Sources and Consequences of Prison Violence:

Key Findings and Recommendations from the Prison Violence Consortium

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December 2024

Executive Summary

This policy brief presents the findings of our multi-strategy approach, spearheaded by the Prison Violence Consortium, to examine the sources and consequences of prison violence. We capture prison violence using data on guilty violent infractions, violent incident reports, and interviews with incarcerated persons and correctional employees. We offer solution-driven recommendations to policymakers, institutional leaders, prison researchers, and other stakeholders, aiming to enhance prison safety and more effectively address institutional violence nationwide.

Key Findings

- **Perpetrators of Violence & Timing:**
  - **Prison violence was concentrated among a small subset of persons**, as 10% of the population accounted for more than 50% of guilty violent infractions.
  - **Personal characteristics related to guilty violent infractions** included younger age at admission, lower education, longer sentences, violent criminal histories, gang affiliations, and greater mental health needs.
  - **Most people (63%) committed guilty violent infractions within 6-12 months of admission**, with fewer than 10% remaining violent throughout their incarceration.

- **Common Forms & Situational Factors:**
  - **Most violence (71%) occurred between incarcerated persons**, while 29% was directed at staff, according to the incident reports.
  - **The most prevalent form of violence was fights between persons (38%)**, followed by assaults on persons (26%), assaults on staff (17%), biohazard incidents (13%), and unwitnessed physical altercations (6%).
  - **Violence most often occured in cells or housing areas (39%) and common areas (e.g., cafeteria and yard) (31%).**
  - **Weapons and contraband** were mentioned in 10% of the incident reports.

- **Main Drivers & Precipitating Events:**
  - **Primary reasons for violence between incarcerated persons** included disrespect, illicit markets and debts, cellmate conflicts, gang issues, strong arming and predatory behavior, and targeting persons with sex offender status.
  - **Staff routinely faced threats and physical acts of violence.**
  - **Staff were directly targeted for violence** when individuals disobeyed staff orders, had requests denied, sought status, or during inspections or food deliveries.

- **Injuries & Impacts on Well-Being:**
  - **Physical injuries** were reported in 42% of assaultive or fighting incidents between incarcerated persons and 21% of staff assault incidents.
  - **Nearly half (46%) of interviewed staff reported injuries**, including scratches or kicks (43%), cuts (39%), and strains, sprains, or broken bones (21%).
  - **Most interviewed incarcerated persons said violence changed how they "do time,"** leading to social withdrawal, hypervigilance, distrust, and vulnerability, along with depression, anxiety, insomnia, and self-harm.
  - **Interviewed staff reported poor mental health, as well as lack of department support, work-life imbalance, and interpersonal challenges.**

- **Consequences on Individual Outcomes:**
  - **Disciplinary actions** were mentioned in 51% of the incident reports.
  - **Housing movements** were mentioned in 62% of the incident reports.
  - **Regarding recidivism**, 37% of incarcerated persons with guilty violent infraction records returned to prison within 24 months of release.

- **System Responses to Violence:**
  - **Over half (58%) of the incident reports documented staff intervention**, including physical intervention (50%), physical restraints (43%), use of chemical agents (26%), and critical incidents team deployment (11%).
  - **De-escalation strategies were highlighted as resources for promoting safety** (e.g., effective communication, mental health awareness, crisis intervention, and conflict resolution).
  - **Staff training time focused more on forceful techniques (29% of total training hours) than on de-escalation strategies (14%).**

Recommendations

1. Implement detailed and dynamic risk assessment to identify high-risk individuals.
2. Enhance classification and reclassification strategies to place incarcerated individuals in units that align with their risks, needs, and social dynamics.
3. Strengthen collaboration between security operations and behavioral health personnel to share information, improve treatment, and prevent violence.
4. Expand de-escalation training to equip staff with effective communication skills and proactive strategies to prevent and manage violence.
5. Enhance data collection quality by increasing the detail in incident reports and implement an "injury" tool to capture violence-related injuries.
6. Transform institutional culture to a treatment-based, positive-reinforcement model of care for incarcerated persons, while enhancing mental health support for staff.

Background

In the shadows of our criminal justice system lies a pervasive crisis: prison violence. Often overlooked in public discourse, this issue extends far beyond the confines of correctional facilities, demanding our attention not merely as an institutional problem, but as a societal concern with far-reaching consequences. Prison violence challenges the very principles of justice and public safety that our system strives to uphold by undermining rehabilitation efforts and perpetuating cycles of aggression. It increases exposure to trauma and exacerbates mental health issues, creating long-lasting effects that persist beyond incarceration and potentially contribute to future criminal behavior (Daquin & Daigle, 2017; Silver et al., 2008). These impacts not only compromise the well-being of incarcerated individuals and staff but also hinder successful reintegration into society, ultimately affecting public safety and community stability (Hummer & Ahlin, 2018; Mooney & Daffern 2014).

The story of prison violence is not simply one of individual actions or institutional failures; it is inextricably linked to broader societal issues and punishment policies. The United States incarcerates more individuals than any other nation in the world, with the American correctional system characterized by racial disparities in incarceration rates, lengthy prison sentences, and high rates of recidivism (Nellis, 2024; World Population Review, 2024). This mass incarceration paradigm creates an environment where violence can thrive, further complicating reform efforts. As we grapple with these interconnected problems, we must recognize that addressing prison violence is more than a matter of institutional reform—it is a crucial step towards creating a more just, equitable, and safe society for all.

We situate the problem of prison violence within this criminal justice policy context for several reasons. First, persons impacted by prison violence are confined because of sentencing policies that identified imprisonment as the appropriate response for their crimes. As such, sentencing policies are intrinsically tied to the victimization and violence experienced by incarcerated persons and correctional staff. Second, 95% of the incarcerated population will leave prison and re-enter communities (Hughes & Wilson 2004). Failing to recognize the impact of prison violence on the reentry process only reinforces the limited capacity and ineffectiveness of existing reentry models. Third, correctional systems are highly heterogenous and microcosms of their social-political contexts, each with their own mission for the care and custody of the incarcerated population. This broader criminal justice context shapes the formal and informal correctional policies and practices of prisons, including those that guide the prevention and response to violence.

