

CORRECTIONAL OASIS

BECAUSE ALL ROADS GO BACK TO STAFF WELLNESS

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FROM THE DIRECTOR'S DESK

As Desert Waters enters its 23rd year, it's the perfect time to reflect on correctional systems and the wellbeing of the staff who keep them running.

Staff wellness is not a side issue—it is essential to mission success. This year, we are focused on helping agencies strengthen social support and build resilient, sustainable cultures, reducing turnover and supporting staff so they can thrive. We look forward to partnering with leaders and wellness teams to protect staff wellbeing, enhance retention, and ensure that safety and rehabilitation can be achieved today and for the future.

We honor the dedication and resilience of correctional and public safety staff of all roles. May the new year bring renewed energy, strength, and moments of satisfaction, reminding you of the meaningful difference you make every day.

Caterina Spinaris

Every day you protect and serve—may your resilience be supported and your impact recognized.

Closing the Wellness Gap: What Corrections Must Change in 2026

By Caterina Spinaris, PhD, LPC

One of the most urgent challenges corrections faced in 2025 was the widening gap between widespread recognition of the need for staff wellness and the resources allocated to support it. Leaders across the country increasingly acknowledged that correctional staff—particularly custody staff—are experiencing extreme levels of anxiety, depression, PTSD, sleep disruption, substance misuse, and suicide risk. These conditions are almost certainly contributing to the profession’s epidemic-level turnover.

Yet many wellness efforts remained under-resourced, short-lived, and shaped by “low-hanging fruit” or well-intentioned initiatives rather than evidence of effectiveness. Wellness coordinators—when designated—were asked to address systemic challenges without adequate funding, training, authority, data, or personnel. Agencies understandably hoped these efforts might help counter years of stress, trauma, understaffing, and organizational strain through goodwill, limited programming, and occasional “feel-good” events. Given these constraints, results were often modest at best, reflecting limitations in scale, design, and sustained investment rather than any question of the relevance of wellness to job performance. When outcomes fell short, some leaders misattributed this to the concept of wellness itself, further complicating efforts to build long-term support.

Other agencies relied on grants that often failed to materialize or attempted to fund wellness temporarily by diverting resources from other essential programs. This reinforced the misconception that wellness is optional while increasing strain on both staff and incarcerated people. Meanwhile, agencies continued spending enormous sums on overtime to compensate for staffing shortages rather than investing upstream in wellness to prevent the crisis.

Wellness is not optional in a profession defined by chronic high stress and extreme mental and physical health risks. Healthy, rested, and supported staff are the foundation of safe, humane, and effective correctional operations. Without them, culture deteriorates, programs falter, and harm escalates for everyone inside the system.

Importantly, evidence now demonstrates that wellness done right works. A recent pilot [study](#) produced strikingly positive outcomes when staff wellness was treated as a true operational priority.

What Must Change in 2026

- 01** First, staff wellness must be formally recognized as **mission-critical** and supported by a protected, recurring budget line. It can no longer be treated as an afterthought or low-cost add-on. Cutting corners ultimately costs lives.
- 02** Second, wellness must be **integrated** into daily operations through policy and statute, including fatigue mitigation and sleep policies, overtime limits, adequate academy hours, ongoing training, access to mental health services, and trauma-informed supervision. **Data-driven frameworks** and **evidence-informed standards** strengthen quality and sustainability.
- 03** Finally, culture change must be **intentional** and **systematic**. Leaders must model emotionally intelligent, supportive leadership; reduce stigma around seeking help; embed culture-strengthening practices into policy, planning, and leadership development; strengthen peer support; and maintain meaningful connection to frontline work.

In 2026, wellness cannot remain symbolic. Corrections cannot function effectively or ethically without healthy staff. Fully funded, systemwide staff wellbeing is the prerequisite for safer facilities, humane conditions, and lasting reform.

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Can I Afford Not To?

