



On Aug. 4, at the 148th American Correctional Association (ACA) Congress of Correction, a ribbon cutting ceremony and a proclamation signing marked the opening of the Health and Wellness Expo at the Minneapolis Convention Center. But more than that, those events, coupled with Dr. Elizabeth Gondles' impassioned remarks — spoken, mind you, without a microphone, speaker or script — marked ACA's continued commitment to one of the most vital areas of concern facing the field of corrections worldwide — health and wellness.

With the theme “Champions for Life — Commit to Be Fit!”, ACA leadership and dedicated sponsors opened the expo to all visiting public, but if you ask Colette S. Peters what happened that day, she will quickly tell you that the expo was intended and targeted to a highly specialized group of

people — “our greatest resource — corrections professionals. They are our everything and they need tools in their toolboxes to stay healthy for life.”

As the director of the Oregon Department of Corrections (ODOC) and the chair of the ACA Wellness Committee, Peters believes there is nothing more pressing in the field of corrections today than the need to put a herculean emphasis and effort on health and wellness. In fact, it was tragedy that brought home the importance of staff well-being.

There is a growing proliferation of conversations around health and wellness in corrections, as there very well should be. Corrections Today continues its exploration into this area by sharing “deep dive” conversations with its readers. Shortly after the expo's opening event in August, we sat down with Peters and delved into this all-important issue as it pertains to Oregon, the nation and the world.

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Q&A

Corrections Today: So, history was made today, because long after we're gone, this [the wellness expo and its importance] is going to continue. Tell me, why is it significant for you to be involved?

Colette S. Peters: I became Director of the Oregon Department of Corrections six and a half years ago, and as I was coming on, in an 18-month period, we had four staff suicides, and they continued. I pride our organization in being a research-based organization. We have a state law that requires us to use evidence-based practices, so the first thing we did was look to the research of correctional officers, and there was nothing. There was research for police officers, firefighters, military, but not correctional officers. We had Portland State University (PSU) and Oregon Health and Science University (OHSU) come in and study our issues.

At the health luncheon last year, we had Dr. Kerry Kuehl from OHSU speak. He came in and studied the physical well-being of our staff, and PSU looked at the mental health well-being. What they learned was staggering. From a physical well-being standpoint, what they learned was that 90 percent of my staff had hypertension or pre-hypertension. Over 90 percent were in the overweight or obese categories. Triglycerides were through the roof, cholesterol was through the roof, but good cholesterol was through the floor. We learned that after 25 years in the business, they died around the age of 58.

From the mental health side, we learned that one in three of our staff had symptoms of PTSD. That means more anxiety, more depression, more drinking, more divorces, dying young, all those things that swirl together. I remember presenting my data to my peers with ASCA and they hadn't studied it either and they were all shocked. They attended the funerals, watched people get decertified because of DUIs, they held their hands through divorces, and never studied it. So, we made it one of our strategic initiatives in Oregon to focus on improving overall employee well-being. I have two of my assistant directors here today, as well as Zach Erdman, who is the project

lead for our wellness initiative. They are members of the ACA Wellness Committee, so not only are they making it happen in Oregon, they're part of the national conversation too, and I couldn't be more proud of their efforts.

CT: What are some of the programs and efforts the Oregon DOC has already begun to implement or is preparing to implement?

Peters: We're doing everything from bringing mindfulness and meditation into our institutions and training our staff on how to meditate, which we know gets us physically from that state of hypervigilance down to just vigilance. Because, really, our staff don't need to be hypervigilant unless there's an assault, or a cell extraction, or an incident. If you can get them down from hypervigilance to vigilance, doctors can actually measure that the stress markers drop.

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Not only are we rolling out traditional meditation, we now are rolling out virtual meditation. The Oregon Department of Corrections has been using a virtual reality meditation app, VR Provata. It's free, you can download it, and use it just on your smartphone in a single screen

or you can put it on your virtual reality goggles and it's a virtual reality experience. You get submersed into a nature scene, and then there's a voice talking you through a meditation cycle, for two minutes, five minutes or 10 minutes. You can do it at your desk or anywhere. I tried it for the first time after our executive team meeting. I put on the goggles, and my pulse rate coming out of the meeting (the smartphone measures your pulse rate) was 68. After two minutes of virtual reality meditation, it dropped to 48.

I don't know where it will go in Oregon, we're just rolling it out now. But just imagine the possibilities. Imagine if, on your way into the prison, you sat for two minutes and just shut it all down, and then walked in. Or after every cell extraction or every incident, it became a part of our culture and what we do. I don't know where it will go, but I'm super excited about it. So, we're doing things like that.

