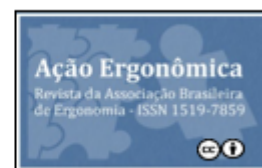




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**PERCEPTION OF WORKING CONDITIONS AND HEALTH BY CORRECTIONAL OFFICERS OF MALE PRISON FROM FLORIANÓPOLIS/SC**

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**Abstract:** This article presents a case study with the correctional officers of Male Prison from Florianópolis / SC. Starting from the hypothesis that worker's health is largely influenced by its working condition and that the work in prisons contributes to the incidence of health problems, the real perception of correctional officers about their work and health was investigated, using the content analysis technique, with guided interview. The study developed emphasizes that the type of work and its contents raise the stress level of the analyzed workers, and the lack of security creates fear and mistrust, revealing problems in the organization and work process. However, a deeper analysis of the working condition is essential to understand how the worker handles the job characteristics, the strategies found to solve the problems and how the working environment influences on your health.

**Keywords:** working conditions; risk factors; occupational diseases; correctional officer.

## 1. INTRODUCTION

Several authors have documented the effects of working conditions on workers' health (Cheng et al., 2000; Ishizaki et al., 2006; Cassitto et al., 2003), and described the association between a harsh work environment and a wide range of illnesses, including mainly mental illnesses (Stansfeld et al., 2006; Babazono et al., 2005; Higashiguchi et al., 2002).

According to Tsutsumi et al. (2002) and Johnson et al. (2005), exposure to risk factors in the workplace varies according to the type of occupation and position. High levels of risk factors were observed in prison staff, especially in individuals in direct contact with inmates, who work in an environment characterized by high level of psychological demands (Johnson et al., 2005; Ghaddar et al., 2008). According to the International Labor Organization (ILO, 2014), the profession is the 2nd most dangerous in the world, being one of the few positions where dangerous and unhealthy conditions are involved at the same time.

Dejours (1992) states that work conditions and organization are closely related to the most diverse diseases. Work can be a source of suffering and illness, and it is necessary to understand how workers maintain their psychological balance, even when subjected to disruptive working conditions. The work environment in prison units is unlike any

other, with the possible exception of

environment existing in psychiatric institutions and other confinement institutions (Bourbonnais et al., 2007). According to Vasconcelos (2000), the work

in prison units transforms workers, as it is permeated by the phenomenon of violence.

The precariousness of Santa Catarina's prison units was studied (Damas, 2012) linking overcrowding, poor infrastructure and deficit in human resources with health problems such as: HIV, tuberculosis, respiratory diseases, skin diseases and mental disorders. In an analysis of the social worker's working conditions at the Women's Prison of Florianópolis/SC (Reinert, et al. 2014), the lack of resources, hygiene and ventilation in the prison was noticed, in addition to the overload and high level of stress in workers.

In a study on health in prisons in Rio de Janeiro (Diwana et al., 2008), the threat to the personal integrity of prison officers appears to be inherent to the work, in addition to emotional tension, psychosomatic manifestations and stress. Research carried out with prison officers in Rio de Janeiro (Vasconcelos, 2000), Salvador (Fernandes et al., 2002) and São Paulo (Rumin, 2006) identified biological risks of tuberculosis contamination and hepatitis, due to the terrible working conditions. Rumin (2006) also identified a high risk of violence.

Studies carried out by Santos (2010) on the negative influences of work in penitentiaries in Rio Grande do Sul and Rio

Grande do Norte, from the perspective of the prison staff themselves, showed constant fear and dissatisfaction. Santos et al. (2010) suggests that prison officers at the André Teixeira Lima Psychiatric Custody and Treatment Hospital (SP) are exposed to situations of high psychological demands at work, with 83.3% meeting criteria for the presence of Common Mental Disorders (CMD) and the work of Gomes (2009) with teachers working in Brazilian penitentiary complexes, states that 12.5% have psychological disorders, considered as indicators of evidence of mental suffering.

