

Professional Boundaries in Corrections

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Boundary violations occurring in corrections settings require special attention. There is a unique relationship between officers and inmates, governed by policies and procedures as well as ethics in general (e.g., the lack of ability for a person in a controlled environment to consent to a relationship due to power imbalance). Recent high-profile cases between corrections officers and inmates demonstrate the complexities inherent in these relationships. We examine several recent cases and offer analysis of the factors leading to these dangerous encounters. We discuss how a special relationship develops between a corrections employee and an inmate and how that can lead to blackmail, the introduction of contraband to the prison, or other illegal activity. It is easy to state that one should not engage in sexual encounters, but it is harder to discuss and identify feelings that develop in correctional settings, such as transference and counter-transference feelings in a therapeutic relationship. Lessons of professionalism from the doctor-patient relationship parallel the relationships between officers and inmates.

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Psychiatrists, especially forensic psychiatrists, are familiar with unprofessional behaviors that may be deemed unethical and may even amount to allegations in civil and criminal contexts. While some cases may seem to be obvious transgressions, others are more complex and ambiguous. For example, Gabbard and Nadelson¹ have stated:

Professional boundaries in medical practice are not well defined. In general, they are the parameters that describe the limits of a fiduciary relationship in which one person (a patient) entrusts his or her welfare to another (a physician), to whom a fee is paid for the provision of a service. (Ref. 1, p 1445)

Likewise, professional boundaries in the correctional setting must be defined and followed. Correctional officers and a variety of other employees are also vul-

nerable to committing unprofessional or unethical behavior with inmates. To this point, the Department of Justice (DOJ) has stated, “Under the federal criminal code, consent by a prisoner [to engage in a relationship with corrections staff] is never a legal defense because of the inherently unequal positions of prisoners and correctional and law enforcement staff who control many aspects of prisoners’ lives” (Ref. 2, p i). Moreover, frank violation of policies and procedures by corrections staff can threaten the safety and security of the corrections environment.³

In this article, we aim to provide a more complete understanding of how and why cases of boundary violations occur in corrections. We will first present several cases from the media to illustrate these violations, to analyze factors that contribute to boundary infractions in corrections, and to consider the potential security threats that arise. Then we will discuss the phenomena of how these special relationships develop in corrections settings, sometimes referred to as “getting got” or becoming a “duck.” Last, we will examine the lessons learned from medical education and general psychiatric training as they might apply to preparation for practicing correctional psychiatry.

Case Examples Sourced from the Media

The relationship between a corrections officer and an inmate exists with a clear power imbalance, and it often continues over a period of months to years.

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Table 1 Implications of Boundary Violations in Corrections

Decreased safety in the facility
Errors in judgment
Retaliation
Decreased safety outside of facility
Threats to family
Threats to friends
Potential criminal activity
Escapes
Extortions
Increased contraband (e.g., drugs, equipment, cellphones)
Allowing prisoners to keep contraband
Professional and legal ramifications
Employment status
Licensure
Litigation

Corrections officers face some of the same vulnerabilities and power imbalances in their relationships with inmates that therapists do with their patients. Just as in therapy relationships, there is an important distinction between boundary crossings and boundary violations.^{4,5} In therapy, boundary crossings are typically benign, may at times actually result in a helpful outcome, occur in isolation, and are usually minor in severity. Furthermore, crossings are typically done after deliberation and in consideration of the effect on the therapeutic goals and the alliance. By contrast, boundary violations are harmful, exploitive, repetitive, and often egregious. True boundary crossings, whether in a therapeutic or corrections environment, are often concealed and are rarely openly discussed. In therapy, boundary crossings may arise in various areas of the provider's role (e.g., engaging in dual relationships), time (e.g., duration and scheduling of appointments and other forms of contact), space (e.g., the location of session), money, gifts and services, language, self-disclosure, physical examination, and physical contact. Corrections employees may violate policies and procedures in a manner similar to these professional boundary crossings; exchanging gifts introduces contraband into the facility, and personal disclosures might allow an inmate to threaten the employee's family members (Table 1).

