenting to other people.” Thus, some incidents they “still think about,” which P66 did not find surprising given their diagnoses of PTSD. The reality being, simply

said, “those are the things that stick with me over the years. And that’s how I know that they’ve impacted me because I’ve held on to them.” Similarly, P73 explained how realities remained impactful, saying: “You can [become] stuck in your grey matter.” In response, they really focused on supporting those they work with – as the job can be challenging.

P78 felt “a combination of experiences over the years” at work and at home has changed them. P80 sat with an experience where a participant in their program was suicidal and “I couldn’t stop her. And I felt guilty, I felt horrible [crying]. I know it wasn’t my fault, but I still feel bad about it [crying]. She didn’t die. Which is good.” The incident, the close call, stuck with P80 despite being “years ago.” They noted “it still impacts me,” explaining how the experience remained challenging and compromising for their wellbeing. The idea of a compromised self comes out in P49’s words, as they explained how they normally have much compassion for the people in their program, yet, in a singular experience, they could not, due to the crime and victim, have compassion. The consequence was a harmful struggle with self. They explained: “In my job I have a lot of compassion and stuff like that. And I think it’s a good thing to have that when you’re trying to help people change. But I had no compassion for this guy. And that actually caused me a lot of— not sleepiness nights, but a lot of stress. It’s coming out in different ways.” For this participant, stress manifested both in personal and work life, and was only resolved when this person was off their caseload. Such narratives revealed how the job can be unhealthy. Whether this incident will continue to bother the CPO is yet to be confirmed, given how recent the exposure was to when interviewed.

Overall, participants have been deeply affected by their experiences. The narrative of P23 illustrated the effect of these long-term impacts: “probably in the last 10 or 12 years, I think I’ve lost, at least 15 offenders that I was actively working with to overdose.” There experiences have “definitely shaped me as a person.” P23 continued to explain how the difficult experiences tied to their work “never go away. Those are things that I’ll take with me, but when I’ve done my career, they just, they continuously stay with you.”

#### 5.13.1.4 Desensitized

A final way participants described changing is by becoming desensitized. Describing themselves as “jaded”, participants like P49, felt desensitized over time and thus, felt confident the job “changes you as a person.” Like with P52, their employment contributed to a diagnosis of “depression”. P53 is also “desensitized” as they felt their coping included “just push it down and it kind of stays there.” While P13 felt the “heavy, heavy stuff” they must manage has “weighed heavily on me”, surprised how after 21 years in the role they “I didn’t know that could still happen because I’m so desensitized.”

P15 is not the same after reading abhorrent materials which changed their perspectives and interpretations of their communities, rather negatively. They provided the example of how society may view a scout leader volunteer as a “good person... good role model for the kids,” however, “in my head, I’m thinking pedophile. And I know that’s not always accurate.” They appreciated “sort of realizing that it [the abhorrent event exposure] can catch up with you.” P28 explained the frequent exposure to abhorrent events has left them “desensitized” to “certain things as well, because you sometimes just forget. For example, [if] we’re shut down because there’s a stabbing.” They forget how abnormal stabbing should be in “regular jobs” yet, working programs, stabbing

was just a reason for a program to be canceled. Thus, their occupational world is different than the interpretation of the world of free society.

### **5.13.2 Impact of Trauma and Work-Related Stress on Sleep**

A prevailing physical affect of the stress experienced by CPOs is on their sleep quality (i.e., nightmares) and quantity (i.e., insomnia). For some, nightmares only occurred once the CPO was off shift and able to rest their neurological system. P26 said “there are times it can impact my sleep patterns” and P69 confirmed “the weird thing is I am having nightmares a few times a week... I’m waking with nightmares. It’s weird. I was like my central nervous system is kind of getting out of whack.” Several CPOs reported sleep disturbances, beyond nightmares, like teeth grinding, and insomnia, largely due to the cumulative effects of their high-stress, trauma-exposed work environments.

P83 who suffered from frequent nightmares related to traumatic work content, noted the nightmares began even before joining CSC: “I have nightmares—some before starting CSC as well. But they’re definitely common for me. Some of them might be quite horrific and think it’s based on what I read in that particular day.” P2 manifested their stress physically through descriptions of temporomandibular joint (TMJ) and sleep disorders, often feeling exhausted from a chronic lack of sleep and “operating on fumes”: “I have severe TMJ...I have an upper and lower plate for my teeth because I’ve had several root canals. I get Botox in my jaw because at nighttime, that’s where the worry comes out.” The consequence of sleep deprivation is neglect and complacency at work. This undermined their trust in the workplace environment (i.e., “I’ve been in a crisis situation where like I was the crisis negotiator... [the correctional manager on duty] was sleeping. What the hell is this? ... [It’s] so embarrassing to work for this place” [P80]).

Sleep is a symptom of stress, further elaborated upon by P34, an Indigenous CPO, who faced sleep challenges from reviewing disturbing case files. In response, they relied on sleep aids and felt their sleep is made worse by intergenerational trauma. P34 explained: “I do rely on sleeping pills to be able to get to sleep and of course, I’ve got personal things going on as well. As an Indigenous person I would say I have a lot more problematic personal things going on within my family and community than non-Indigenous people do.” P34, like many others, had “a harder time sleeping ... sometimes I do rely on sleeping pills to be able to get to sleep.” P41 “had insomnia” and P43 was “so tired mentally” but still could not sleep, thus they are “contemplating possibly leaving in the next five years.” P59’s “sleepless nights” are attributed to “talking with these offenders, working with them, and knowing their entire nature of their crime. But also hearing from their view. It can be beyond disturbing listening to it.” Thus, for many CPOs, sleep is compromised which impacts their abilities to manage the day-to-day workload and emotional burden of their work.

### **5.13.3 Spillover into Family Life**

P20 explained, “we listen to a lot of really terrible things. It significantly impacts our lives and our relationships with other people.” While P45 clarified the emotional burden of how “it is really hard to not be so suspicious of everyone that you don’t know.” P53 did “a lot of over-thinking, and, like, questioning people’s intentions even.” The influence of the job informed “how you raise your kids” (P58) with “some pretty significant impacts” (P58). Impacts on parenting included on the

liberties children are offered and having a strategy if, while off duty, they encountered a program participant (e.g., “I have this thing with my kids ... where if I talked away from them in a store, they need to immediately leave the store and go wait by the vehicle. To pretend they didn’t know me. To just walk away” [P9] or “I have absolutely told my kid, ‘you keep walking’” [P71]).