Comparing prison officers to other professions, a high prevalence of anxiety, hypertension, psychosomatic illnesses, and behavioral reactions (e.g. drug abuse) was found (Johnson et al., 2005; Bourbonnais, 2007), in addition to a high frequency of stress-related reactions in this group, such as absenteeism and psychological illnesses (Camp et al., 2006; Goldberg et al, 1996, Tartaglini and Safran, 1997). Also, a lower life expectancy has been reported for correctional officers compared to other professions, and this has been attributed to occupational stress (Cheek, 1984; Woodruff, 1993).

The severity of the physical and psychological effects of stress on prison officers (heart disease, hypertension, peptic ulcers, alcoholism, depression, suicide, anxiety, as well as other mental disorders), as stated by Anson et al. (1997) and

DeCarlo & Gruenfeld (1989), has serious implications for the management of mental health in this type of organization.

A Work Stress Scale was applied to 119 prison officers in Turkey (Senol-durak, 2006), resulting in symptoms of depression, anxiety, hopelessness and lack of perceived social support in the subjects studied. Tartaglini and Safran (1997) refer to prison officers as professionals subject to a high risk for the disease reported as debilitating stress. These authors found higher prevalences of anxiety, behavioral disorders and alcohol abuse among agents than in the general population. They reported among these workers a prevalence of emotional disorders of 18.6%, alcohol abuse of 4.5% and anxiety disorders of 7.9%.

Bourbonnais et al. (2007) obtained as a result of a study carried out in the Quebec prison system with 1881 prison officers, an association between psychological distress and high psychological demands, low decision-making power, a combination of these two restrictions and low social support at work. In study with

164 prison officers at the Spanish Penitentiary Center concluded that this work generates high psychological demands, low self-esteem, low control, low social support, high exposure and job insecurity (Ghaddar et al., 2008).

Prison officers who work in a closed, harsh and coercive prison environment, having multiple responsibilities for the correction, education and management of prisoners

and maintaining security and order within prisons, are prone to suffering from various mental problems, especially depression (Goldberg et al., 1996; Bourbonnais et al., 2007; Obidoa et al., 2011). In a French study, the overall proportion of prison officers with depressive symptoms was 24% (Goldberg et al., 1996).

Approximately one-third of correctional officers employed at two state prisons in the northeastern United States reported severe psychological distress (Obidoa et al., 2011). Surveys of 1900 prison officers from four men's prisons in China showed high levels of depressive symptoms, around 60% (Liu et al., 2013; Sui et al., 2014). Furthermore, according to Armstrong and Griffin (2004), the prison environment is the only one in which workers perceive a constant threat of danger from those they supervise.

In this context, based on the hypotheses that workers' health is largely influenced by their working condition and that working in prisons contributes to the incidence of health problems, we intend to verify the real perception of prison officers about their work and health.

## 2. METHODOLOGY

This research has an exploratory nature, with the objective of detecting, understanding and interpreting the phenomenon investigated (Gil, 1996). Exploratory research, according to

Trivinões (2006), allows the researcher to deepen their analyzes within the limits of a specific reality.

After the bibliographical survey on the subject, we embarked on a qualitative research approach, through a case study, which is characterized as a type of research whose object is a unit that is analyzed in depth (Trivinões, 2006). Therefore, the health of penitentiary officers at the Florianópolis Men's Prison was investigated, using the content analysis technique, using guided interviews, for a comparative analysis through the construction of typologies, issues and thematic analyses.

According to Bardin (2009), content analysis, as a method, becomes a set of communication analysis techniques that uses systematic and objective procedures to describe the content of messages.

For content analysis, three stages were carried out: pre-analysis, exploration of the material and treatment and interpretation of results. According to Bardin (2009), the pre-analysis phase aims to systematize ideas to develop a precise work development scheme. At this stage, the material is chosen, hypotheses and objectives are formulated, and indicators for the final interpretation are developed. In the material exploration phase, information was coded, categorized and quantified, using techniques such as transcription and reading of interviews, construction of synopses, and descriptive

analysis through the construction of typologies and categorical analysis.