By Stephanie Rawlings, MSc

Budget In Corrections

Are there any other words in administrative conversations that trigger a deeper collective groan? Probably not. Is “the budget” referenced almost daily—if not hourly—in our field? Absolutely. Do we blame nearly everything on waning budgets? Far more often than we’d like to admit. Do we have significant influence over how much is spent where? Almost never.

And yet, year after year, the amount of money spent on issues that were preventable is astronomical—far exceeding the costs of the proactive measures that could have stopped them in the first place.

Throughout my career, I’ve heard the reasons for delaying or denying preventative investments. I don’t dismiss those reasons; they’re valid, and they reflect real constraints. But there is a fine line between reasons and excuses. As a field, we have a long track record of finding money for the things we have to do.

Take PREA as an example. When we were told we had to comply—at our own expense—PREA audits, staffing adjustments, architectural modifications, and training suddenly found their way into budget line items. No one argued that compliance was unaffordable, because the alternative was exposure to liability, lawsuits, and watchdog scrutiny that no system wanted to defend. Agencies were given years to prepare, yet I vividly remember the chaos in many departments that delayed action—hoping the mandate might disappear, assuming budgets would eventually catch up, or quietly planning to retire before it became their responsibility.

Ultimately, it became clear that PREA implementation couldn’t happen in isolation. Systems needed vendors, experts, and external partners to get into compliance and to sustain improvements. Over time, that collaboration became normalized.

But when it comes to staff wellness, we treat the issue entirely differently.

Please note that this article is not intended to diminish the importance of PREA in maintaining facility safety and security, but rather to provide a comparative example of how departments establish budgetary priorities.

In just the last six weeks, I've heard multiple versions of the same refrain:

“If I include staff wellness training in next year’s budget, I’ll have to cut something else.” “We didn’t get the grant, so we can’t move forward with the wellness program.”

The implication is always that the “something else” being threatened is equipment, facilities, programs, or other visible priorities. But the truth is this: If you invest in high-quality, comprehensive staff wellness systems, you will remove things from your budget—things that are actually silently draining your agency budget.

You will reduce:

- Turnover-related costs.
- Overtime tied to fatigue-related call-ins.
- HR time and resources spent on bullying, harassment, and workplace conflict.
- Liability from incidents involving negative or escalated staff–incarcerated interactions.
- Spending on public image repair and crisis communication.

So, the real question becomes: How much are those issues costing you—directly and indirectly—every single year?

When you say, “If I add staff wellness to the budget, I’ll have to take something out,” are you referring to those items? Or are you convincing yourself that you’d be forced to cut resources, improvements or programs? Because assuming the latter reflects a very short-sighted perspective.

Return on Investment: The Long View

One of the challenges in corrections is our desire for immediate data to justify spending. We want to see savings right away—this quarter, not next year. But corrections is not, and has never been, a system of immediacy. If it were, people would spend far less time in custody before rehabilitation took hold, and our recidivism numbers would be enviable.

Staff wellness, like PREA implementation, requires time to see measurable progress. And it requires the willingness to make a genuine, sustained investment rather than a symbolic one.

Staff wellness is not:

- A one-time injection of good feelings.
- A motivational speech.
- A “token” initiative to signal good faith while deeper cultural issues continue unaddressed.

Staff wellness is:

- A way of working.
- A structural change.
- A cultural shift.
- A commitment embraced at every level—from decision-makers to funders to frontline staff.
- An ongoing effort, day after day, month after month, year after year.

It is not quick. It is not instant. But it is transformative—and ultimately cost-saving.

So... Can You Afford Not To?

The question is not whether your agency can afford to prioritize staff wellness. The question—the one budget lines should reflect, the one administrators should wrestle with, the one boards and funders should sit with—is this:

Can you afford not to?

When we delay preventative systems for staff health, resilience, and wellbeing, we pay the price one way or another—financially, operationally, legally, reputationally, and morally.

Numerous correctional programs have taught us that when something becomes a “must,” systems find a way.