Occupational stressors, both organizational and operational, can transcend into CPOs personal lives, affecting interactions with family, heightening vigilance in everyday settings, and even limiting staff’s ability to enjoy social activities. P80 said their experience at work affects “my home life. It’s very hard.” Staff find leaving their work experiences “at the door” challenging, which affects relationships and daily life. Many CPOs, like P61, discussed a heightened alertness in everyday public interactions, shaped by working with criminalized people, and how the details “stick”. They admitted “working with sex offenders affected my kids.... Then you find yourself looking for that stuff in the community. So, as an example, my kids were not allowed to go to the mall and sit on Santa’s lap anymore.” Thus, the work can come home to create new anxieties as CPOs struggle to shake off work-based vigilance in their personal routines.

Many CPOs discussed changes in parenting styles and family interactions. For example, many CPOs avoided discussing work with family to prevent distress, yet the avoidance had implications for their own processing of incidents. P75 explained “I don’t talk about my job with my family.” Moreover, P42 described a tense dynamic with their partner over their hypervigilant parenting style, which they attributed to a shift in their outlook on trust and risk, especially when it comes to her children. She said “my perception of society has changed.... Sometimes it causes conflict at home because my husband will have a certain way of doing things or like ‘ok, you don’t have to helicopter the kids.’” Commonly, CPOs spoke of an increased protective instinct with their children, which led to strict limitations on their interactions with others. Simply said, professional exposure can encourage overprotectiveness and strained relationships with family members, who may not fully grasp the root of their vigilance.

Like many others, P70 explained how her work’s emotional demands have affected her marriage and reduced her motivation to be socially active. The problem being how many CPOs felt finding time for relaxation and personal enjoyment more difficult. P8 described their work as affecting their marriage and they needed time to decompress before interacting with family: “there have been times where I come home from work and I’m like, to my husband, ‘I need fifteen minutes to myself. By myself. I need to let it go.’” Some CPOs spoke of the irritability caused by their work, leaving them such that “I wouldn’t want to workout, I would just buy takeout and I would lash out at my family members” (P50). P39 said “even within my own family, I feel like I’m short with them sometimes. Just in terms of stress, I don’t want to talk about anything anymore. I guess I kind of shut down when I come home. I don’t necessarily want to be, ah, around people.” Overall, for CPOs, there is a toll from work stress on relationships and difficulty in balancing home life.

## **5.14 CPO Health and Wellbeing**

### **5.14.1 The Physical Consequences**

CPOs felt the physical consequences of their work, beyond their sleep – specifically, the work-related stress. Physical consequences which were more prevalent included (but are not limited to)

tensions with grinding teeth; headaches and migraines; insomnia; vomiting (i.e., “I was throwing up in my trash can before my programs” [P11]); autoimmune disorders; eye twitches; rashes and hives; gastrointestinal issues; consistent fatigue; being hyper alert; and chronic symptoms of diverse ailments.

Sources of stress, as noted, included rigid bureaucratic demands and pressures for productivity, which create a dual burden of meeting institutional performance metrics while managing the emotional toll of their roles. All of these physical health challenges are compounded by limited mental health support, inconsistent workload distribution, and inadequate managerial training.

### **5.14.2 The Psychological Consequences**

CPOs described emotional exhaustion and the need for rotation from their role, emphasizing how cultural practices produce work-related stress when there is a lack of reprieve. In terms of repercussions on the moods of CPOs, some reported becoming irritable because of what they see and what they read (i.e., “I frustrate very easily, any sort of stupidity, anything that requires any form of emotions from me, I tend to find frustrating” [P20]). This irritability can also equate to angering easily (“I did become a very angry person” [P74]) or becoming “short tempered” (P23) and “grumpy” (P26). Some spoke of becoming more “cynical” (P74).

The toll of work can lead to leave or, even early retirement. The absences, however, affect the workload of remaining CPOs, creating a vicious circle. There is also resultant guilt among CPOs who do not want to take leave, but need leave, to not overload their colleagues. Regarding early retirement, P3 stated that are “still working to work with inmates and help them, encourage them. But, I’m currently just writing my leave applications for retirement because, I’m done. And I think that the impact of the job kind of weighs on you.” Regarding taking leave, P14 noted “in the last few months, we’ve gone from six program officers in my office to two.” P23 provided the reasons for staff shortages as “mental health leave, some are on actual illness leave, and, and some have moved on to other positions.” Many participants felt “overwhelmed with the emotionally pressures that the job brings” (P3). Not surprisingly, perhaps, P69 “decided to leave CSC because, my mental health was continual, like, just continuously deteriorating over the years.” P71 said “My mental health is fucked because of this job.”

CPOS spoke of symptoms or diagnoses of anxiety and depressive disorders due to the occupational work. P3 was dealing with “anxiety [and] depression”, P6 was diagnosed with “ADHD and generalized anxiety disorder”, P50 had “mild to moderate clinical depression with anxious distress,” and P7 is “on anxiety and depression medication now,” while P9 was “diagnosed with burn out... and I have generalized anxiety.” P10 said, they have “always had anxiety. But when I came here, it blossomed into something that desired medication.” Simply said, like P16 noted, the work “definitely impacted my mental health.” Here, P60 required help to “manage to panic attacks and so forth” which, like others, started with the job. In all, dozens of participants had symptoms or diagnoses of mood disorders and anxiety disorders.

CPOs also spoke of diagnosis and symptoms of PTSD. P9 said “my doctor is hinting around, sort of, the potential of a complex PTSD,” P12 was “eventually diagnosed with PTSD”, and P35’s PTSD is accompanied by high blood pressure. The symptom of hypervigilance, as discussed, was most frequently noted. Here, participants spoke of how “I’m always on guard” (P10), “I’m sort of

extra vigilant” (P16), and how “when I’m walking into a room like I’m definitely looking for my safety elements” (P37). These realities transcend work and home lives.

In addition, by repeatedly reading about the crimes committed and the impact of these crimes on the victims, CPOs mentioned experiencing what they call “vicarious trauma” – although they are directly reading trauma thus experiencing the trauma narrative first-hand. For many, reading victim impact statements was most deleterious because reading leads to the creation of mental images that are difficult to erase. P18 explained how “the longer I do the job the more I realize the vicarious trauma, and how just having access to this information and having this information inside of me for so many years, and how it does affect, how it changes, you.” P19 found challenging and impactful “reading it over and over again, all that, the partner abuse, the child abuse, sexual offending.” P20 found learning about “dirty diaper fetishes, you name it” hard as they “have to sit there and have these, like, compassionate, kind, faces where we ask all these questions and be supportive and understanding of these bizarre, terrible things.” P20 also found challenging when the perpetrator is also a victim, “when they talk about the things that have happened to them also.” Likewise, P34 described the “vicarious trauma that we carry in regard to, like, reading their files. We can, we can personally relate to a lot of the things that our offenders have gone through.”