The last phase was to treat the results, quantitatively, using the L exica Survey software (Sphinx Brasil – evaluation version) as support for validating the collected data, without excluding qualitative interpretation. The software imports the questions and answers obtained from the interviews, facilitating data processing and generating graphs. All data obtained are presented in item 3.

The method was applied within the Men's Prison of Florian polis/SC, in a room provided by the prison director, during one morning. A simplified process was carried out, with 15 interviews (minimum described by Bardin, 2009), for comparative analysis. The selection criterion was a mixed sample, with subjects who were on duty at that time. The project in question included the procedures described by the National Health Council, under Resolution 196-1996 (Brazil, 1996), meeting fundamental ethical and scientific requirements. To this end, an informed consent form was applied, in which the subject filled out a protocol with basic personal information and another protocol was used, without identifying the subject, to collect the data.

Prison officers were called one by one for the interview in the room,

where there were two chairs and a table. The interview was recorded, for later transcription, on a 5th generation Ipod Nano, which was placed between the interviewer and the interviewee. Notes were made on a sheet of paper about the attitudes of the interviewees towards the questions asked. The questions asked were about what they thought of their work, how they considered their relationships with co-workers and inmates, the health problems they had and the medications they took. This research did not receive funding for its completion.

This study was approved by the Research Ethics Committee of the Health Department of the State of Santa Catarina (CEPSES-SC) under opinion 905399/2014.

### **3. RESULTS AND DISCUSSION**

10 male agents and 5 female agents were interviewed, all regular employees of the Men's Prison of Florian polis/SC (table 1). It is important to highlight that the Prison has 38 male and 20 female officers, which makes the sample homogeneous. The prison officers interviewed were between 28 and 61 years old, with a wide variation in age, therefore a division was made by age group, with 33.3% being between 25 and 35 years old, another 33.3% between 35 and 45 years old, 20% between 45 and 55 years old and 13.3% between 55 and 65 years old ( $\sigma = 1.06$ ).

The working day adopted by 80% of the agents interviewed is 48 hours/week,

which they call “24x72”, where they work 24 hours straight and take a break for 72 hours. The other 20% worked every day, reaching 10 hours a day, as they were prison officers reassigned to the administrative area. The length of time at the company also varied greatly, between 4 and 41 years, and a division by age range was made, resulting in 33.3% working for 4 to 6 years at the institution, 40% from 7 to 9 years old, 13.3% from 10 to 12 years old and another 13.3% over 20 years old ( $\sigma = 1.03$ ).

**Table 1. Description of the personal and socio-demographic characteristics of the sample (n=15) and categorized responses from the interviews.**

Independent variables		Independent variables	
<b>Gender</b>	<b>n (%)</b>	<b>marital status</b>	<b>n (%)</b>
masculine	10 (66.7)	single	6 (40.0)
feminine	5 (33.3)	married	8 (60.0)
<b>Age</b>		<b>Education</b>	
25 to 35 years	5 (33.3)	high school	10 (66.7)
35 to 45 years	5 (33.3)	University education	5 (33.3)
45 to 55 years	3 (20.0)		
55 to 65 years	2 (13.3)		
<b>Service time</b>		<b>Working day</b>	
4 to 6 years	5 (33.3)	48h/s (24X72)	12 (80.0)
7 to 9 years	6 (40.0)	>8h/d	3 (20.0)
10 to 12 years	2 (13.3)		

>20 years	2 (13.3)		
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Source: Propria.

From the recording of 15 interviews, it was possible to categorize and organize the information obtained (Table 2).

