President’s Column

Working in Correctional Institutions: A Challenging but Vital Vocation

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In January 2024, Oscar Pistorius, also known as the Blade Runner, was released from prison after serving nearly 11 years for the culpable homicide of his girlfriend, Reeva Steenkamp in 2013. He had shot her four times. Most American observers would be shocked to learn that he was initially sentenced to serve only six years in prison, later changed to 13 years after a challenge by the victim’s family among others. The US has the longest average prison sentence for homicide convictions, 40.6 years compared to 6.1 for France (1). Even more startling is that the US incarcerates more people per 100,000 population (664) than Russia (329) or China (121), according to the Prison Policy Initiative (2).

Sentencing and imprisonment in the American criminal justice system were not always this dire, however. Alexis de Tocqueville, a former Minister for Europe, and Foreign Affairs of France who toured the US in the 1830’s on a mission to study American prisons, remarked that “In no country is criminal justice administered with more mildness than in the United States.” However, over the years, the charge of US prisons evolved from institutions of rehabilitation (correction) to those of punishment. Slogans such as “war on crime” and “tough on crime” drove harsh policies that encouraged longer prison sentences. Individuals addicted to illicit substances, especially crack cocaine, were punished for their addiction by imprisonment rather than treatment. Mandatory minimum sentences, as well as life sentences, including without the possibility of parole, which are
relatively rare in other parts of the world, led to a surge in the prison population, giving the US the dubious distinction of having the largest number of prisoners in the world. Notably, approximately 83% of individuals serving life sentences without the possibility of parole are in the US (Council on Criminal Justice, 2022).

The biggest travesties of these harsh policies include the lopsided incarceration of minorities and people of color, especially Black men, as well as the sheer number of innocent individuals sentenced to prison. The phrase, “innocent until proven guilty,” has unfortunately become an empty cliché. How else can one explain the 2,939 convicted defendants who were exonerated through DNA and non-DNA evidence from January 1989 through January 2022, after the excellent work of the Innocence Project? Many of these individuals had served decades in prison before their release. The case of Bobby Johnson, a 16-year-old African American teenager convicted of a 2006 murder and sentenced to 38 years in prison after being coerced by the police to falsely plead guilty to the crime, highlights a different unflattering picture of the depth of injustice in the US criminal justice system. A 2022 book, The Other Side of Prospect, by Nicholas Dawidoff, narrates in excruciating and painful detail the devious tactics unscrupulous police officers employed to manipulate the teenager into confessing to a crime he did not commit. That the investigating police officers knew he did not commit the crime, but charged him nonetheless was quite problematic and worrisome. Regrettably, these scenarios are not rare.

It is crucial to highlight these stories to challenge existing conscious and unconscious biases toward prisoners, who are generally believed to be criminals. Sadly, being called a criminal provides justification for prisoners to be treated inhumanely, not just by some correctional officers, but also by some healthcare professionals. A healthcare professional working in one of our prisons insisted that “criminals” should not be extended comfort in prison given the consequences of their criminal behavior to society. The fact that some prisoners were imprisoned secondary to complications of drug addiction, or wrongly imprisoned, did not sway the healthcare worker. Thankfully, healthcare personnel holding such views are in the minority.
Psychiatric ethics enjoins psychiatrists in a patient-psychiatrist relationship to treat each patient, including those in jails or prisons, with kindness, dignity, and respect, and to consider caring, and advocating for their best interest as our primary duty. A patient’s socioeconomic status, race, ethnicity, gender, sexual orientation, or location of treatment are irrelevant. Fortunately, most psychiatrists who have chosen to work in correctional institutions are motivated by the desire to do good, to serve and relieve the suffering of individuals housed in these dehumanizing institutions. Treating the patients with respect, compassion, dignity, and kindness restores their humanity.

Working in a correctional environment treating individuals society would rather forget can be thankless, exhausting, frustrating and overwhelming. But these are vital jobs. Society owes a ton of gratitude to psychiatrists who work in these extreme environments. They are unsung heroes of the US healthcare workforce.

References