In part for these reasons, P28 felt they have “compassion fatigue” and P29, speaking from experience, noted how “if it is something you don’t deal with that bothers you, I can see how it could impact you.” P32 worried that in a correctional workplace “trauma isn’t seen as trauma, because it’s vicarious trauma,” stating vicarious trauma requires more “emphasis.” Particularly because CPOs read a lot of files and reading the files is difficult – they feel they have little training and support to manage the feelings evoked from reading the files – “there’s a lot of information that’s really hard to digest” (P45).

CPOs described a lack of debriefing resources and how they too often internalize client trauma without adequate support in favour of “chugging along”. They felt they lack, as per P36, “mental health support. And I say that because it is also something that is getting better.” But there is some optimism in changing trends in mental health support provision. As P36 felt better after “being off work and getting outside support and help.” Like many, P23 highlighted the need for personal mental health breaks due to inadequate organizational support.

### **5.14.3 Moral Injury**

CPOs appeared to experience moral harm, distress, and injury from diverse sources – the occurrences that compromised their morals, ethics, and values. CPOs, whether in institutions or the community, described the harm in seeing the potential of correctional programs and services to help criminalized persons, yet knowing that many were not attending the programs for rehabilitative purposes. P9, for example, explained how “I genuinely believe in the work that we do being imperative in the context of reducing risk, encouraging effective reintegration, stepping in when somebody is escalating in the context of a crime process, helping give people the tools that they need to manage themselves in a more effective manner in a community after spending years incarcerated. I believe in the worth and integrity of that work. And I take it very seriously.” However, CPOs were aware their program participants may not see the value and benefit of programming. Moreover, many CPOs felt program participation intensified prior to release, which made them question the reasons why participants completed programs.

Institutional CPOs were challenged by participants being in class who were not ready for the programs because, not only did their presence create an unsafe environment, but they would not benefit from the program and likely derail other participants. P75 provided an example of a dangerous offender, who had much time left to serve, who was placed in a program and threatened the CPO repetitively. The participant felt that “all around he wasn’t ready for his program. He wasn’t ready to change his life yet. He had just got to jail. He was bitter, whatnot.”

P15 described institutional programming as “very structured” in comparison to the community, where participants are “pulled in many directions. And what I mean by that is they could out, they’re expected to take programs.” P15 continued to explain how “ideally, my experience is they want you to run the group as you would in the institution. But the reality is, nine times out of ten, you always got a guy canceling last minute. So, you got to make up a session sooner or later.” The cancelations and make up sessions, experienced by CPOs in both institutional and community settings, are challenging and can be morally harmful because the CPO is going out of their way to help with programming, yet the participants is indifferent and fails to prioritize attendance and learning. Moreover, their workload intensified because “we are constantly exiting people from said classes because they’re getting suspended. They’re reaching warrant expiry. They’re finishing a program in a positive way.... We’re constantly doing exiting interviews and the reports there as well.”

Thus, beyond workload increase, in the community, there is also moral harm where “a lot of guys would just go get suspended.” Here P15 described the harm of intentional suspension despite the CPO trying their best to affect change through programming. P28 who felt their work “can be rewarding,” also protected themselves because “a lot of times you see them come back.... It can be rewarding but also it can be discouraging.... [I] kind of present the information and work with them, but it’s up to them to do their work.”

P26 reiterated, “I focus more on the community program, and this is for guys that didn’t do any programming within the institutional setting.” P26 admitted “there’s a reason they didn’t do any programming”, explaining some were segregated from others or had “responsivity issues”, mental health or literacy challenges, which the CPO managed using an individualized approach. An individualized approach was operationalized as “slow[ing] down some of the content for guys. Maybe instead of getting a full session in, you might get a half session in a day. If somebody has some problems being able to understand the material and being able to sit still” (P26). P73 explained how “sometimes we also get the cases who are refused everywhere else. So, you got those guys.” Thus, at a CCC, CPOs felt harmed when released prisoners who require intervention lack programming opportunities despite the clear need for intervention.

P77 explained having safety concerns at work, which create stress, that were also evidenced in feeling unsupported by management. Regarding safety, when CSC failed to pay for a security support in the community or to ensure CPO safety when delivering programs, CPOs felt their safety was not valued and thus could experience moral harm. Other injurious experiences occurred when CPOs felt unsupported by management, like P9 who felt they are “balancing the offenders needs against my manager’s unwillingness to push region [regional headquarters] for funding for my safety, and then the efficacy of the program. Because in-person interventions are hands down more effective than over a Teams meeting.” The CPO echoed others in stating how programs are less effective remotely but felt unsupported in pushing for in person attendance.

Moral harm was also evidenced in people doing SOP, who had to do phallometric assessments and found the actions harmful. These CPOs had “flashbacks” (P64) and felt the experience “left its mark as far as, I think, how my view of the world.” P81 called the exposure an “ethical dilemma” as they felt they were “using those victims to treat sex offenders.”

An additional morally harmful experience was feeling their safety was compromised to ensure people are completing programs to increase statistics. A CPO said “our manager was pressuring us and, like, not being supportive and forcing us into really unsafe situations, basically, to get stats. They prioritize stats over mental health, well-being of staff.” The prioritization of “stats,” as interpreted, over staff wellness created a space for moral injury, harm, or distress, where safety of staff is overlooked for statistics leaving staff to feel less worthy and disrespected. Their value was perceived as paling in comparison to that of program participants and the desire to meet organizational quotas. The perception, which was morally harmful, became how “stats trump quality work.”

There was also potential moral harm in how CPOs felt they were denied the same level of support as their security colleagues. Despite the emotional toll of facilitating programs, they felt inequities in accessing mental health resources or their availability. P66, for instance, discussed the disparity in support for PTSD, where CPOs are denied access to resource security staff are thought to receive by default:

They pretty much automatically assume that security has PTSD or will have PTSD as a result from the job. My side of the house does not have that. People are fighting for PTSD treatment, and they’re being denied. Because I don’t wear a uniform And so we don’t have the resources on my side of the house to deal with the mental health. They even wanna call it vicarious trauma through from reading reports. It’s trauma people, like they don’t like ours is seen as less than. And it’s not.

Thus, there is harm in feeling their trauma exposures are lesser because of a difference in dress and role.

## **5.15 How Program Officers Take Care of Themselves**

CPOs coped with their work in different ways, finding diverse venues for self-care or to feel whole. One coping strategy is humour, often dark (e.g., “I have some pretty black humor when I’m at work” [P1]), another is sarcasm or other avenues of self-care, to which we will now turn.