Recently, there have been several high-profile cases in the corrections setting in which prison staff appear to engage in inappropriate behavior in part due to transference and countertransference dynamics traditionally seen in psychotherapeutic relationships. Often the inmates engage in manipulation to

exploit the transference. These behaviors potentially threaten the safety of those inside the corrections environment, as well as outside the facility, and may result in escape attempts. Some cases involving inappropriate relationships between correctional staff and inmates suggest the presence of boundary violations but are not fully described in the media.⁶ We caution against the temptation to draw conclusions from media sources alone for many reasons (e.g., limitation of information available to journalists, or potential agenda or biases of participants or journalists). Although the cases discussed below came to the authors' attention through news stories in the lay press, these cases were chosen because reports from official inquiries or court-filed documents were publicly available for review. Although readily available in the lay press, cases involving blatant sexual abuse and criminal acts that do not directly involve transference dynamics are beyond the scope of this article.⁷

Case 1

In 2015, the escape of two inmates from the Clinton Correctional Facility, a maximum-security prison in Dannemora, NY, made headlines. This was a prime example of inappropriate behavior as a result of manipulation of transference.^{8,9} A prison employee, Joyce Mitchell, who worked as a tailor, developed a sexual relationship with an inmate, Richard Matt, who was convicted of murder. Mrs. Mitchell eventually also developed a romantic relationship with another convicted murder, David Sweat, who was friends with Mr. Matt. These relationships led to Mrs. Mitchell helping Mr. Matt and Mr. Sweat escape prison by providing them with tools and connections to the outside world. It appears that Mr. Matt and Mr. Sweat initially seduced Mrs. Mitchell with many small acts that, over time, led to larger transgressions. At the time that the prison break occurred, Mrs. Mitchell appeared to be a willing participant in a *quid pro quo* relationship based on romantic transference. Per the official incident review conducted by the NY state attorney general's offices:

Mitchell recalled that Matt became "flirtatious"; he "made me feel special." More significantly, Matt began asking more favors of Mitchell, revealing her willingness to break prison rules for his benefit and laying the foundation for the escape nine months later . . . Mitchell testified that Matt told her, "You know I love you." Over time, Mitchell and Matt's relationship turned sexual . . . Eventually, Mitchell

said, she decided she would join Sweat and Matt after their breakout, agreeing to meet them in her vehicle and drive away with them. Sweat and Matt “zoned in on my unhappiness,” Mitchell testified, until she became “caught up in the fantasy . . . of a different life.” Mitchell incredibly claimed to investigators that when she was writing notes of a sexual nature to Sweat, she was “thinking of my husband.” Sweat said he wrote Mitchell “love lust” notes merely to “placate her.” Although she engaged in sexual activity with Matt, Mitchell claimed, “I care more about Sweat.” She said the future life she envisioned with Sweat did not include Matt, with whom she “would only be buddies” (Ref. 9, pp 30, 59–63).

The relationship ultimately concluded with one of the escaped inmates being killed during re-apprehension, the other returning to incarceration, and Mrs. Mitchell being sentenced to up to seven years in prison for her involvement in the escape.

Case 2

The case of Tavon White,^{10,11} a former gang leader who was held at the Baltimore City Detention Center (BCDC) beginning in 2009, further highlights the potential safety threats that transference issues can create in corrections. Mr. White received national attention when it was revealed that he had impregnated four correctional officers who worked at the facility.¹² Two of the four officers even had his name tattooed on their bodies. Mr. White felt in such control of his situation that he made statements such as:

This is my jail. You understand that? I’m dead serious . . . I make every final call in this jail, and nothing go past me, everything come to me . . . Any of my brothers that deal with anybody, it’s gonna come to me. You see what I am saying? Everything come to me. Everything (Ref. 10, paragraph 16).