**Table 2. Categorized responses from interviews (n=15)**

Independent variables		Independent variables	
<b>Perception about work</b>	<b>n (%)</b>	<b>Perception gives security</b>	<b>n (%)</b>
remember what you see in jail	2 (13.3)	fear daily	2 (13.3)
from the gate to the outside forget	1 (6.7)	thinks it's dangerous	6 (40.0)
likes what he does	1 (6.7)	has a obsession with persecution	1 (6.7)
conforms	2 (13.3)	fear of attack by inmates	2 (13.3)
affects the psychological	10 (66.7)		
became suspicious	3 (20.0)		
stressful	3 (20.0)		
<b>Health problems</b>		<b>Medicines</b>	
sleep disorder	4 (26.7)	headache	3 (20)
tuberculosis	2 (13.3)	anxiety	2 (10)
allergic rhinitis	1 (6.7)	breathing	2 (10)
irritability	1 (6.7)	sleep	3 (20)
stress	6 (40.0)	high pressure	2 (10)
column	2 (13.3)		
cancer	1 (6.7)		

high pressure	1 (6.7)		
migraine	1 (6.7)		

Note: the number of citations may exceed the number of observations due to multiple responses.

Source: Own.

When asked what they thought of their work, 66.7% commented that it affected their psychology, in addition to 13.3% stating that they kept remembering what they saw in prison in their time off. 13.3% also said they found the work stressful and another 13.3% said they became more suspicious after starting to work as an agent, as the following comment illustrates:

It is humanly impossible for you not to let yourself be affected and reflect, reflect, completely change your life abroad, you become more suspicious, it changes a lot (E.13).

Only 6.7% like what they do, and another 6.7% commented that they completely forgot about work “from the outset”. 13.3% said they were satisfied with the job because they were a public employee, as shown below:

It's something no one dreams of: oh, I want to be a prison guard, right? (E.1);

But it's that thing, you're a public servant (E.9).

Comparing the perception of the work with the sex of the agents interviewed, there are not many differences, however women seem more satisfied with the service because they are public servants, despite liking

the service less and being more suspicious (table 3).

**Table 3. Comparison between gender and perception of work.**

	Masculine n(%)	Feminine n(%)	Total n(%)
Remember what you see in jail	1(50.0)	1 (50.0)	2 (100.0)
From the gate to the outside, you completely forget	1 (100.0)	0 (0.0)	1 (100.0)
Like what you do	1 (100.0)	0 (0.0)	1 (100.0)
Conforms to being a public servant	0 (0.0)	2 (100.0)	2 (100.0)
Believes it affects the psychological	5 (50.0)	5 (50.0)	10 (100.0)
He became more suspicious	1 (33.3)	2 (66.7)	3 (100.0)
Find it stressful	2 (66.7)	1 (33.3)	3 (100.0)

Source: Own.

Regarding security, an issue that was not directly addressed as a question, but commented on by all interviewees, 40% think the work is dangerous, with 18% commenting on being persecuted, 13.3% being afraid of attacks by inmates and 13.3% said they deal with fear daily. Furthermore, it was commented by 33.3% of interviewees that they were not provided with safety equipment, such as weapons, vests, etc.

Here we have direct contact without any protection (E.3);

You are marked for a lifetime, you will always be a prison officer (E.10).

Comparing age with the perception of safety (table 4), it can be seen that the older age groups (45 to 55 years old, 55 to 65 years old) did not mention problems with safety, just as the length of service of prison officers influenced In their perception of safety (table 5), it is noted that those younger in the company (4 to 6 years old) see more safety problems than other employees.

	4 to 6 years n(%)	7 to 9 years n(%)	10 to 12 years n(%)	20 years n(%)	Total n(%)
Deal with fear daily	2 (100.0)	0 (0.0)	0 (0.0)	0 (0.0)	2 (100.0)
Think it's dangerous	4 (66.7)	1 (16.7)	1 (16.7)	0 (0.0)	6 (100.0)
Has a persecution habit	1 (100.0)	0 (0.0)	0 (0.0)	0 (0.0)	1 (100.0)
Afraid of attack by inmates	2 (100.0)	0 (0.0)	0 (0.0)	0 (0.0)	2 (100.0)

Source: Own.