### **5.15.1 Self-Care as Feeling Whole**

Simply said, time off helped CPOs reinvigorate themselves for work. Thus, holidays were prioritized, as were vacations. Some CPOs, like P3, “take income averaging” to enable “leave” and other like P8 spoke of needing “to have appropriate vacation time.” Such practices helped with the stresses of work by providing breaks, times to reset, etc. (i.e., P61 said “I try to travel when I could. I’ve never carried over any vacation time ever. I used my leave”). Others drew on daily activities, like a “calm app...mindful meditation” (P2), or even simply gave themselves time (e.g., “I remove myself, I give myself that time” [P66]). Removing oneself could also include avoiding news media or public programming which is tied to crime, with or without violence and trauma

(i.e., P26 avoided “news on television”, P37 admitted “I protect myself from things that I watch on TV. I do not watch gore, horror,” and P55 “can’t watch it, I sit and cry because a lot of the cases are a lot that I’ve already dealt with”).

*Cultural Practices.* For CPOs identifying as Indigenous, they may elect to find cultural avenues of coping. P34 spent time “on the canoe” which is “medicine.... Cedar is one of our most important medicines, as well as water, and so it combines both of those things.” Others, like P35, enjoyed the land to recuperate after work, while P3 taught “dance in the community.” CPOs who were not Indigenous, but from diverse nationalities, also found solace in their communities. P48 ran a men’s club for a group of people of colour and a “support group”, noting how working “outside in a community agency has made me a better facilitator.” This was echoed by others who instructed or volunteered when not at work.

#### 5.15.1.1 Physical activity

Physical activity has consistently shown effectiveness for improving wellness. Unsurprisingly, many CPOs incorporated physical activity into their self-care routines. P9 spent time in nature, P11 goes “to the gym more regularly,” and P16 “exercises quite a bit.” P21 used the “staff gym” at work on their “lunch breaks,” P33 had their “regime of exercise,” and P48 had “been running,” while P51 goes for “walks” and P54 plays “badminton.” What so many CPOs have in common is physical exercise, either in nature or a gym, which gave them a time to unwind, feel whole, and be healthy.

#### 5.15.1.2 Family

CPOs spoke of spending time with their family (i.e., spouse, children) to recoup when not at work. P6, for instance, spent “time with my kids” and “husband at night.” P7 spent time with “grandkids,” P21 with “family, going to kids stuff, visiting with family,” and P43 with “my spouse.” Specifically, if a CPO had a spouse working in CSC, they felt able to confide with understanding about their work day, which was not possible for many whose spouses did not work in public safety. For example, P6’s spouse was with CSC and was their “personal therapy” and P72 said “it’s nice to be married to somebody else in CSC,” while, conversely, P67 explained how “we’re held to confidentiality, I can’t really talk to my spouse about [what] I read or what...triggered the anxiety”.

#### 5.15.1.3 Pets

CPOs who valued animals and pets found comfort in their pets. P2 has “two dogs,” P22 has “a couple of dogs, we try and walk them daily, and if we can be out in nature somewhere where there’s birds chirping in trees. And you know, sky and see the odd deer, moose, or squirrel, something like that, then that’s perfect.” P26 valued how their dog will “listen to you all day and not talk back.”

#### 5.15.1.4 Friendships

Many CPOs were grateful for their colleagues. Like P11 who hangs “out with friends who have a similar job or the same job” because “they really understand” the job. P62 spent a lot of time with “a few close co-workers.” P3 valued “close peers that are at work” who, as described by P4, are

“really good support people.” Often, CPOs found ease in “talking to a fellow co-worker,” including about things at work that can be “overwhelming.” P23 spoke of “camaraderie within departments,” particularly between “fellow program officers,” and P25 explained how “most of my friends are CSC people.” P31 described how they get “the uglies out of my world with coworkers, if I need to unload,” and P40 described “a very strong support network in some colleagues and friends at work who do the same job and get it.” Thus, there is much value in strong work relationships, including the formation of a strong working alliance which is necessary for responsiveness. Conversely, when collegial relationships were absent or relationships were unsupportive, CPOs could feel isolated or may be “most in trouble” (P4). While many CPOs valued having friends and spouses at CSC, some wanted friends outside of work for “balance.” P3 valued their “really healthy social life on the outside of CSC, that’s not related to CSC at all.” For P12, these friendships reminded them that “what we do isn’t normal” and, as per P13, provided “support” – a “big support network” (P33).

#### 5.15.1.5 Boundaries

CPOs tended, if they were close with colleagues or not, to actively create barriers between their work and personal life. For example, P9’s “kids don’t exist” when at work and “when I’m at home, my work didn’t exist.” Similarly, P25’s work “stays behind” at the end of the day, P10 left “work at work,” and P13 separated their “personal cell [phone] and work cell [phone] completely” to avoid work calls on weekends or when not working. In this way, P37 had “definitely learnt to compartmentalize a lot of things” and P45 separated “work from home”. This did not prevent, at times, work from “bleeding” (P62) into home life, but CPOs did try to maintain “good boundaries there and I find like balancing out and like taking care” (P62).

A challenge from some CPOs, like P75, who worked remotely sometimes, is how working from home could bleed into personal life. P75 explained sometimes they simply “don’t want that [work stress or challenging content] in my home”. For these CPOs, working at home made compartmentalizing more challenging. For example, P78 tried to “leave work at work and don’t let it, sort of, trickle into other areas of my life.” In this sense, like many other correctional workers, P85 used their commute home to disconnect, and change focuses to family and personal life. P8 valued their “25-minute drive” to “let my mind release some of those things” and P9 used their drive to decompress and process the nuances of their work. Similarly, P33 tried “to live somewhere where there’s enough of a commute that my head can kind of let go of everything by the time I get home.” Thus, these CPOs valued transition time between work and home to manage the boundaries of each space.

#### 5.15.2 Consulting Mental Health Resources

CPOs desired mental health professionals who understood their reality or that of the correctional environment. For instance, P9 described watching a therapist “literally struggle to wrap their head around what I was telling them.”. While P61 described seeking treatment from a specialist in “counselling for first responders” but was disappointed because “he knew nothing about CSC.” Likewise, P68 could not find a psychologist who “really understood corrections.” Thus, they felt a void in finding specialist with awareness of their field of work more broadly, as there was no expectation that a therapist would be aware of the CPO job specifically.

Some CPOs considered alternative therapies like “equine therapy” (P38) or “acupuncture” (P50) or culturally specific interventions such as going to “ceremony” (P69) or “talking about it with an Elder” (P53).