Mr. White and his fellow gang members from the Black Guerrilla Family (BGF) financially profited from their time in jail, generating an income of \$16,000 per month from the contraband they were supplied, which included cell phones and drugs.¹² According to the official charging documents, Mr. White’s gang, with the assistance of both male and female corrections officers:

. . . operated a criminal organization within the prison facility, enabling them to make large amounts of money through drug trafficking, robbery, assault, extortion, bribery, witness retaliation, money laundering, and obstruction of justice . . . BGF members and associates used [money] to bribe correctional officers and other employees at BCDC and related prison facilities to smuggle drugs, cell phones, and other contraband. Correctional officers arranged favored treatment and privileges for imprisoned BGF gang members, thwarted interdiction and law enforcement ef-

orts against BGF inmates, and facilitated attacks on inmates in furtherance of BGF objectives. Gang members and associates extorted protection money from inmates who were non-members, often paid by relatives outside the jail.¹¹

When these types of inappropriate relationships exist, whether based on strict *quid pro quo* dynamics (e.g., paid money, trade of favors), romantic feelings (e.g., Mr. White sired multiple children with the guards), or both, then the result is corruption and the creation of a dangerous environment.

Case 3

There are other examples of officers who were in relationships with inmates without any direct monetary gain. This dynamic was illustrated in the case of Ronell Wilson, who, while on death row after being convicted of the 2003 murder of two undercover police detectives, developed a relationship with Nancy Gonzalez, a federal corrections officer.^{13–15} During the investigation, it was discovered that even before Mr. Wilson and Ms. Gonzalez’s relationship, she had relations with another inmate, immediate supervisors, and other officers.¹⁵ When other inmates attempted to inform officials of the relationship between Ms. Gonzalez and Mr. Wilson, officers with whom Ms. Gonzalez had past relationships protected her and prevented the reporting.¹⁵ This also resulted in retribution against the inmates who made the reports.^{14,15} The five recommendations for remediation from the Office of the Inspector General related to this case addressed primarily the handling of potentially disruptive inmates, searches for contraband, how to handle complaints by prisoners, and the need for communication to officers.¹⁴ There were no direct recommendations for additional training or education for officers regarding relationships within a prison.

Sex Between Inmates and Staff

In a study of offenders who had seduced multiple staff members, Salter¹⁶ found that these inmates had a common pattern that they followed. They used the same techniques of conning and manipulation inside prison as they did outside of prison. They began by obtaining information about staff to determine which staff to target and to obtain details to be used in that process. Being in a long-term facility allows time to determine vulnerabilities and build so-called relationships. To do so, the inmates talked with staff,

but they also listened in on staff conversations while pretending not to be interested: “The point is to find out problems, interests, vulnerabilities, hopes, anything that will provide material . . .” (Ref. 16, p 146). The inmates also observed behavior (e.g., which officers appeared fearful, too comfortable, or too strict) that stood out as different from the norm of officer behavior. Then a vulnerable target would be selected for conning, grooming, and manipulation. Factors indicating vulnerability might include relationship problems, family problems, money problems, drug problems, or even aging. Then, tactics were used, such as giving the officer something first, so that they would feel an obligation to behave in kind (e.g., like the tactics used by Hare Krishnas). Offenders might offer protection and praise to the officer. Then, their demands started small, asking the officer to break a seemingly small rule, such as giving a cigarette or food, and then demands escalated.¹⁶ The inmate often does not care about being found out (unlike the officer), because being involved in a staff seduction would increase his social status. Such relationships are about control rather than about caring. “Staff seduction is a game. There is more joy in the winning than in the sex” (Ref. 16, p 144).

A similar pattern has been noted in reports of inmates who “down a duck.” In corrections, this refers to being corrupted by a special relationship with an inmate,¹⁷ the “duck” being a corrections employee who is able to be manipulated. In some settings, it has also been referred to “getting got.” In an article based on reports of several anonymous inmates, multiple steps in a common pathway were noted, beginning with observation of potential “ducks.” Observations include paying attention to their personality, attire, and movements. Then, in “developing the duck,” it was important for the officer to overlook minor rule violations; the officer may think he is being nice or may do so because of fears or because his ego is being stroked. However, these small violations can later be used as leverage against the officer when he is being asked for contraband. Small rule violations (such as asking for a pen and paper) may be requested of the officer. A (false) friendship with the officer is groomed by the inmate, who seeks his advice and acts impressed by his knowledge. There may be fights staged from which the officer needs protection, and the officer gets that protection from the inmate with whom he is friendly. The inmate makes gradually larger requests, and if the officer balks, he is re-

minded that his livelihood is at risk, should the inmate report his previous violations.¹⁷ This relationship often leads to blackmail of the staff and contraband introduction to the prison, as well as eventual increased criminal activity in the prison, including violent escapes.¹⁸