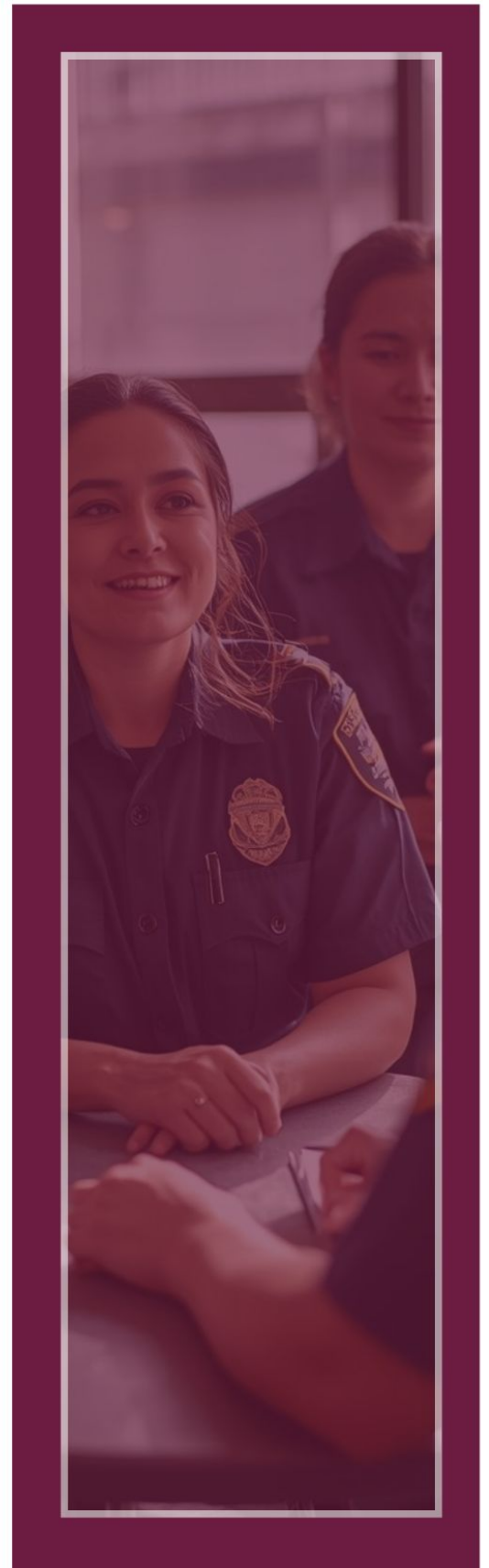
Staff wellness is a must.

Not because it is easy.

Not because it is free.

But because the cost of ignoring it is already far too high.

Contact us to explore options about your staff wellness programming.



Corrections Can't Be the End of the Road in Our Justice System

By Brian Koehn

Published in [The Hill](#) on the 4th of December, 2025, this opinion piece cites three organizations, including DWCO, as noteworthy examples of helpful practices.

I served as a U.S. Marine before spending my career running some of America's most complex prisons. Those years taught me about leadership, structure and the human cost when systems bend and break. Here is what I learned: Corrections is not only about punishment or security, and it is not the end of the justice process. Rather, it is where everything we fail to fix upstream finally shows up.

Inside, we do not just manage the incarcerated. We deal with untreated addiction, mental illness, trauma and poverty, with few resources for success. In the [2016 Survey of Prison Inmates](#), nearly two-thirds said they used drugs in the month before arrest, and about half met the criteria for a [substance use disorder](#) in the year before admission. Roughly one in four said they had been told they had major depression. These are not one-off issues. They pile up in the corrections system.

Across the country, the same roots show up again and again: unstable housing and work, addiction, and untreated trauma. Where opportunity and care are limited, incarceration goes up. This is not about politics. It is about safety and making good use of taxpayer money. When we do not invest in prevention, we pay for prison instead. That is the most expensive and least effective way to solve these problems.

Corrections professionals are the backbone of public safety, yet they are often overlooked.