#### 5.15.2.1 Navigating CSC Human Resources

CPOs had awareness, to diverse extents, of available programming and resources as provided by their employer. Some CPOs felt they had fewer available services than security employees. For example, P3 spoke of being victim to “serious harassment” but was told that because “I’m not a correctional officer at the time, I didn’t qualify.... If you were a correctional officer, you’d be off in a second.” However, they do report this may no longer be the cause because of a “more recent” change to “include all staff” (P3). However, some did recognize there are “resources available through CSC” (P3) and there is need to not just have these “pushed on paper” and instead to increase awareness of the available resources and how to access these resources among CPOs. Similarly, like how “self-care is important” (P39), there also needed to be ingrained “opportunities or resources” for CPO related self-care as necessitated by the job. Here, a discrepancy arised between how self-care is “encouraged” but “never promoted” (P52). Such discrepancies created the interpretation of offered care as simply “lip service” (P57), which can be frustrating as CPOs too often felt “they just offer services to say that there are services” (P67). Several CPOs did note CSC efforts to increase the budget available for health consultations, and hoped these would continue to increase, as many have paid for services “out of pocket” (P9).

#### 5.15.2.2 Employee Family Assistance Program (EFAP)

One such offered service is EFAP, however some found even the referral to EFAP offensive, for reasons including: individualizing work-related challenges or offering a “band aid” solution. P12 felt “they need to stop pushing the EAP thing. It really pisses people off when you go to a manager with a problem. That is probably an organizational employment problem. It’s not necessarily a mental health problem.” The annoyance is the resultant EAP push, rather than organizational realignment or change. P16 spoke of how “they just keep referring you to this EAP program, which I’ve never accessed, and apparently it isn’t very good.” And P50 said “anytime I had concerns, management would be the first ones to say ‘we have EAP available. Don’t be afraid to use it, we’re always here.’ But it was all superficial.”

Other CPOs described the CSC’s EFAP differently, with some speaking of EFAP as a peer support program (which is a component of the program) and others as a referral to professional resources (which is involved in the program). The result is ambiguity as to the constitution of EFAP. Participants talked about EFAP as everything from “counsellors” to “critical incident stress management.” Some even identified as “one of the EAP referral agents” (P9), yet still found it “insulting” when EFAP was pushed. This CPO, like others, equated EFAP to “something, as opposed to nothing,” for healthcare. Experiences with EFAP ranged from “great success” (P30), to “helpful. Not super helpful” (P13), to not at all helpful, and often the degree to which EFAP was helpful depended specifically on the CPO seeking intervention and the counsellor with whom they connected. Some felt access through EFAP was “quick” (P45) and “straightforward” (P45), while others reported “horror stories” (P46). A drawback, however, was the limited number of EFAP counselling sessions, the length of sessions, and the inconsistency at times of who the

counsellor was, for whatever reason. Thus, EFAP did not always meet CPO needs, which could result in “a terrible experience” (P12) that is “not helpful” (P20) or “discouraging” (P22). Some even called EFAP “useless” (P37), and others had “no faith in it” (P57) because “the EAP counselling is bullshit” (P71). CPOs tended to report a lack of resources at the EFAP, which further impeded program access (i.e., due to “the shortage for counsellors” [P71] or “waitlists” [P72]). A further impediment identified was the culture of CSC around accessing support (i.e., “I think that hardest thing as a correctional officer or a program officer or correctional worker, period, is the culture of accessing EAP” [P55], or “that stigma” [P59] around accessing mental health resources). A challenge here was how “there’s just way too much gossip and stuff in the institution, that I think it’s very uncomfortable for people” (P59).

#### 5.15.2.3 Insurance Claims

When discussing insurance claims or accessing benefits, CPOs felt they could be insufficient, as some reported being denied or feeling unsupported. For example, P68 explained how “I put a claim in through them and did not feel supported from day one. It’s ridiculous, as far as I’m concerned” (P68). CPOs felt third-party benefit providers often lacked insight about CSC and often struggled to navigate paperwork and the bureaucracy. The challenge is, then, processes can fuel hostility and at times resentment against the employer (i.e., “that’s how much I hated CSC. And that office was beyond dysfunctional” [P75]).

#### 5.15.2.4 Critical Incident Stress Management (CISM)

After critical incidents, CISM is a service offered by colleagues trained in-house to provide support. CPOs felt CISM failed to account for cumulative trauma exposure: “there’s just not enough training about that accumulative stuff. And that’s really what gets people” (P4). However, some were positive about how CISM “was needed at the time” (P15) and provided “people there that you can talk to” (P36). However, without recognition of trauma accumulation, CISM was thought to lack impact because, as a CPO, “you never really know the cumulative impacts” (P8) and those, too, required address, particularly because much of the trauma is tied to confidential realities which a CPO “can’t talk to anybody outside of work about them” (P8). P21 explained how “you can’t point your finger on one particular thing, and I got, because I’ve been doing this for 22 years, I can put my finger on some things, but it’s the overall.” Thus, there is a need to address long terms effects of trauma exposure not just acute impacts.

#### 5.15.2.5 Online Services/Psychoeducation

Although CSC has started to offer access to psychoeducation and online self-care resources, CPOs, despite their appreciation, continued to prefer access to a person directly. P5, for example, explained how CSC offers “online resources [articles, courses, etc.] where you can talk to someone on the phone. I don’t know like how many people use that. I prefer to see people in person.” CPOs mentioned the AM Strength offered to new employees for continued self-awareness, and others spoke of the historical R2MR program, largely positively. Thus, there are online resources which CPOs felt were used as appropriate if desired (but desirability appears limited).

#### 5.15.2.6 Mentoring service, peer support

CPOs were aware of an available peer support service or mentoring service. P66 explained:

We have a mentorship program that just started up in the prison. I'm one of the mentors. That will turn into another resource for people, because they can come to somebody like me, who's been in the system for a long time, and they're already comfortable 'cause I'm their mentor to help them through situations.

Although there was a bit of intimidation when approaching a “mentor,” the program was appreciated because the mentor would have an understanding of the environment that is correctional services. Others desired a “staff psychologist, or a staff social worker that is employed by the government” (P38). This desire was common and felt warranted, as prisoners and parolees have such access, but CPOs and other correctional workers do not at work.