The relationship that develops between an inmate and officer may involve any combination of gender and roles. A 2009 U.S. DOJ study found female corrections staff had a higher percentage of engaging in sexual violations with prisoners than did male officers.² Female staff only made up about 27 percent of the Department of Prisons work force but accounted for 30–39 percent of the allegations of staff sexual abuse and sexual misconduct.

Corruption by the development of a special relationship with an inmate can also occur with other corrections employees, including correctional psychiatrists, health care workers, educational staff, volunteers, and chaplains. The same 2009 study² found that corrections employees who had the most contact with inmates had the greatest number of abuse allegations filed. The occupational categories that had the highest rates of allegations per capita were food services, recreation, and education or vocational training. Notably, employees in health, safety, and psychological services accounted for a small percentage of the total allegations (6.4% and 2.3%, respectively).² Although inmates manipulate some staff into having a relationship, staff still have a responsibility to avoid the inappropriate relationship. The significant power differential may lead to relationships that are inherently coercive, sometimes resulting in forcible sexual assaults; these have been documented in the corrections literature and addressed by the Prison Rape Elimination Act.^{2,19}

One study²⁰ demonstrated that among staff–inmate sexual relationships, 60 percent involved a female corrections worker. In a self-report study of male inmates, it was noted that among those inmates who had a relationship with staff, 29 percent reported kissing a female officer, and 26 percent reported having sex with a female officer.²¹ Higher rates were found among those incarcerated for more than six years.

Worley and colleagues²² have described three types of inmates who enter into sexual relationships with authority figures in corrections: Heartbreakers, Hell-raisers, and Exploiters.

The Heartbreakers engage in a courtship process, such as a touching “game” to determine the staff’s boundaries and to minimize the power differential. The Hell-raiser’s goal is to create difficulties for the correctional facility, enjoying the notoriety of the inappropriate relationship and enjoying the embarrassment of the corrections administration. Finally, the Exploiter is skilled at identifying vulnerable staff. He intimidates and uses the romance to improve his status in the prison economy. He does favors for staff or gives them presents to begin a relationship, and later blackmails them for breaching the policy of accepting gifts; this is one way for inmates to obtain contraband. Techniques used by inmates to start relationships may include isolating staff from their colleagues, testing boundaries, extortion, negotiation, and ingratiating.

Matching the aforementioned ways in which inmates choose officers to target with Gabbard’s²³ categories of psychiatrists who violate boundaries may further our understanding of the sexual relationships in corrections. Gabbard’s categories include psychopathy, psychosis, lovesick, and masochistic surrender.²³ The psychopathy and the psychotic categories are described in familiar diagnostic terms. The lovesick have limited lives outside of work and enter into the relationship to fill a void (e.g., from divorce or widowhood). Meanwhile, the masochistic feel that they are martyrs in their devotion to their work and are thus vulnerable. Officers are likely to be at risk when they fall into similar categories as psychiatrists. One study²⁰ categorized employees involved in boundary violations as rescue situations (e.g., an employee feels sorry for the inmate and breaks a rule to assist him), naiveté or accidents (e.g., the employee is unaware of the professional nature of the relationship), lovesickness (e.g., “romantic idealism”), or predators (e.g., the employee manipulates the inmate for personal gain).