**Table 4. Comparison between age group and perception of safety.**

	25 to 35 years n(%)	35 to 45 years n(%)	45 to 55 years n(%)	55 to 65 years n(%)	Total n(%)
Deal with fear daily	0 (0.0)	2 (100.0)	0 (0.0)	0 (0.0)	2 (100.0)
He thinks dangers	3 (50.0)	3 (50.0)	0 (0.0)	0 (0.0)	6 (100.0)
He has mania in persecution	0 (0.0)	1 (100.0)	0 (0.0)	0 (0.0)	1 (100.0)
He has fear in attack in inmates	1 (50.0)	1 (50.0)	0 (0.0)	0 (0.0)	2 (100.0)

Source: Own.

**Table 5. Comparison between length of service and perception of safety.**

The words or expressions most commonly used when asked about inmates and their relationships with colleagues can be seen in the “constellation of attributes” below (figure 1). Although 6 interviewees commented that their relationship with co-workers is good, negative words such as fights, distrust and stress were also said, as illustrated by the following comments:

Sometimes it's more complicated between us than even with the prisoner, precisely because we're in such a negative environment (E.3);

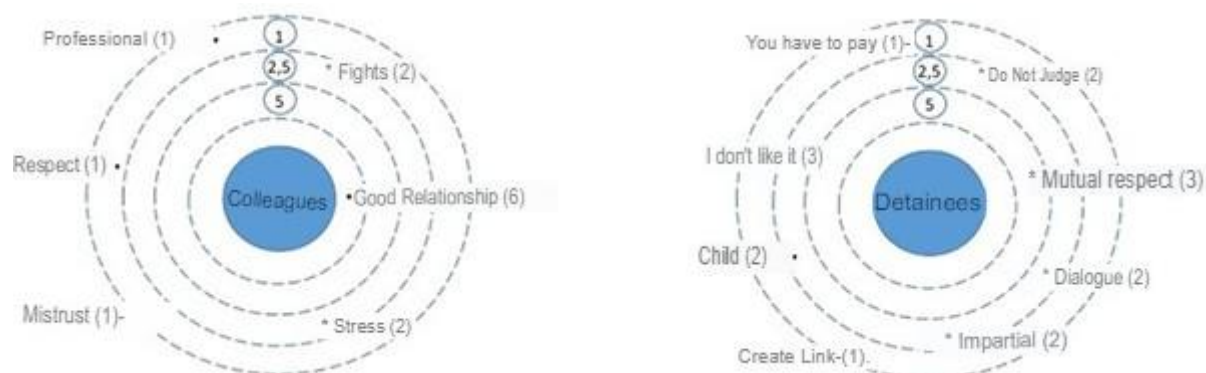
It's more like this, I'm watching, I'm going to take care of him, could it be that he's the one who's using his cell phone (E.7).

Regarding the detainees, it was commented that:

The relationship with a prisoner is almost as if it were with a child. Every day you say he can't do it, and every day he will try to do it, understand? (E.4); It is not good for us to know any type of crime that the detainee has committed, so that it does not cause a certain discomfort (E.10).



**Figure 1. Constellation of attributes about co-workers and inmates.**



Source: Own.

Regarding health, 26.7% reported having a sleep disorder, whether already treated or not:

I could no longer sleep well at night, I had nightmares, I was completely disturbed (E.8); A few years ago I needed a professional psychiatrist, I hadn't slept for three days (E.7).

13.3% had already contracted tuberculosis in prison and 40% reported having problems with stress, as in other studies carried out in Brazilian prisons (Gomes, 2009 and Santos et al., 2010). Although they do not report specific psychological problems, the following sentence illustrates that the problems exist:

Psychologically, many colleagues will tell you that it doesn't exist, but, if they are honest, they will tell you that it does (E.3).

Cases of allergic rhinitis, irritability, lumbar spine pain, high blood pressure and migraines in smaller quantities (6.7% each) were also reported.