The preferred and most used support for CPOs was their colleagues, people who they felt can best understand their experience. They preferred talking to a trusted employee over an official peer supporter or mentor. One reason being trust, but also concerns about confidentiality, promotion, access, and the organization of their work (i.e., managers, supervisors, stakeholders, people tied to CSC). Such concerns also tempered openness to using EFAP and other services offered by CSC, as well as in-house services. Nevertheless, CPOs did desire more “in-house resources” that provided quick support and without having to take time off work. P43 preferred not to take sick leave to access support. P66, as another example, wondered “why don't we have a person on staff? I just feel like we need more access to mental health, we need more check-ins about people’s mental health, and how people are actually doing.” Likewise, P67 said “it would be nice to have, like, [a] psychologist or social worker within the prison for the employees” and P86 desired “more in-house resources for staff.” Helpful here was also the idea of creating physical spaces for collective discussion about distressing realities (which sounds a lot like the intention of CISM) that could occur regularly: “once every two months let’s get together and just talk about are any tough cases that you’re working with or need support with?” (P43).

Given many participants felt more financial support to access resources was required, in-house resources could be an economically viable alternative, if CPOs were willing to use them.

#### 5.15.2.7 Resources that are culturally sensitive

Consistent with societal needs, people identifying as Indigenous or assigned to deliver Indigenous programs desired culturally appropriate and sensitive supports. P34 explained a gap where “there definitely isn’t professional support that has a good understanding of First Nations issues, Indigenous issues, and Indigenous culture.” CPOs advocated for “developing relationships with Indigenous organizations that provide these kinds of supports” (P34) to staff, too, and described wanting to “work with an Indigenous counsellor” (P47). Thus, culturally appropriate supports for Indigenous CPOs (including ICPOs) are necessary to consider.

### 5.15.3 Acknowledging Mental Health

CPOs desired more recognition from their employer about their mental health. Recognition was thought to help conquer the stigma hindering intervention-seeking and overcome any minimization or trivialization of mental health symptoms. For some, trivialization arises from the perceived non-recognition of leave for mental health (e.g., “employers don’t recognize stress leave” [P47]) or not

receiving support when requested. The consequence of any trivialization tends to be anger toward the organization. P67 described their experience, given “the work I do is extremely stressful. The lack of support doesn't necessarily help the fact that what we do is minimized. I often leave work, and I get home, and I'm feeling very, very nervous.” P80 cried, explaining never being offered “help” after an incident but later, when help was offered “after the fact, when they did, I was so angry [crying]. I am really hurt [crying].” There was a need for “mental health days” to be regularized to help conquer stigma and encourage self-care (i.e., if “we take our sick days, but I feel like it would do a lot to, like, destigmatize” [P27]). P84 felt “very lucky to have as many sick days as we do,” requiring them for “mental stress” when needed, however, wished the use of days was less stigmatized.

## 6 CONSIDERATIONS

In this section, we synthesize findings into four interrelated grouping of considerations: i) recruitment, training, and retention; ii) specific populations in programs; iii) occupational (i.e., organizational and operational) stress; iv) social, physical, and mental health. These considerations aim to inform ongoing efforts to support CPOs and program participants while advancing CSC's rehabilitative mandate.

Across accounts, CPOs described tensions between rehabilitative intent and operational practice. They felt constrained by a rigid program infrastructure that prioritized completion metrics and adherence to standardized curricula they found discouraging and less than optimal for helping meet the needs of program participants. These conditions reduced their ability to exercise discretion and build meaningful relationships, which constitute key tenets of the *responsivity principle* within the RNR model (Bonta, 2023; Bonta & Andrews, 2024). Responsivity emphasizes the need for cognitive-behavioural interventions delivered in adaptive, educational contexts tailored to individual strengths and needs (Bonta, 2023; Bonta & Andrews, 2024). Yet, CPOs reported pressures to maintain almost excessive fidelity because of certification processes and this verbatim script delivery limited their capacity for responsive facilitation (see: *The Certification Process, Drift and Making a Difference, Management and Managerialism*).

CPOs expressed concern for how the rigidities in program delivery undermined their and their program participants motivation. The lack of flexibility failed to account for group dynamics, relational fit, individual needs, and pedagogical effectiveness. In some instances, these misalignments produced unintended harms, particularly when quotas or operational efficiency eclipsed therapeutic priorities. Moreover, CPOs noted participants were often placed into programs prematurely, even at times before emotionally adjusting to their situation, understanding their sentence or conditional release, or feeling ready to engage. Such disconnection between intake timing and readiness to participate hindered program engagement and reduced potential impact (see *The Organizational Culture*).

Compounding these concerns were resource constraints, including outdated materials, infrastructure limitations, and insufficient time or staffing to deliver programs with fidelity and care (see *Quantity over Quality, Lack of Material Resources and Outdated Supplies*). These structural deficits contributed to inefficiencies and left CPOs feeling hindered in achieving their rehabilitative objectives. Calls emerged for reimagined pedagogical approaches, adequate staffing, and consistent access to materials that, beyond intended, actually do support meaningful program facilitation.

CPOs also identified organizational inconsistencies that impacted their wellbeing and sense of role legitimacy. They described how a lack of equitable policy enforcement, breakdowns in communication, and exclusion from decision-making processes affected their work and health (see: *CPO Health and Wellbeing*). Emotional labour was a recurring theme, especially in relation to facilitating programs for diverse or high-needs populations. Despite their necessity and value, such programs were often associated with stigma or social penalties, dissuading some CPOs from engaging fully in this aspect of their role (see *Considerations about Diverse Sub-Populations, Burnout and Effects of Occupational Stressors*). Many CPOs felt their work was undervalued, and noted this exclusion exacerbated burnout, stress, and disengagement further exacerbating health

and well-being (see *Spillover into Family Life; CPO Health and Wellbeing*).

Institutional care and recognition were framed as central to both recruitment and retention. CPOs called for a culture grounded in kindness, respect, and interprofessional support, where the risks and responsibilities inherent in their roles were acknowledged, particularly when working with community-based program participants. Despite their exposure to complex cases and liability concerns, most CPOs were unaware of or unable to access relevant health supports. When mentioned, resources such as the Employee Family Assistance Program (EFAP) or Critical Incident Stress Management (CISM) were viewed as reactive, inaccessible, or irrelevant to their experiences, thus needs. These perceived gaps in support contributed to a broader sense of misrecognition and required urgent attention to reduce barriers to treatment and normalize help-seeking within the service.

Taken together, these findings suggest a need for the recalibration of CSC's rehabilitative infrastructure, specifically programs. CPOs are willing and committed to delivering effective, human-centred programming, but required the conditions to do so. This included discretion in facilitation, timely alignment between operational systems and rehabilitative goals, reliable access to resources, and robust institutional supports which recognize the emotional and professional demands of program delivery. With appreciation for CSC and USJE's commitment to institutional improvement, we view provide these considerations (below) as a generative opportunity to reimagine the foundational conditions that make effective correctional programming possible.