Additionally, Dr. Kuehl developed a program, which ODOC helped implement, called "Healthy Team, Healthy You," and it's a 12-week workbook-based program that's peer-supported, so you grab your buddies at work and you get to sit down and talk through different levels of curricula to get you focused on health goals. We know through programs like AA and Weight Watchers that peer support works, and we found it did here too. And we're doing things that might seem little, but I think are big, like revamping our break rooms. Our break rooms traditionally have looked very institutional, they look like a prison, they feel like a prison, and you know our corrections professionals can't leave the prison and get a break

like our other public safety officials can. By the time they get out of the belly of the prison, their break time is over. We have these blue rooms for the adults in custody, and research suggested that their mental state was improving dramatically, and we thought, "What are we doing for our staff?" We were trying to create a sort of "blue room experience" inside our break rooms. With little money, because every corrections agency is fighting for resources, but just being innovative and breathing life into a room that looks more normal, that looks like the rest of the world's break rooms.

CT: With all of this, clearly Oregon is on the forefront, and you're leading that charge. Nationwide, how does this translate out? Like, if I'm in Florida or New York, what does it mean for me when I read about this?

Peters: I'm so proud of this country. I think once the data was out there, every corrections director was listening. Every corrections director cares deeply about their staff. Like I said earlier, our corrections professionals are our everything, and I think our directors know it. I would be willing to venture a guess that there's not a corrections director in the country that isn't having a wellness conversation inside their organization today. ACA now has a wellness committee. ASCA (Association of State Correctional Administrators) now has a wellness committee. It is on the forefront of everyone's mind. It's on our agendas when we meet in our regions, when we meet nationally.

Now, we talked about this (ACA health and wellness



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expo) being historic with the proclamation, I also think we're at a unique part of time. Clearly, we should have had this conversation decades ago, but we didn't. But now it's interesting. Corrections agencies, while the whole country is faced with the baby boomers retiring, are unique, because it's compounded for us. In Oregon, in two years, 52 percent of my staff are eligible to retire. That's because in this country, 20-25 years ago, we built prisons and those staff hired on and they stayed with us. While the rest of state government in Oregon is about 30 percent eligible to retire, we're at 52. On one hand, I get scared to lose all that wisdom and all that history and all that experience, but on the other hand, if over half of my staff are going to be new, and we get them young and fit both physically and mentally, and then we give them the tools in their toolbox to have that long and healthy career. They can retire young and enjoy that retirement system that we've set up for them. If ever there was a time, now is the time.

CT: You've set a good foundation and starting blocks — we're moving now. Where are we going in the future?

Peters: My hope is that we're moving to a place where wellness is a part of our everyday thoughts and interactions. The doctor that I talked to you about, Dr. Kerry Kuehl, doesn't refer to correctional officers as correctional officers, he refers to them as "occupational athletes," and they need to think of themselves as such. They need to be physically fit and mentally fit to come to work. That just needs to be a part of who they are and it needs to be a part of our culture. We're not there yet, but I think wellness expos like these, and this proclamation, requiring that every facility has some sort wellness program, is monumental. That will move the dial, and that will force the conversation to be had into the future beyond us. We don't get to be in these roles for long. This is something that will live beyond the fire that Dr. Gondles talked about this morning.

CT: Where do you think you personally are going with all of this?

Peters: I love my agency. I know the average term of a DOC director is only 2.4 years, and I've made it 6.5. I've

broken the national average, and I'd love to retire from this spot. I love the people inside this organization. I love the support that we have from the Oregon legislature and our stakeholders.

CT: So, what happens then? What about the country? The world? This is definitely a global issue.

Peters: I feel very fortunate to have been able to chair the wellness committee over the years. I think there's an ability to have that national influence through the ACA as well as the ASCA. I'm currently the treasurer for ASCA and I'm able to influence that conversation there as an officer. I have the privilege of participating with ICPA as well, the International Corrections Prison Administrators. I was actually asked to present last year at the international conference that was held in London, where I talked about staff wellness and I gave a presentation to the international community on our data, what we found in Oregon, what we're doing to make change.

CT: How was it received?

Peters: It was very well-received, much like it was here. Every director internationally is struggling with this and struggling with how to help these corrections professionals in what I think is the hardest public safety beat, and I will say that to any law enforcement officer that will let me. They don't get a break. They don't get to pull over and have a stop at a restaurant and kind of shut down. Not only do they not have a break on their shift, they grow up with these adults in custody. I'll hire a new correctional officer today and I'll have an intake of new adults in custody with a 20-year sentence the same day. And they'll grow up together. Those dynamics are different, and those dynamics are complex and difficult. I think we ask so much of our corrections professionals. Nobody hires guards in this country. We hire corrections professionals who we ask to be counselors, mentors, peer supports and correctional officers, whose safety and security is their primary responsibility.

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