66.6% of those interviewed said

they frequently took medication, with 20% taking medication for headaches, 10% for anxiety, another 10% for breathing, 20% for sleep problems and 10% for high blood pressure problems. Comparing the health problems reported with the age of the agents interviewed, it can be seen that sleep disorders are constant in all age groups, however stress and irritability problems seem to be more common in younger agents, between 25 and 45. years (table 6).

**Table 6. Comparison between age group and health problems.**

	25 a 35 anos n(%)	35 a 45 anos n(%)	45 a 55 anos n(%)	55 a 65 anos n(%)	Total n(%)
sleep disorder	1 (25.0)	1 (25.0)	1 (25.0)	1 (25.0)	4 (100.0)

Tuberculosis	1 (50.0)	0 (0.0)	1 (50.0)	0 (0.0)	2 (100.0)
allergic rhinitis	1 (100.0)	0 (0.0)	0 (0.0)	0 (0.0)	1 (100.0)
Irritability	1 (100.0)	0 (0.0)	0 (0.0)	0 (0.0)	1 (100.0)
Stress	2 (33.3)	2 (33.3)	1 (16.7)	1 (16.7)	6 (100.0)
Column	0 (0.0)	1 (50.0)	1 (50.0)	0 (0.0)	1 (100.0)
Cancer	0 (0.0)	0 (0.0)	1 (100.0)	0 (0.0)	1 (100.0)
High pressure	0 (0.0)	0 (0.0)	1 (100.0)	0 (0.0)	1 (100.0)
Migraine	0 (0.0)	0 (0.0)	1 (100.0)	0 (0.0)	1 (100.0)

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Source: Own.

It can be seen from the field approach carried out that the content of the work affects the agents' psychology, as it is characterized by a high level of psychological demands (Johnson et al., 2005; Ghaddar et al., 2008), in addition to contributing to increase your stress level, as stated by Finn (1998), Huckabee (1992), Schaufeli and Peeters (2000) due to the high tension involved in this type of work. The lack of structure and safety equipment makes agents feel insecure and deal with fear on a daily basis, a fact also identified by Santos (2010) and Armstrong and Griffin (2004). However, over the years, this insecurity seems to disappear, possibly due to work habits:

O

If there really is danger, we become more used to it (E.4).

You realize that anyone is subject to anything, and that these things always happen (...) so you always become more suspicious, more protective, because I have 2 children, right (E.13).

Z

The relationship with co-workers is good, even if there are fights due to the pressure that the work brings. Although inmates are seen as people who will always try to do something wrong, there is mutual respect and good dialogue within the prison, unlike the results found in studies in prisons in Rio de Janeiro (Vasconcelos, 2000), which state that it is permeated by the phenomenon of violence. This difference is possibly due to the different

treatment of prisoners in prisons and penitentiaries, where in the latter the treatment is more rigid and with greater confinement.

The lack of hygiene and ventilation, in addition to the high humidity inside the prison, are harmful to health and can cause various diseases, such as tuberculosis and allergic rhinitis, also identified in penitentiaries in Rio de Janeiro, Salvador and São Paulo (Vasconcelos, 2000; Fernandes et al., 2002; Rumin, 2006). Sleep disorders,

irritability and even high blood pressure and back pain can be related to the content of the work and the worker's stress level, also described as some of the effects of stress on prison officers in studies by Anson et al. (1997) and DeCarlo and GruenFeld (1989).

#### **4. FINAL CONSIDERATIONS**

The results presented through the analysis of the perception of work and health by prison officers show that the type of work and its content increase the stress level of the workers analyzed, with 40% having stress problems. The lack of safety (40% think the work is dangerous) generates fear (13.3%) and distrust (20%), revealing problems in the organization and the work process.

With content analysis it was possible to

verify the agents' perception of their work and health, however, a deeper analysis of the working condition is essential to understand how much the work context influences their health. This case study does not deeply analyze aspects of work in prison systems, however, it is expected that this study has highlighted the relevance of the interrelationship between work and worker health, allowing analysis of aspects of work that pose risks of illness.

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