## CONSIDERATIONS

### 6.1 For Recruitment, Training, and Retention

1. CPOs have earned recognition from the public and the CSC yet have little. Further, recognition will help CPOs feel valued, which has implications for recruitment and retention as both are strained because people do not know CPOs exist. To support retention, potential CPOs must be exposed to prisons prior to starting in the role, and trained in the realities of program facilitation, so they have some understanding of the environment in which they will be working.
2. Invest in staff development through continued education, mentorship, and training, including in technology, digital literacy, advanced education, assessment administration, and facilitation skills, which will support both effective program delivery and CPOs' promotional goals.
3. Strive to better integrate participant needs during intake, case assignment, and program delivery by, for example, building systems to ensure program participant-CPO relational compatibility when assigning people to programs. This means developing clearer policies on how to assign program participants to a program facilitator, which may require separating participants based on readiness, risk and needs profiles, English language proficiency, grade level, etc. to ensure program group cohesion. Further, when assigning people to programs, ensure CPOs have the capacity to meet their program participants needs (i.e., assign fewer if needs are higher, recognizing the changes in the program participant population).

4. Support CPO discretion in program delivery by enabling facilitators to adjust language, pacing, and delivery for optimal psychological safety, comprehension, and relevance, without compromising program fidelity.
5. Incorporate experienced CPOs into curriculum design, try program co-design and consider adopting scenario-based learning models that reflect the unpredictable elements of program delivery into CPO training.
6. Reevaluate the need for the current certification process and envision what is necessary. Are recorded evaluations, which many CPOs described as “demeaning,” required? Can facilitation flexibility, to accommodate participant needs (e.g., literacy, language, grade level), be considered and valued accordingly? With any facilitator assessment, ensure feedback loops are crisp and timely, which can help reduce certification stress by reducing wait times for feedback.
7. Revise performance metrics to value both quality and quantity, this means recognizing and accessing the growth and comprehension of program participants and prioritizing such over completion rates. Thus, consider delivering programs at the pass of program participants (which may be slower in pace) rather than to adhere to standardized timelines tied to metrics and include qualitative indicators of successful completion, such as program participant and facilitator feedback, changes in classroom behaviours (e.g., more engagement).
8. Considering training and enabling CPOs to be reflective and to adjust program delivery, thus allow for discretion, responsiveness, and autonomy during program facilitation to optimize opportunities for CPOs to develop relationships and rapport with program participants, which will best meet their needs and support their re-entry.
9. Reconsider timelines tied to report writing, thus ensure CPOs have the time and capacity to provide depth in their reports, including their documentation of their program participants' development. This means recognizing the changing complex and interrelated needs of the population in prisons and on release, and ensuring CPOs can work with these program participants to try to meet their needs, which may take variable time and require flexibility, patience, and even a reduction in the number of people in each program offered.
10. Ensure CPOs have access to confidential spaces (i.e., offices instead of shared cubicles) to meet with program participants and to complete their reports (i.e., quiet spaces that are comfortable where they can focus). If they do have access to confidential spaces, and if deemed appropriate and desired by the CPO, consider remote work one or two days a week for report writing as necessary.

## **6.2 For Specific Populations in Programs**

1. Consider diverse advisory and oversight panels in the redevelopment of program curriculum (i.e., include CPOs, Indigenous, Women, Transgender individuals) across regions and security levels. This means doing authentic community engagement, which is not just to include a representative or individual but to engage the community more

broadly.

2. Increase awareness of the complexities (empowered versus limitations) experienced by men, women, and gender diverse individuals who deliver programs to diverse populations (including vulnerable and marginalized populations) and create supports for all based on unique needs (i.e., gender-informed boundary creation and maintenance).

### **6.2.1 Programming for People who Identify as Indigenous:**

3. Recognize the emotional labour involved in providing Indigenous (and other specialized) programs, given, for example, shared histories of trauma, for ICPOs and Elders, who must support each other and the program participants.
4. Co-design and re-envisioned program curricula with Elders and Indigenous knowledge keepers to ensure programming is both culturally grounded and practically feasible for facilitators. This includes reassessing program structures to reduce Elders' time commitments where appropriate to ensure sustainability, respect for and recognition of the value of Elder-involvement, and, as a result, enhancing the quality of Indigenous-led programming.
5. Sensitize others living, visiting, or working in prisons on the diversity of Indigenous populations and bands, to help all better support Indigenous programs, participants, facilitators, guests, Elders, and others. This can also help reduce stigma and discrimination tied to a lack of knowledge because all will learn more about the need of people who identify as Indigenous as knowledge can reduce ignorance and build understanding.

### **6.2.2 Programming for People Convicted of Sex Offenses**

6. Recognize, within work environments, the complexity of working with SOs to reduce CPOs', who delivery such programming, isolation and the stigma tied to their work.
7. Increase efforts to ensure the safety of SOP participants by acknowledging the hierarchies among SOs, among prison populations more broadly, and strive to reduce the challenges the SOP facilitators must navigate (i.e., risks to program participants as well as those to program facilitators).
8. Consider more in-depth training for SOP delivery, not just the content, the training must take from clinical sexology and strive to produce an understanding of how to make SOPs effective (without causing the CPO harm).

### **6.2.3 Programming for People who Identify as Gender Diverse**

9. Consider the unique needs of each transgender program participant to ensure their risks and needs are addressed through programming in ways suitable to their institution of residence and security level and that align with their conviction and gender history.