Legislation and Training in Corrections

Legislation has been enacted to address this concerning pattern of behavior in corrections. The Prisoner Rape Elimination Act (PREA) of 2003 and follow-up legislation (e.g., Violence Against Women and Department of Justice Reauthorization Act of 2005²⁴) require departments of corrections, especially those receiving federal money, to provide education, training, and information for the detection, prevention, reduction, and punishment of prison

rape and staff sexual misconduct.² A 2009 U.S. DOJ report notes the following:

Implementing staff sexual abuse prevention programs since 2001 has been mixed . . . staff training on the prevention of sexual abuse was outdated and the [Bureau of Prisons (BOP)] has not established effective goals and oversight mechanisms for its sexual abuse prevention program . . . We concluded that the BOP could increase the effectiveness of its sexual abuse prevention program by improving staff training and inmate education about sexual abuse prevention and reporting, and by providing better oversight of institutions’ sexual abuse prevention programs (Ref. 2, pp iii, v).

In 2012, the U.S. DOJ issued its National Standards to Prevent, Detect, and Respond to Prison Rape, again noting the importance of training:

Proper training is essential to combating sexual abuse in correctional facilities. The standards require staff training on key topics related to preventing, detecting, and responding to sexual abuse . . . The standard contained in the proposed rule required that all employees who have contact with inmates receive training concerning sexual abuse in facilities, including specified topics, with refresher training to be provided on an annual basis thereafter . . . Most agency commenters responded positively to the staff training standards, with some stating that they were already in compliance (Ref. 25, pp 37109, 37145, 37146).

Federal code §115.31²⁵ details the scope of corrections employee training (Table 2). In response to many of these concerns and the requirements of the federal code, the DOJ has used pamphlets, training videos developed by the National Institute of Corrections, and online courses.^{2,14,25}

Incidents like the cases presented here raise questions about the adequacy of this training. The official Danemorra incident review noted that officers at the facility receive 320 hours of course work (e.g., instruction in supervision of general housing, gate security, tool control, legal principles, and defensive tactics), including an “Attitudes in Supervision” course that included only a 25-minute video, “Games Inmates Play,” which describes how inmates try to manipulate prison personnel.¹¹ Civilian employees receive 40 hours of training including “GOTCHA” training, which focuses on how inmates attempt to manipulate employees. However, this training was critiqued as not being in-depth, sophisticated, or thorough enough to address the maintenance of proper boundaries, as noted in the recommendation of the review: “[S]ecurity and civilian management must strengthen and uniformly enforce rules governing proper inmate conduct and interaction between employees and inmates. More

Table 2 Employee Training Required Under 28 CFR§115.31²

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- (a) The agency shall train all employees who may have contact with inmates on:
- (1) Its zero-tolerance policy for sexual abuse and sexual harassment;
 - (2) How to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures;
 - (3) Inmates' right to be free from sexual abuse and sexual harassment;
 - (4) The right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment;
 - (5) The dynamics of sexual abuse and sexual harassment in confinement;
 - (6) The common reactions of sexual abuse and sexual harassment victims;
 - (7) How to detect and respond to signs of threatened and actual sexual abuse;
 - (8) How to avoid inappropriate relationships with inmates;
 - (9) How to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender-nonconforming inmates; and
 - (10) How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities.
-

frequent training on these policies must be conducted” (Ref. 11, p 147).

Discussion

These three cases are just a selection of the many scenarios described in the public domain. A variety of factors might lead to boundary violations such as these. Corrections officers often feel underappreciated and underpaid, which may lead them to identify and relate to some of the expressed difficulties inmates have within an institution. Worley and Worley studied the economics of crossing over (i.e., when the protected (or inmates, in this case) manipulate some of their protectors (officers, in this case)) and posit that “correctional officers who perceive themselves to be undervalued and unappreciated feel closer to those relatively further deprived than themselves, in this case, the inmates, because it alleviates their lowly status and boosts their confidence” (Ref. 26, p 26). A Canadian study considering stressors reported by prison officers found the most frequent stressors involved difficulties related to interpersonal relationships.²⁷ Commonly identified stressors included conflict with administration, inmates, co-workers, and immediate supervisors. Poor interactions with administration were identified as the most significant stressor for most officers. The potential risk of violence at work also would be expected to be a stressor. In addition, corrections officers are not immune to the general life stressors that can further increase the risk for boundary violations, such as those involving personal relationships, finances, health, and lack of fulfillment with work.^{28–30}