Motivated by the lack of data and research on prison violence, including evidence-based strategies to reduce the harms of prison violence for incarcerated persons and correctional staff, we conducted a multi-strategy study of prison violence in state correctional systems. We worked alongside the Prison Violence Consortium, a collection of researchers and representatives from seven state correctional systems, to work towards developing an evidence-based framework for reducing and preventing violence in correctional facilities nationwide. Participating state correctional systems include the Arizona Department of Corrections, Rehabilitation, and Reentry, Colorado Department of Corrections, Massachusetts Department of Correction, Ohio Department of Rehabilitation and Correction, Oregon Department of Corrections, Pennsylvania Department of Corrections, and the Texas Department of Criminal

Justice. We have analyzed administrative data, collected self-report data from incarcerated persons and staff, and reviewed the correctional policies and practices that guide the training of staff and responses to violent incidents. The scale and scope of our study represents the most comprehensive study on U.S. prison violence, to date.

Through this comprehensive study, we seek to answer several important questions about prison violence:

1. Who are the primary perpetrators of violence in prisons, and how do risks of violence fluctuate throughout individuals' incarceration terms?
2. What are the most prevalent forms of violence in correctional facilities, and what situational factors contribute to violent incidents?
3. What are the root causes of prison violence, and how do violent incidents typically unfold?
4. What are the consequences of prison violence in terms of disciplinary actions, housing unit placements, and post-release recidivism rates?
5. How does exposure to prison violence affect the well-being and daily experiences of both incarcerated individuals and correctional staff?
6. What policies and practices are currently in place to manage and respond to prison violence, and how effective are these strategies?
7. How can we enhance data collection and reporting methods to gain a more accurate and comprehensive understanding of prison violence?
8. What strategies can be implemented to transform organizational culture and shift perceptions surrounding prison violence?

By addressing these questions, we aim to provide the most thorough understanding of prison violence to date, offering evidence-based recommendations for creating safer correctional environments and improving post-release outcomes.

In another Policy Brief entitled, *The Dark Figure of Prison Violence: A Multi-Strategy Approach to Uncovering the Prevalence of Prison Violence*, we evaluated existing data metrics on violence and discussed what they tell us and don't tell us about prison violence. We refrain from such detailed discussions in this Policy Brief, and instead summarize key findings from our study's strategies on the sources and consequences of prison violence and conclude with recommendations for ways to advance safety in prisons.

Strategy 1: Administrative Data on Guilty Violent Infractions

Strategy 1 involved the analysis of administrative data on guilty violent infractions from over 1.4 million individuals incarcerated in six state correctional systems between 2007 and 2020.[1] This strategy aimed to identify patterns of guilty violent infractions across individuals and over time, as well as to determine the influence of demographic and social factors on this form of prison violence. The key findings are summarized below.

The vast majority of guilty violent infractions can be attributed to a small minority of incarcerated individuals. Figure 1 shows that across the six state correctional systems, 10% of the incarcerated population accounted for 52% of all guilty violent infractions. The data further revealed that just under 15% of incarcerated persons incurred at least one guilty violent infraction, while only 7% incurred two or more. Thus, the administrative data on guilty violent infractions reveal that violence is concentrated among a small subset of incarcerated individuals, with the majority of the prison population refraining from violent behavior and involvement in repeated violent incidents.

> **The vast majority of guilty violent infractions can be attributed to a small minority of incarcerated individuals.**

Figure 1: Distribution of Guilty Violent Infractions Among Incarcerated Persons
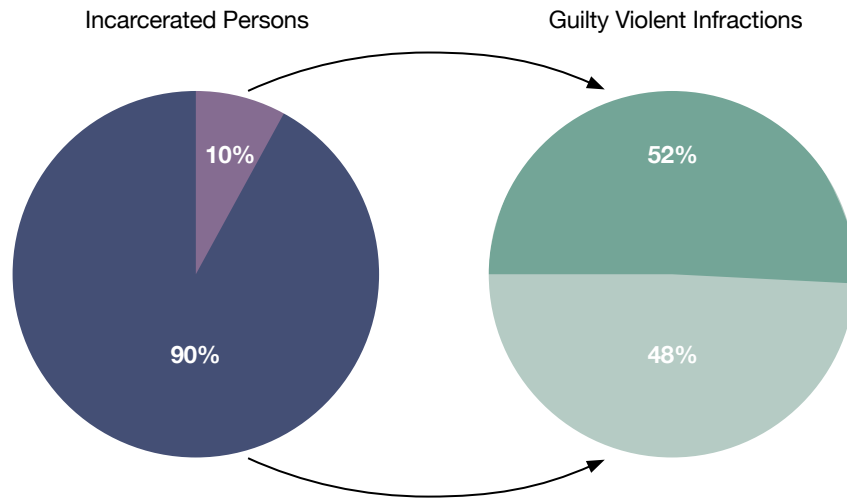
Guilty violent infractions in prison followed a distinct pattern in terms of timing and frequency illustrated in Figure 2. The majority of these incidents occurred shortly after an individual's admission, with 63% of those who committed violent infractions doing so within the first 6-12 months of their sentence. As incarcerated individuals progressed through their prison terms, the risk of committing further guilty violent infractions decreased substantially. However, a small subset of the prison population—fewer than 10% of those who committed a guilty violent infraction—remained at high risk of repeated guilty violent infractions throughout their incarceration.

**Figure 2: Timing of Guilty Violent Infractions**
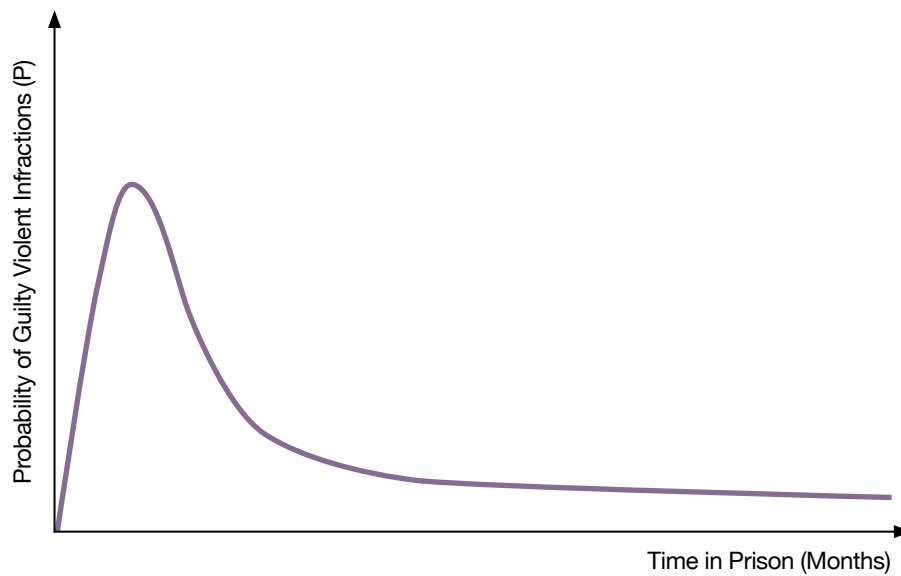
Across prison systems, individuals who incurred guilty violent infractions shared several characteristics that distinguish them from those who did not commit such infractions. These individuals were more likely to have serious mental health treatment needs, lower educational attainment, prison gang involvement, violent criminal histories, longer sentences (4 or more years), and were between the ages of 18-24 at the time of prison admission.