## **6.3 For Managing Occupational (i.e., Organizational and Operational) Stress**

10. Implement measures to ensure Community CPOs (CCPOs) are safe when delivering programs, particularly given the flexible hours they hold to help their program participants complete their programs according to timelines. This can mean CCPOs provide programs in the evenings or after business hours. Safety is essential and can be improved with training in self-defence, arrest and control, de-escalation and communication skills, as well as community-specific program delivery. Ensure CCPOs have immediately reachable support if a situation is to arise.
11. Ensure CPOs are aware of the unpredictable nature of correctional environments and trained (see above) to protect themselves from harms, including when to report threats and perceived potentially troubling situations. PPA must be mandated to always be within arm's reach and CPOs must all know and be comfortable using security protocols.
12. Foster 'teamliness' or the capacity for collaboration and mutual support (thus reducing gossip and toxicity) by organizing retreats and interprofessional workshops for CPOs (including mixed with other correctional staff) to build shared understanding, strengthen relationships, and promote collective efficacy. A conference or travel stipend that is annual but can be accumulated over years could help encourage participation.
13. Consider increasing the focus on kindness, empathy, and listening between colleagues, other employees (including bi-directionally with management and supervisors), and those in their care to reinforce the provision of mutual support, thus reducing gossip, and enhancing compatibility, appreciation of others, and compassion.
14. Ensure CPOs staffing levels meet program delivery needs (i.e., reduce understaffing), which also ensures program integrity. Specifically, staffing models must align with realistic caseloads and session delivery expectations.
15. Provide mentorship and support to CPOs while also creating opportunities for co-facilitation of programs and joint problem-solving (including with parole officers) to encourage and support teamliness. Practices here may include creating shared learning spaces (i.e., for parole officers, managers, and CPOs) or collective decision-making opportunities where all involved in the case are heard. Thus, strive to improve the working alliance between case management teams and broader staff.
16. Formalize referring to participants in programs as "learners" or "program participants" to reduce the continued imposition of a criminalized identity in official documentation, orientations, and programs. This may help reduce stigma and support rehabilitative needs.
17. Ensure CPOs have the required material resources to deliver programs, including adequate classrooms (i.e., lighting, temperature, ventilation, space) to ensure all can pay attention to the material rather than feel strained due to physical factors in the space.
18. Supporting CPOs in creating healthy boundaries that ensure safety at work (i.e., in the classroom, with other staff if necessary) and in the community, to reduce tendencies toward hypervigilance and becoming over-protective of loved ones. This includes training on social media in privacy settings.

## 6.4 For Social, Physical, and Psychological Health

1. Provide CPOs training for recognizing and respond to their own and others' mental health needs, including trauma-informed approaches for both program participants and colleagues. This should include education on coping strategies (e.g., dark humour, boundary navigation), mental health disorders, physical and social health, moral harm, distress, and injury, and diverse forms of trauma exposures. This includes acknowledging cumulative and single-event trauma, indirect exposures etc. without creating a hierarchy or judgement and instead supporting growth post incident(s).
2. Provide clinical support beyond the Employee Family Assistance Program (EFAP, which may report dissatisfaction with) for all CSC employees to help with the changes to self and health too often reported by correctional staff, including CPOs. People can change when working in correctional services and all need more effective tools to help manage these changes. Support providers must be knowledgeable of correctional services, programming delivery, and should have specialization in adversity and trauma recovery. An in-house clinical support person would be optimal as their knowledge of correctional services, the specific institution served, and rapport with staff will build with time as their presence becomes normalized.
3. Consider mandatory annual psychological assessments (i.e., a Safeguard Program) for CPOs facilitating SOPs. Given Safeguard is obligatory for police officers working in internet child exploitation and other such units where sexual abuse is being investigated, and SOPs are working with the same population aware of the same crimes this oversight requires remedy.
4. Ensure CPOs are aware of available programs at CSC to support their health (i.e., mental, physical, social) and are included and even appropriately targeted in mental health and wellbeing strategies. Consider offering self-care and health-supporting opportunities at work like for fitness, yoga at lunch, lunch and learns (i.e., teaching sleep strategies or creative packed lunches and nutrition), and social events to reduce isolation. An idea here is to have all employees support a healthy recipe for a CSC "cookbook" or a self-care strategy for a CSC "health book."
5. Consider including CPOs, when appropriate, in post-incident debriefing to support coping with taxing and haunting interactions, and ensures CPOs are aware of the behaviours, thus needs, of their program participants which they can then target in programs.
6. Provide supports to CPOs who require long or short-term leave through insurance boards to help CPOs navigate organizational process, fill out forms, etc. to ensure they receive the help required.
7. Create conditions supportive of safe disclosures regarding health needs for support (mental health or social health needs, specifically). Include policies to protect CPOs from perceived retaliation and, instead, to be accountable and advocate with support for their own health. This includes recognizing the spillover effects of their work on their families and may require CPOs to have opportunities to rotate out of diverse program delivery

periodically for reprieve, which could support their health.

## 7 CONCLUSIONS

CSC strives to be a modern, evidence-informed rehabilitation service. Through frameworks (i.e., the Integrated Correctional Program Model (ICPM), gender-responsive interventions, and Commissioner's Directive 726), CSC reveals a vision of correctional programming grounded in responsiveness, program fidelity, and individualized care (Correctional Service Canada, 2021a,b,c, 2024a,b; Motiuk, 2023). The service strives for a commitment to empirical models, trauma-informed practice, and RNR principles, yet given the organization's size, implementation appears to suffer.

Findings from this study, somewhat aligned with the 2024 Annual Report of the Office of the Correctional Investigator, reveal a disjuncture between CSC's aspirations and the operational realities CPOs experience (OCI, 2024). Emotional strain, procedural rigidity, and institutional non-responsiveness define structures around program delivery. CPOs routinely encounter harms ranging from feeling invisible to psychologically exhausted, all while fulfilling their mandates, which require discretion, empathy, and relational aptitude. Participants described being penalized for adaptive judgment, unsupported in delivering culturally sensitive care, and burdened by administrative structures. These structural dynamics undermined both CPO well-being and, by extension, the legitimacy of human service within correctional practice. Yet, opportunity remains, as CSC undergoes transition, to rebuild trust and promote equity, for example by revamping programming and CPO training to center processes that uphold dignity. In the 21st century, legitimacy must be earned through equitable, consistent, and ethically grounded practices.

CSC is not alone in facing these tensions. Globally, correctional services are grappling recruitment, training, and retention challenges, struggling to reduce recidivism rates, and to ensure public safety – beyond institutional, staff, visitors, and of those in prison or in community setting on conditional release. Programs lie at the core of rehabilitative practice, yet the CPOs who deliver the programs remain largely unrecognized. Greater investment is needed to support these frontline rehabilitative practitioners so they can, in turn, effectively support participants on their paths toward pro-social engagement, labour market participation, and healthy living.

A transformed correctional future will require strengthening the relational infrastructure of rehabilitation. Baldwin (2017) calls for correctional environments to prioritize personalized, dignity-affirming engagement, replacing mass, time-based supervision with supportive, individualized pathways that foster desistance, restore relationships, and engage families and victims as part of the rehabilitative process. This vision affirms the need for goal-oriented, strengths-based correctional practice grounded in discretion, emotional intelligence, procedural justice, and a recognition of people, specifically their skills, identities, and humanity. CPOs are more than facilitators of static curriculum. They are relational beings, cultural translators, and ethical navigators operating in emotionally complex spaces. They are essential service providers who, as per Toronjo (2019), must be collaborative with voice, and purpose. Thus, as frontline personnel, they must be supported through training, and a culture of recognition, discretion, and

shared ownership of rehabilitative goals.

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