The work of a corrections officer involves different factors that might influence the relationship with inmates that are in contrast to those seen in the psycho-

therapy relationship. First, officers have more frequent direct physical contact with inmates (e.g., searches, pat downs, and the use of restraints) than do most psychiatrists, who typically delegate physical examinations to general practitioners. Second, there is a more extreme power dynamic between the officer and inmate than in the relationship between a physician and patient. Third, officers and inmates are forced into sharing significant time and space. There are increased risks of mutual hardships because they share the same environment, and there is limited opportunity to consult with others outside it. Psychiatrists and patients, however, have more choice whether they want to continue their contact with each other.

Similar to the “slippery slope” that is commonly observed during traditional psychotherapy, once boundary violations begin, they often increase in frequency, severity, and the number of people involved.^{28–30} Just as boundary violations are more likely to occur with certain patient populations (e.g., in those with a personality disorder or past history of abuse), characteristics of certain inmates may be more likely to result in corrections officers engaging in boundary violations.³¹ In the three cases discussed herein, the inmates were incarcerated for violent and high-profile crimes and had access to power and respect both inside and outside of the prison facility.

Hollywood has likely further disseminated misconceptions regarding sexual relationships in corrections. For example, Meade discussed what he refers to as the “Orange Is the New Black Effect.”³² The popular Netflix show depicts a romantic sexual relationship between an inmate and an officer. Although the coercive nature might appear clear to forensic psychiatrists, it may not to trainees, students, and the

general public. Rather, as Meade commented, “The fact that one is the keeper and the other is the kept is simply presented as a minor obstacle for these star-crossed lovers to overcome.”³² This further highlights the need for more education regarding the dynamics and what is really occurring in the relationship.

A parallel may be drawn to the education and training of professionalism in the health care field and in corrections. The presence of boundary violations can “negatively impact the culture of safety within a medical practice or health care institution and severely compromise the covenant of care and physician objectivity” (Ref. 33, p 129). Providing education to medical trainees promotes integrity and professionalism. It may be taught in a variety of curricular themes, including instruction on professionalism, ethics, case discussions, or personal reflections. Model curricula that emphasize teaching boundary violations and professionalism for students and psychiatry residents are publicly available.^{34,35} Residency programs utilize a variety of tools to assess professionalism, including supervision, in-service exams, multi-source 360-degree reviews, clinical skills examinations, faculty evaluations, patient safety reports, and review of patient or staff complaints. Adapting these training modalities to corrections situations could provide important information in a new approach that might assist corrections officials to become aware of counter-transference issues.

Education and training helps individuals identify deficits and vulnerabilities, of which they may be unaware. For example, a historic study found that 21 percent of surveyed medical students did not think sexual contact with a patient was inappropriate.^{36,37} If trainees do not think their behavior is inappropriate, then they would likely not raise concerns with an attending physician or supervisor when observing similar behavior by others. The lack of education and training on these points might later lead to physician misconduct and a larger culture that allows boundary violations.³³ If such concerning behavior could occur among medical trainees who have access to supervision that specifically addresses these topics, then it is conceivable this would be even more concerning for officers and other corrections staff.

Those working in corrections should learn from the examples of boundary violations between inmates and corrections staff and be mindful of their own potential susceptibility for unprofessional be-

havior, or the illegal behavior witnessed by their colleagues that might need to be reported. Staff who are isolated and have relationship strife (e.g., divorce or the death of a partner) are at elevated risk, as are those who lack self-awareness and have limited supervision.³⁸ Prevention entails appropriate boundaries and limit setting. Corrections employees, including psychiatrists, should keep work life and personal life separate, and they should keep their social life healthy. Knowing about the methods used by inmates to manipulate staff should be protective. Corrections staff need to feel comfortable seeking supervision when these concerns arise, and experienced and capable supervisors need to be available for this purpose.³⁸