Research shows that correctional officers [face post-traumatic stress](#) at rates [higher than combat veterans](#). The average life expectancy of a correctional officer is only [about 59 years](#). That should alarm all of us. These are people who serve the public every day. When residents and staff are both in crisis, the system cannot hold. Taking care of this workforce is how we keep facilities safe and deliver results taxpayers can trust.

Ask people who have lived it for 30 years, the staff and residents, and most will tell you it feels worse today. The U.S. incarceration rate rose [more than 220 percent](#) between 1980 and 2014 before it finally started to drop, and it has only slightly declined since then. The mental health caseload is deeper. Addiction is harder. Staffing is thinner. The work is more dangerous and less supported. Studies show correctional officers now face greater levels of [stress, illness and trauma](#) than in previous decades.

We can change that.

Prevention and treatment cost less than prison. Instead of paying for heads in beds, we would do well to pay for sobriety, for fewer returns to custody, and for [steady reentry we can verify](#). Expand diversion, crisis stabilization and recovery programs before the cell door closes. Correctional staff are public safety professionals; build on trauma-informed wellness, fair pay and realistic staffing. Groups like [One Voice United](#) and [Desert Waters Correctional Outreach](#) show what is possible when staff wellness and leadership are treated as essential.

The goal is to run prisons in a way that changes lives and makes communities safer. Governors, legislators and sheriffs should reward results, not volume. When better outcomes save taxpayer dollars, reinvest a portion of the savings into bonuses for the people doing the work. Return the rest to communities or use it for proactive programs like diversion and recovery. The Cicero Institute's [performance-based outcomes contracting model](#) shows how measurable outcomes and accountability can link taxpayer dollars directly to results that improve public safety and reduce recidivism.

About [95 percent of all state prisoners](#) will eventually return to their communities after incarceration. What happens inside those walls doesn't stay there; it determines what kind of neighbors, workers and families come home.

Brian Koehn is CEO of [Social Purpose Corrections](#) and a former warden and security expert.

Lives on the Line

From Termites to Possible Collapse

The Fluid Vulnerability Theory of Suicide Risk

By Caterina Spinaris, PhD, LPC

Imagine a wooden barn on a farm. On the surface, it may appear solid and stable, but hidden within the walls, termites have quietly weakened the structure. Now imagine a violent storm—howling winds and torrential rain—striking the barn. The walls groan, windows rattle, and the structure rocks and quivers under the relentless force, each gust threatening to bring it down. What is the probability the barn will remain standing versus collapsing?

And what does this have to do with suicide?



This scenario illustrates the **Fluid Vulnerability Theory of suicide** (Rudd, 2006), which describes the factors that contribute to suicide risk and why predicting suicidal behavior is so difficult.

The theory proposes that suicide risk is fluid and dynamic, fluctuating based on the interaction of two types of risk factors:

Baseline Risk Factors

Chronic, relatively stable vulnerabilities such as a history of trauma or mental illness, history of substance abuse, family history of mental illness, persistent negative thinking patterns, or past suicide attempts.

Acute Risk Factors

Stressors in the present moment (activating events) that trigger a crisis, such as substantial loss or threat of loss involving key relationships, health, finances, reputation, or freedom.

In our metaphor, the termites represent the hidden, baseline vulnerabilities that have quietly eroded the barn's structure—a person's resilience. The storm represents acute stressors, activating events that cause the "shaking," or the crisis phase when suicide may be considered or suicidal urges acted upon.

Will the barn collapse—will suicidal behavior occur, or not? According to the Fluid Vulnerability Theory, this depends on the interaction between these two groups of factors: the combined effects of the hidden termite damage and the intensity of the storm.

If termite damage is slight but the storm is severe, the barn is at risk of collapsing.

If termite damage is extensive, even a modest storm could cause the barn to collapse.

If termite damage is slight and the storm light, the barn is likely to remain standing.