Individuals with multiple guilty violent infractions demanded substantial resources and attention from the correctional system. Throughout their incarceration, these individuals frequently underwent multiple housing unit transfers and were often involved in critical incidents that required staff response. They participated in a wide range of correctional treatment programs addressing literacy, vocational skills, reentry preparation, and behavioral health needs. Many also experienced stints in both short- and long-term restrictive housing.

On average, 37% of incarcerated persons with at least one guilty violent infraction returned to prison within 24 months of release. This rate increased significantly for those with multiple infractions. That is, 43% of individuals who had three or more guilty violent infractions returned to prison within the same 24-month period post-release (see Figure 3).

Figure 3: Recidivism Rates of Individuals with Guilty Violent Infractions

Individuals with At Least One Guilty Violent Infraction	Individuals with Three or More Guilty Violent Infractions
37%	43%
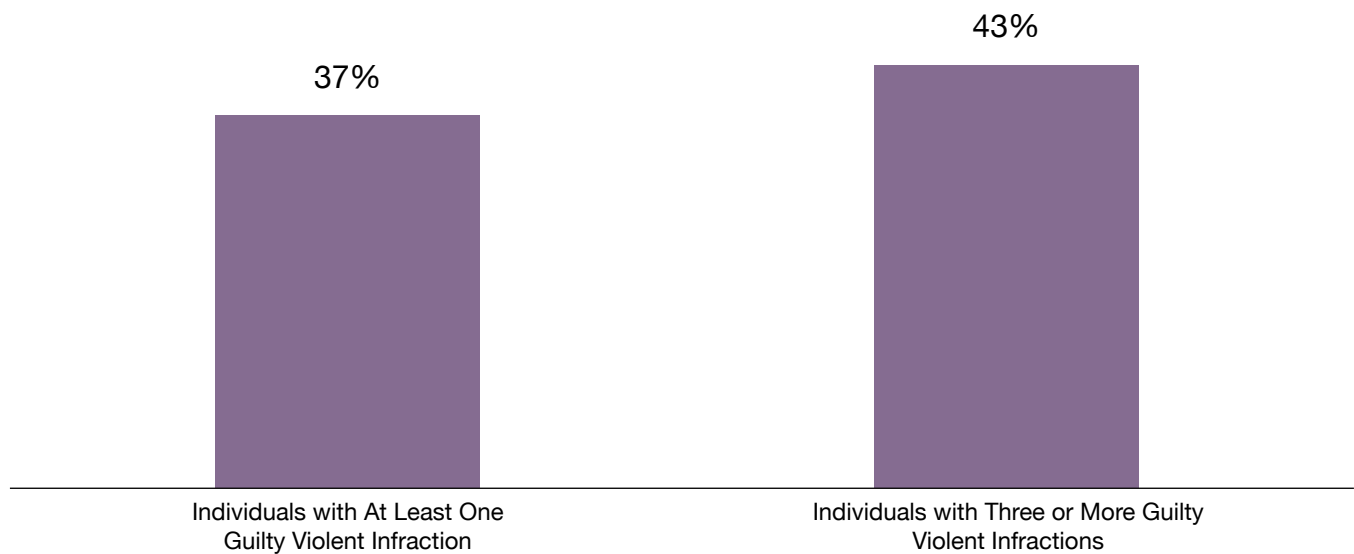
Strategy 2: Incident Reports of Prison Violence

The goal of Strategy 2 was to identify the nature and full circumstances of incidents of violence in prisons documented in administrative records. For the results reported in this brief, a total of 2,201 incident reports compiled by correctional staff were collected and compared across five state correctional systems.[2] The review of incident reports not only offered an opportunity to understand the content of such reports but also provided insights into the timing and location of violent incidents, the frequency of injuries resulting from violence, and the system's responses to these events. Key findings from Strategy 2 are summarized below.

The Context of Prison Violence

The incident reports revealed that 90% of violent incidents occurred in facilities or units for incarcerated men. Approximately 45% of the violence occurred in medium security units, 36% in maximum or close custody units, 10% in minimum security units, and 8% in mixed security units. Violence among incarcerated individuals was more common than violence against correctional staff (71% versus 29%) (see Figure 4).

Figure 4: Distribution of Violence
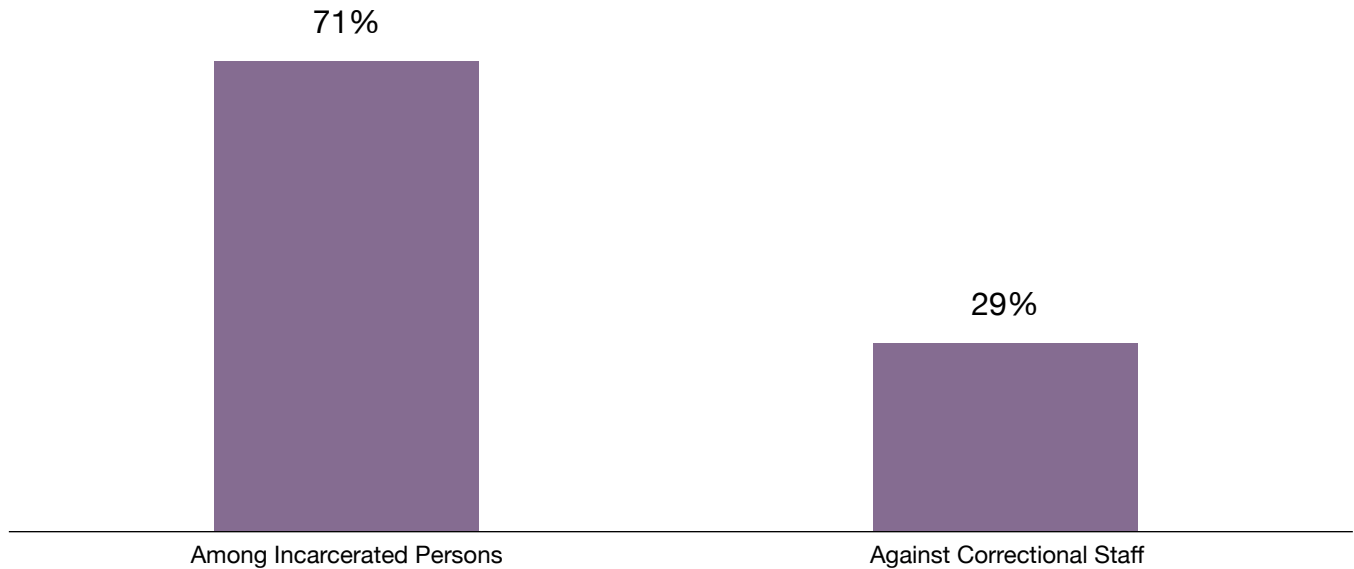
Fights between incarcerated people (38%) were the most common form of violence in prisons, followed by assaults of incarcerated individuals (26%), staff assaults (17%), biohazard incidents (13%), and unwitnessed physical altercations (6%) (see Figure 5).