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References

- Gabbard GO, Nadelson C: Professional boundaries in the physician-patient relationship. *JAMA* 273:1445–49, 1995
- Office of the Inspector General: The Department of Justice’s Efforts to Prevent Staff Sexual Abuse of Federal Inmates, September 2009. Available at: <https://oig.justice.gov/reports/plus/e0904.pdf>. Accessed October 27, 2018
- Office of the Inspector General: Deterring Staff Sexual Abuse of Federal Inmates, April 2005. Available at: <https://oig.justice.gov/special/0504/index.htm>. Accessed October 27, 2018
- Gutheil TG, Gabbard GO: The concept of boundaries in clinical practice: theoretical and risk-management dimensions. *Am J Psychiatry* 150:188–96, 1993
- Gabbard GO: *Psychodynamic Psychotherapy in Clinical Practice*. Arlington, VA: American Psychiatric Publishing, Inc., 2014
- Jail nurse, 38, helped male inmate, 33, escape during months-long sex romp, cops say. Available at: <http://www.foxnews.com/us/2017/12/01/nurse-38-helped-inmate-escape-for-sex-cops-say.html>. Accessed December 6, 2017
- Andone D: Prisoner-transport officer accused of sexually assaulting inmates. Available at: <http://www.cnn.com/2017/06/02/us/prisoner-transport-officer-sexual-assault/index.html>. Accessed December 6, 2017
- Schwartz M, Winerip M: ‘Systemic’ lapses found in escape of 2 killers from Dannemora prison. Available at: <https://www.nytimes.com/2016/06/07/nyregion/new-york-prison-break-was-aided-by-huge-security-lapses-report-says.html>. Accessed December 6, 2017
- Scott CL: Investigation of the June 5, 2015 escape of inmates David Sweat and Richard Matt from Clinton Correctional Facility. Available at: https://ig.ny.gov/sites/default/files/pdfs/DOCCS%20Clinton%20Report%20FINAL_1.pdf. Accessed December 6, 2017
- U.S. State Attorney’s Office, District of Maryland: 13 Correctional Officers Among 25 Alleged BGF Gang Members and Associates Indicted on Federal Racketeering Charges. Available at: <https://www.justice.gov/usao-md/pr/13-correctional-officers-among-25-alleged-bgf-gang-members-and-associates-indicted>. Accessed December 6, 2017