This explains why one person may “collapse” following a major loss (such as an unwanted divorce), while another does not. Another way to conceptualize suicide risk is as a “tipping point,” where suicidal behavior occurs once the combined risk reaches a threshold—let’s call it 100:

One person may reach 100 with baseline (termites) at 70 + storm (shaking) at 30. Another may have baseline at 20 + storm at 80.

Either way, when the total reaches 100, suicide risk becomes dangerously high. The good news: Suicide risk is not static. We can intervene at every stage:

Prevent Termites

Address long-term vulnerabilities through supportive relationships, healthy spirituality, resilience-building education, psychotherapy, medical treatment.

Prepare for Storms

Help individuals develop coping skills and protective factors.

Stabilize Shaking

Offer timely support and interventions when acute distress arises.

Respond to Crisis

Remove lethal means, provide immediate support, and never minimize warning signs.

If a coworker friend is struggling with Corrections Fatigue, these booklets **Staying Well** and **More on Staying Well** may make a thoughtful gift for them.



Reference

Rudd, M. D. (2006). *Fluid vulnerability theory: a cognitive approach to understanding the process of acute and chronic risk*. In T. E. Ellis (Ed.), *Cognition and suicide: Theory, research, and therapy* (pp. 355-368). Washington, DC: American Psychological Association.



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Peer Support Perspectives



What elements make a peer support program effective in a corrections environment?



An effective peer support program in corrections relies on multiple interconnected elements that ensure safety, professionalism, and sustainability.

Clear and Relevant Policies

Programs need thoroughly developed policies that are reviewed at least annually. These should outline team member selection and removal, define roles and responsibilities, and provide protocols for handling high-risk situations, such as interactions with suicidal or homicidal staff. Clear policies set expectations, promote consistency, and protect both staff and the organization.

Strong Leadership Oversight

Effective programs require oversight at both the clinical and operational levels. Leaders ensure that the program aligns with organizational goals, maintains professional standards, and receives appropriate support, while also monitoring outcomes and addressing challenges.

Comprehensive Initial and Ongoing Training

Peer supporters must receive robust training not only at the start but continuously throughout their tenure. Training should cover professional boundaries, crisis intervention, recognition of high-risk situations, and strategies for self-care. This ensures that peer supporters are competent, confident, and able to respond safely and effectively.

Strict Adherence to Privacy and Confidentiality

Confidentiality is a cornerstone of trust in peer support, but programs must clearly define legal limits. Staff need to understand when confidentiality may be breached—for instance, when safety concerns arise—so that both support recipients and peers feel secure in the process.

Care for Team Members

Supporting the well-being of peer supporters themselves is critical. These team members are often exposed to stressful, traumatic, or emotionally charged situations, and ongoing supervision, debriefing, and wellness resources help prevent or counter their Corrections Fatigue.

Resource Development and Accessibility

Effective programs provide ongoing access to resources such as educational materials, referral networks, and external mental health supports. This ensures that peer supporters can provide informed guidance and that staff in need can access professional help beyond the peer program.

In combination, these elements create a peer support program that is not only operationally sound but also trusted, resilient, and capable of addressing the unique stressors of the corrections environment.

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QUOTES

of the month

“There are no shortcuts to any place worth going.”

Thomas Edison

“If you don’t have time to do it right, when will you have time to do it over?”

John Wooden

“The truth of the matter is that you always know the right thing to do. The hard part is doing it.”

General Norman Schwarzkopf



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Mission

Improving the wellbeing of corrections and other public safety professionals through training, consulting, and other essential resources to foster resilience, mental health, and overall wellness in these challenging professions.

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Support Desert Waters Correctional Outreach

We are a 501(c)(3) nonprofit organization dedicated to enhancing the well-being of corrections staff and other public safety professionals, and to also assist their families. Contributions by individuals like you enable us to offer some services at no cost, and to keep our products affordable for agencies. Consider joining us in our mission by making a **[tax-deductible donation](#)** today. Thank you for your support!

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

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