Figure 5: Distribution of Various Forms of Violence
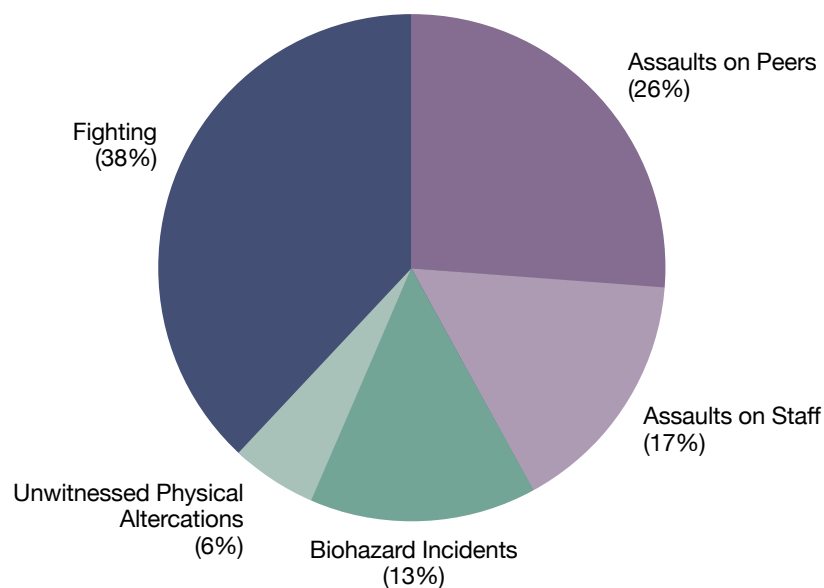
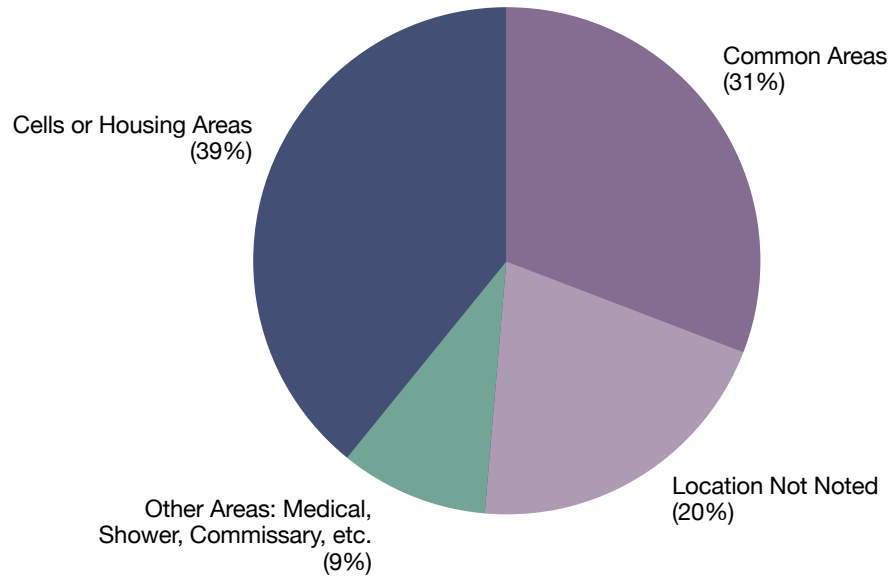The most common location for prison violence was in cells or housing areas (39%), followed by 31% occurring in common areas (e.g., cafeteria, yard, and hallways), and 9% in other locations. Notably, in 20% of the incident reports the location could not be determined (See Figure 6). Violence typically occurred during the day (49%) or in the evening (45%), with only a small fraction of violence occurring overnight (5%).[3]

Figure 6: Distribution of Violence by Locations

Common Areas (31%)

Cells or Housing Areas (39%)

Location Not Noted (20%)

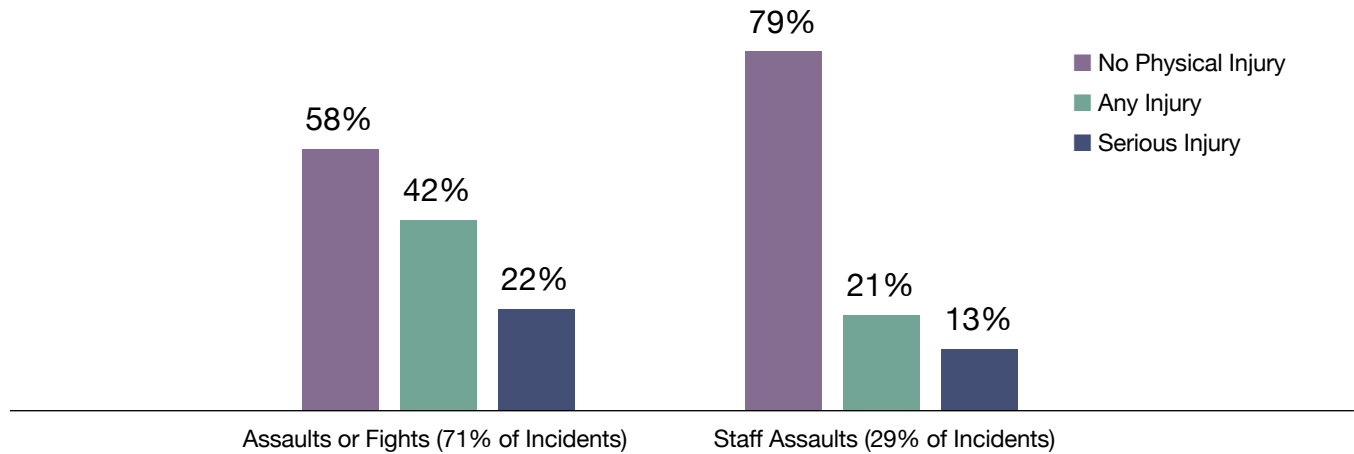Other Areas: Medical, Shower, Commissary, etc. (9%)