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11. Federal Bureau of Investigation: Nineteen new defendants, including 14 correctional officers, indicted on charges of federal racketeering in Baltimore city jail investigation superseding indictment focuses on conduct prior to April 2013. Available at: <https://archives.fbi.gov/archives/baltimore/press-releases/2013/nineteen-new-defendants-including-14-correctional-officers-indicted-on-charges-of-federal-racketeering-in-baltimore-city-jail-investigation>. Accessed December 6, 2017
12. Four female prison guards impregnated by same inmate. Available at: <https://www.cbsnews.com/news/four-female-prison-guards-impregnated-by-same-inmate>. Accessed December 6, 2017
13. Gregorian D: Guard impregnated by cop killer loses custody of baby. Available at: <http://www.nydailynews.com/new-york/guard-impregnated-killer-loses-custody-baby-article-1.1521047>. Accessed December 6, 2017
14. Office of the Inspector General: Management of the Special Programs Unit at the Federal Bureau of Prisons Metropolitan Detention Center in Brooklyn, New York. Evaluation and Inspections Division 15–08, September 2015. Available at: <https://oig.justice.gov/reports/2015/e1508.pdf>. Accessed December 12, 2017
15. Associated Press: NYC jail guard's claim she had sex with inmates, co-workers triggers federal investigation. Available at: <http://www.foxnews.com/us/2014/03/09/nyc-jail-guard-claim-had-sex-with-inmates-co-workers-triggers-federal.html>. Accessed December 15, 2017
16. Salter AC: *Predators: Pedophiles, Rapists, and Other Sex Offenders*. New York: Basic Books, 2003
17. *Downing a Duck (An Inmate's Version)*. Available at: <http://www.phylon-tgonzalez.com/downing-aduck.html>. Accessed May 14, 2018
18. Shephard N: Inside story - prison guards. Available at: http://www.nzherald.co.nz/nz/news/article.cfm?c_id=1&objectid=10438038. Accessed December 12, 2017
19. National PREA Resource Center. Available at: <https://www.prearesourcecenter.org/about/prison-rape-elimination-act-prea>. Accessed December 6, 2017
20. Marquart JW, Barnhill MB, Balshaw-Biddle K: Fatal attraction: an analysis of employee boundary violations in a Southern prison system, 1995–1998. *Justice Q* 18:878–910, 2001
21. Dial K, Worley RM: Crossing the line: a quantitative analysis of inmate boundary violators in a Southern prison system. *Am J Crim Justice* 33:69–84, 2008
22. Worley RM, Marquart JW, Mullings JL: Prison guard predators: an analysis of inmates who established inappropriate relationships with prison staff, 1995–1998. *Deviant Behavior* 24:175–98, 2003
23. Gabbard G: *Psychodynamic approaches to physician sexual misconduct, in Physician Sexual Misconduct*. Edited by Bloom J, Nadelson C, Notman M. Washington, DC: American Psychiatric Press, 1999, pp 205–23
24. Violence Against Women and Department of Justice Reauthorization Act of 2005. Available at: <https://www.congress.gov/bill/109th-congress/house-bill/3402>. Accessed October 17, 2018
25. Department of Justice: 28 CFR Part 115 Docket No. OAG-131; AG Order No. RIN 1105-AB34 National Standards to Prevent, Detect, and Respond to Prison Rape. Available at: <https://www.federalregister.gov/documents/2012/06/20/2012-12427/national-standards-to-prevent-detect-and-respond-to-prison-rape>. Accessed October 27, 2018
26. Worley RM, Worley WB: The economics of “crossing over”: examining the link between correctional officer pay and guard-inmate boundary violation. *Deviant Behavior* 37:16–29, 2016
27. Forum on corrections research. Available at: <http://www.csc-scc.gc.ca/research/forum/e021/e021b-eng.shtml>. Accessed December 6, 2017
28. Gabbard GO: Prevention of boundary violations. Available at: <http://www.psychiatrictimes.com/antisocial-personality-disorder/prevention-boundary-violations>. Accessed October 27, 2018
29. Simon RI: Treatment boundary violations: clinical, ethical, and legal considerations. *Bull Am Acad Psychiatry Law* 20:269–88, 1992
30. Brooks E, Gendel MH, Early SR, *et al*: Physician boundary violations in a physician's health program: a 19-year review. *J Am Acad Psychiatry Law* 40:59–66, 2012
31. Halter M, Brown H, Stone J: Sexual boundary violations by health professionals – an overview of the published empirical literature. Available at: https://www.professionalstandards.org.uk/docs/default-source/publications/research-paper/sexual-boundary-violations-2007.pdf?sfvrsn=79c47f20_6. Accessed October 27, 2018
32. Meade B: Boundary violations between prison staff and inmates: the “Orange Is the New Black” effect. Available at: <http://imaginingjustice.org/blogs/boundary-violations-prison-staff-inmates-orange-new-black-effect>. Accessed July 19, 2017
33. Swiggart W: Spanning a decade of physician boundary violations: are we improving? *HEC Forum* 28:129–40, 2016
34. Roman B, Kay J: Residency education on the prevention of physician-patient sexual misconduct. *Acad Psychiatry* 21:26–34, 1997
35. McLaren K, DeMers S: *Professionalism in Medicine: A Curriculum for Psychiatry Residents*. AADPRT Model Curriculum, 2011. Available at: https://www.aadprt.org/application/files/2515/3367/7401/Model_Curricula_8-7-18.pdf. Accessed January 12, 2019
36. White GE: Medical students' learning needs about setting and maintaining social and sexual boundaries: a report. *Med Educ* 37:1017–19, 2003
37. Freedman JL: Teaching trainees how to discern professional boundaries. *Current Psychiatry* 14:74, 2015
38. Faulkner C, Regehr C: Sexual boundary violations committed by female forensic workers. *J Am Acad Psychiatry Law* 39:154–63, 2011