Contrary to conventional wisdom, weapons were not often used in violent incidents within prisons, with only 10% of the reports referencing their use. Moreover, when weapons were involved, they were typically not makeshift shanks or sharp objects, but rather objects used for throwing such as locks in socks or food trays. Contraband was also rarely associated with violence, appearing in less than 3% of the incident reports. When contraband was mentioned, it was usually discovered during a search conducted after the violence occurred. In a few instances, a cell search for contraband precipitated the violence.

Descriptions of precipitating events, which could help us understand the reasons for violence, were included in only 25% of the incident reports. In other words, three-quarters of the reports described the violence without providing information on the underlying causes. Provocation was identified as a precipitating factor in just 6% of the reports. Similarly, targets of violence were specified in 61% of the incident reports. For the incidents with unspecified targets, it is unclear whether this lack of information was due to the nature of the incidents or due to omissions in how the reports were written.

Physical injuries were noted in 36% of the incident reports, and serious physical injuries – such as lacerations, head injuries, or other bodily injuries – were reported in 20% of the examined incidents (see specific statistics in Figure 7). While medical staff frequently evaluated the individuals involved in violent incidents (75% of the cases), on-site treatment was recorded in only 16% of the incident reports. Off-site medical services were mentioned in 13% of the reports, with most of these cases involving staff seeking external assessments following biohazard incidents.

> **Physical injuries were noted in 36% of the incident reports, and serious physical injuries – such as lacerations, head injuries, or other bodily injuries – were reported in 20% of the examined incidents.**

Figure 7: Prison Violence Resulting in Injury

Legend:
- No Physical Injury
- Any Injury
- Serious Injury

Assaults or Fights (71% of Incidents): 58%, 42%, 22%
Staff Assaults (29% of Incidents): 79%, 21%, 13%

Key Correlates of Physical Injuries

Serious injuries in violent incidents between incarcerated individuals were more likely to occur among incarcerated men, in incidents taking place in cells rather than common areas, or when weapons were involved. Fights were less likely to result in serious injuries than assaults of incarcerated individuals. Unwitnessed physical altercations, in which just one individual was identified, were more likely to involve serious injury.

Injuries in assault incidents against staff were more likely when the assaulted staff member was a correctional officer, compared to other types of staff, such as medical or clerical personnel.[4]

Responses to Prison Violence

The narratives in the incident reports documented system responses to prison violence, depicting how the violence was stopped and what consequences followed. We found that staff intervened to halt the violence in 58% of the reports. Oftentimes, more than one type of intervention strategy was used: staff physical intervention appeared in 50% of the reports, physical restraints such as handcuffs or zip ties in 43%, the use of chemical agents in 26%, and deployment of a critical incident team in 11% (see Figure 8).

Figure 8: Staff Intervention in Prison Violence

- No Staff Intervention (42%)
- Staff Intervention (58%)
- Physical Intervention (50%)
- Physical Restraints: Handcuffs or Zip Ties (43%)
- Use of chemical Agents (26%)
- Critical Incident Team Deployment (11%)
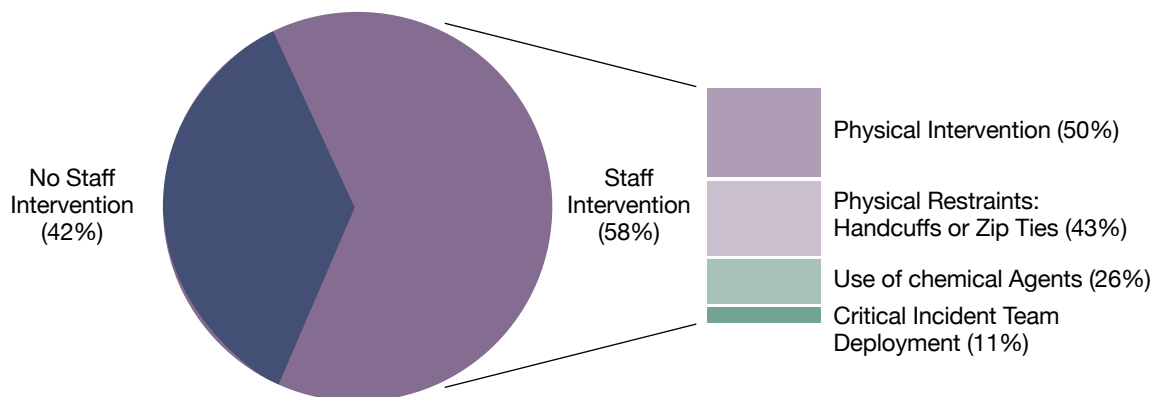
Just over half of the incident reports (51%) mentioned that disciplinary actions (i.e., misconduct tickets) were taken against at least one individual involved in the violence. Sixty-two percent (62%) of the reports mentioned housing movements, with 35% involving segregation and 28% involving transfers to another housing unit. Approximately 7% of the reports mentioned that involved individuals were placed under closer supervision, including medical, mental health, security, or suicide watches.

Key Correlates of Disciplinary Actions

After a further investigation of the disciplinary actions (misconduct) mentioned in incident reports, we found that disciplinary citations were significantly more likely to follow staff assaults than violence between incarcerated individuals. Disciplinary actions were also significantly more likely in male maximum-security facilities than in lower-security male facilities or when the violence occurred in common areas rather than in cells and housing units.

Counterintuitively, disciplinary actions were significantly less likely to be noted when there was an identified target of the violence, when there was only one person identified in the incident report, when a makeshift weapon was used, or when a serious injury occurred. While the reasons for this are speculative, some of the incidents were unwitnessed physical altercations while others may have required further investigation by intelligence officers prior to the issuing of discipline.

Key Correlates of Housing Movements

In addition to disciplinary actions, housing movements frequently follow violence. Although these housing movements were frequently movements to segregation in states that specified, some states did not distinguish movements to segregation from other types of housing movements. Documented housing movements were more likely to follow violence between incarcerated individuals than violence against staff. They were also more likely when there were two people involved in the violence (as opposed to one person or three or more people) or when serious injury occurred.

Housing movements were less likely when there was an identified target of the violence or when a makeshift weapon was used. We again speculate that these incidents may have required further investigation prior to administrative actions.

Strategy 3a: Interviews with Incarcerated Men Directly Impacted by Violence

Strategy 3a involved semi-structured interviews with incarcerated men directly involved in an officially documented incident of physical violence with peers in 2021 across six state correctional systems. Men were randomly sampled from the population of incidents that included both initiators and targets of violence. The primary goal of the interviews was to delve deeply into a focal incident of violence, including the reasons for the violence and its perceived impacts. We report findings from 244 interviews that were completed across six state correctional systems.[5] Select findings from the interviews are summarized below.

Primary Reasons for Prison Violence

Reasons for the violent incident were coded into key themes from interviewees' detailed accounts. There were notable similarities and differences in the drivers of violence across states (see Figure 9). Our findings indicate that, in most states, the two primary drivers of violence are disrespect and issues related to illicit markets or debts (with the exception of Oregon). There is greater variation among other primary reasons for violence across states (e.g., cellmate incompatibility, gang-related issues, strong arming/predatory behavior, sex offender status) due to differences in group norms and administrative policies. Findings emphasize the importance of context in understanding drivers of prison violence.

Figure 9: Primary Reasons for Prison Violence
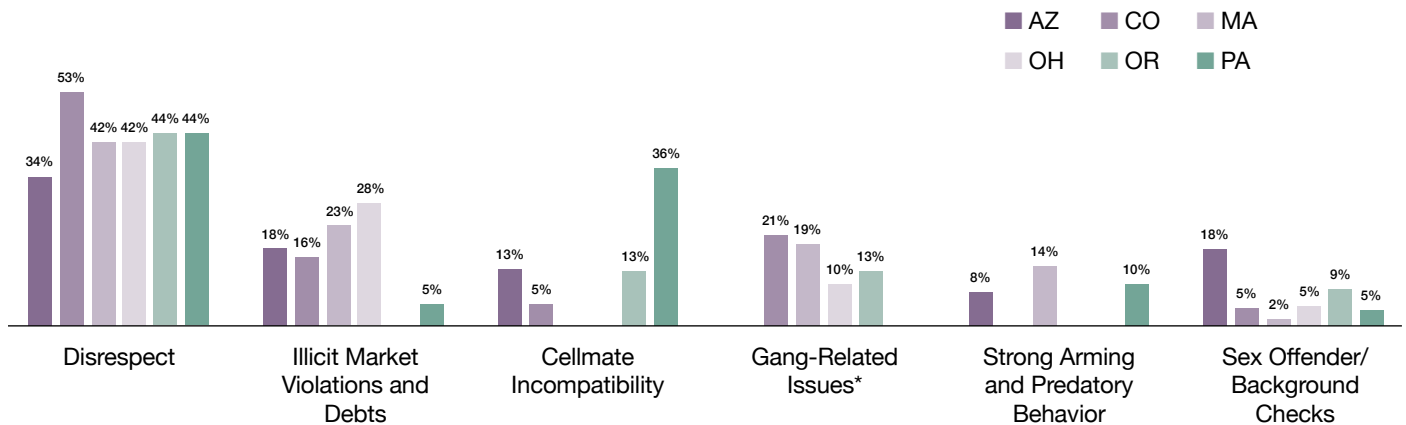
Note: Gang-related issues for Arizona and Pennsylvania were not calculated given the intertwined nature with other reasons for violence, such as disrespect or illicit market and debts.

Disrespect was the most common driver of violence reported by men in the six states. In particular, 53% of men in CO, 44% in OR and PA, 42% in MA and OH, and 34% in AZ identified disrespect as the reason for the violence. In these cases, violence often stemmed from men "talking tough," getting "out of line," slandering one's character, "snitching" accusations, and over the use of racial slurs. Arguments leading to violence routinely occurred while under the influence of drugs or alcohol, commonly involved individuals with mental health needs, arose over personal belongings or disputes during work or recreation, and were fueled by personal "beef" carried over from the streets.

Illicit markets and debts were reported by men as the primary reason for violence in five of the six states. These reasons for violence were identified by 28% of men in OH, 23% in MA, 18% in AZ, 16% in CO, and 5% in PA. In these incidents, violence often stemmed from disputes over illicit market territory or profits, unpaid drug debts, disruptions in market operations after staff were alerted to drugs on the unit, and fights initiated to prompt a transfer to dodge debts. Prison gangs (sometimes referred to as security threat groups) controlled illicit markets to varying degrees across the states.

Cellmate incompatibility was identified as a reason for violence by men in four of the six states. This housing challenge was reported by 36% of men in PA, 13% in AZ and OR, and 5% in CO. These incidents often involved growing tensions over "cell etiquette" (e.g., space, cleanliness, and resources), difficulties living with a cellmate with mental health needs, refusal to live with another person, and self-reported incompatibility due to race or gang affiliation.

Gang-related issues were reported as a driver of violence by men in four of the six states. In particular, 21% of men in CO, 19% in MA, 13% in OR, and 10% in OH identified gang-related matters as reasons for violence. These incidents included inter-gang conflicts, intra-gang differences on principles, and gang "hits" (e.g., for poor standing, dropouts, and switching gangs). In some states, street gang feuds spilled into prison and individuals considered "independents" were targeted by gangs. Gang-related issues were often intertwined with other reasons for violence in Pennsylvania (e.g., illicit market violations and debts) and Arizona (e.g., disrespect, illicit market violations and debts). Notably, in Arizona, organized security threat groups often upheld and enforced behavioral norms in the general population covertly, with ranking members calling "hits" for violations without directly engaging in violence themselves.

Strong arming and predatory behavior were identified as the primary reason for violence by men in three of the six states. This driver of violence was reported by 14% of men in MA, 10% in PA, and 8% in AZ. In these incidents, individuals attempted to "prey" on those perceived as weak to assert dominance or to obtain material resources. Sometimes, men who engaged in this behavior did so with the intention of celling alone or to be transferred to another unit to avoid ongoing conflicts. Some men believed that targeting a "weaker" person would reduce their own risk of harm in these efforts.

Sex offender status was identified as the reason for violence by men in five states. In particular, 9% of men in OR, 5% in CO, OH, and PA, and 2% in MA reported that an individual's sex offender status was the primary reason violence ensued. Specifically, individuals convicted of a sexual offense were targeted in these incidents. In Arizona, 18% of incidents directly stemmed from the cultural norm of informal "background checks" routinely conducted among incarcerated men in this state which included using violence against identified sex offenders.

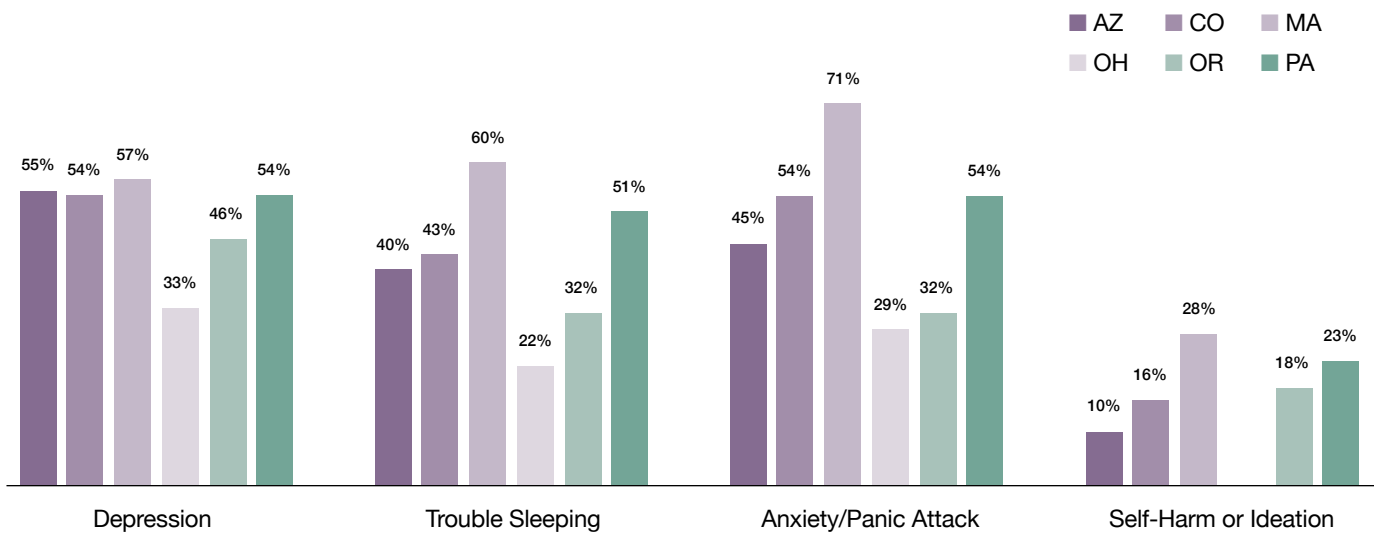## Informal Consequences of Prison Violence: Doing Time and Well-being

Interviews with men revealed violence affected their incarceration experience and wellbeing.

Between 38% and 65% of men across the states indicated that the violent incident changed how they "do their time." Men were first asked whether the violent event changed the way in which they do their time. They were then probed about how their approach changed or why their approach did not change. The open-ended nature of these questions allowed us to glean meaningful insight into the varied consequences of violence in their daily lives. Among those who reported a change, many cited social isolation and withdrawal, especially from programming and recreational activities. Men commonly experienced increased hypervigilance, feelings of vulnerability, and diminished trust in others. Explanations among men who indicated that the incident did not impact how they serve time primarily centered on the normalization of violence with frequent reference to the notion that "this is prison" and prisons are inherently dangerous.

Interviews revealed significant direct impacts on men's mental health due to violence. Anywhere between 33% and 57% of men across states reported depression directly following the violent incident. Men reported trouble sleeping, experienced anxiety or panic attacks, and had thoughts of or engaged in self-harm after the incident. Figure 10 demonstrates the self-reported impacts across states.

> **Between 38% and 65% of men across the states indicated that the violent incident changed how they "do their time."**

Figure 10: Mental Health Challenges After Violence

Legend: AZ, CO, MA, OH, OR, PA

Depression: 55% (AZ), 54% (CO), 57% (MA), 33% (OH), 46% (OR), 54% (PA)
Trouble Sleeping: 40% (AZ), 43% (CO), 60% (MA), 22% (OH), 32% (OR), 51% (PA)
Anxiety/Panic Attack: 45% (AZ), 54% (CO), 71% (MA), 29% (OH), 32% (OR), 54% (PA)
Self-Harm or Ideation: 10% (AZ), 16% (CO), 28% (MA), 18% (OR), 23% (PA)

Strategy 3b: Interviews with Institutional Professionals Directly Impacted by Violence

Strategy 3b included semi-structured interviews with institutional professionals (i.e., correctional staff and behavioral health specialists) who were physically assaulted in 2021. Employees were randomly selected from the population of incident reports that involved staff assaults in six states.[6] The primary goal of these interviews was to glean into the nature and scope of violence as experienced by institutional professionals, the consequences of prison violence on their wellbeing and the profession, and recommendations for improving workplace safety. We report findings from 50 interviews that were completed across the six states. Key findings from Strategy 3b are summarized below.
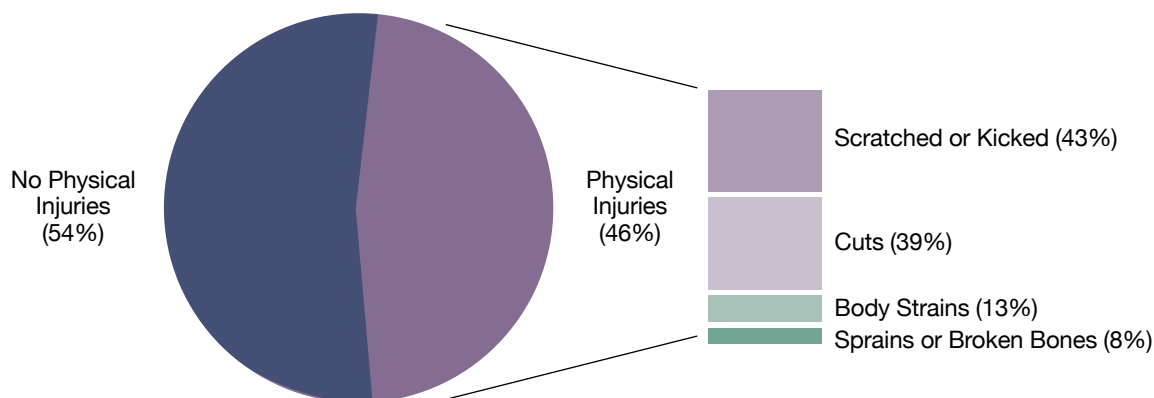
Prevalence of Violence Against Institutional Professionals

Interviews with employees revealed that violence against staff was prevalent. Notably, 82% of employees had experienced an assault prior to the focal incident of violence. More than half of employees (51%) had experienced five or more assault incidents during their tenure. Almost all employees (98%) reported having witnessed fellow staff being assaulted in the past two years.

Injuries resulting from the 2021 physical assaults were common. About 46% of the employees reported sustained injuries, including being scratched or kicked (43%), cuts (39%), body strains (13%), and sprains or broken bones (8%) (see Figure 11). Among employees who sustained injuries, 32% reported being at risk of serious injuries.

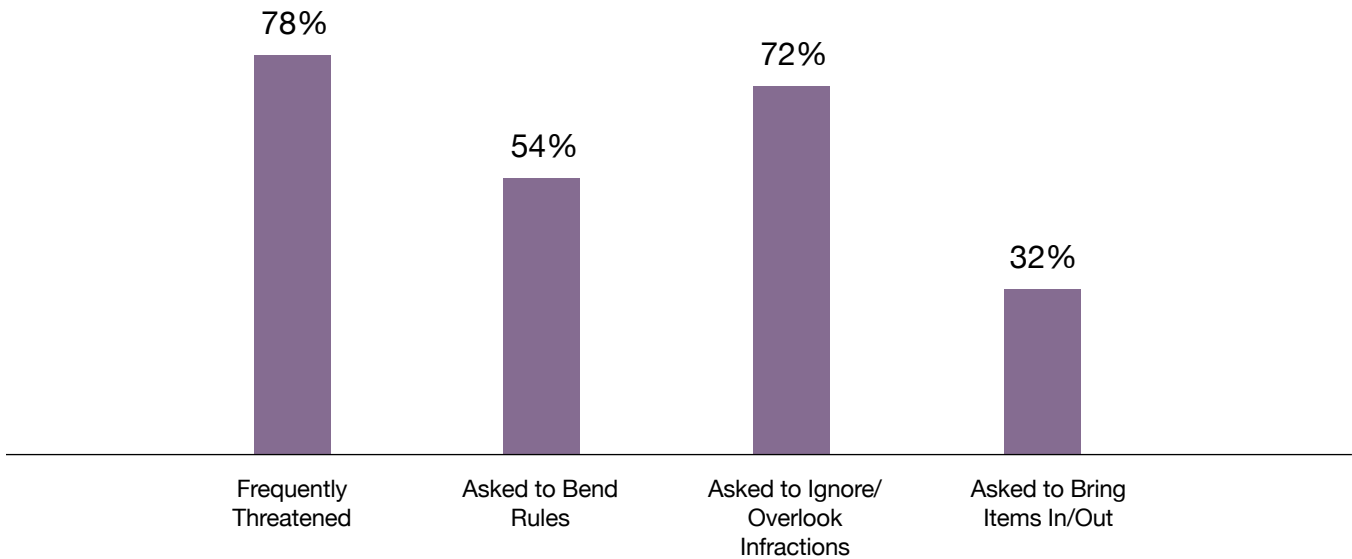> **Almost all employees (98%) reported having witnessed fellow staff being assaulted in the past two years.**

Figure 11: Injuries from Physical Assaults Experienced by Institutional Professionals

No Physical Injuries (54%)

Physical Injuries (46%)

Scratched or Kicked (43%)

Cuts (39%)

Body Strains (13%)

Sprains or Broken Bones (8%)

Threats of Violence Against Institutional Professionals

Employees reported threats of violence and attempts to be compromised by incarcerated persons as common occurrences. As illustrated in Figure 12, over seventy percent of employees reported frequent threats of violence (78%) and being asked by incarcerated persons to ignore or overlook rule infractions (72%). More than half of employees (54%) stated that incarcerated persons often ask them to bend the rules for them and 32% reported that incarcerated persons asked them to bring items into or out of a prison.

Figure 12: Threats of Violence and Attempts to Compromise Institutional Professionals

78%	54%	72%	32%
Frequently Threatened	Asked to Bend Rules	Asked to Ignore/ Overlook Infractions	Asked to Bring Items In/Out

Reasons for Violence Against Institutional Professionals

Employees identified the circumstances that led to the focal physical incident. Individuals identified being direct or indirect targets of prison violence. Employees were likely to be *direct* targets of prison violence when incarcerated persons refused to obey personnel's orders or directives, when incarcerated persons' requests were denied by personnel, when incarcerated persons sought to gain status among their peers by physically assaulting staff, or during inspections or food deliveries.

Employees were likely to be *indirect* target of prison violence when incarcerated persons experienced intoxication, mental health crises, large disturbances, conflicts among cellmates, or when individuals with a sexual offense status were targets of violence.

Consequences of Prison Violence on Institutional Professionals

Prison violence had profound impacts on the corrections workforce. Employees reported high levels of insomnia, anxiety, and depression after being exposed to violence. About 34% of the interviewed employees stated a lack of support from the administration after an assaultive incident against staff. Several work-related stressors were reported by employees, including a lack of departmental support, work-life imbalance, and interpersonal challenges with colleagues.

Strategy 4: Interviews with Institutional Leaders

The goal of Strategy 4 was to document insight from institutional leaders responsible for managing and responding to prison violence. A total of 75 in-depth interviews were conducted with correctional staff (e.g., wardens, staff supervisors, and operations/intelligence officials) and behavioral health specialists from six state correctional systems.[7] The interviews provided knowledge on the effectiveness of correctional policies, challenges in reducing prison violence, and the impacts on the profession and well-being of staff. Key findings from Strategy 4 are provided below.

Policies/Processes in Addressing Violence

Correctional staff and behavioral health specialists across a majority of the states believed that classification, disciplinary policies/procedures, and use of force policies were effective in reducing violence. Institutional leaders indicated that for most of the population, the criteria used in classification assessments accurately assigned individuals to the appropriate custody levels and housing placements. Disciplinary policies were viewed as the mechanism that held individuals accountable for rule violations and helped promote safety. Use of force policies were perceived as necessary and not in odds with de-escalation techniques.

There were mixed opinions on the effectiveness of protective custody and incentives for the incarcerated population as ways to reduce violence. While protective custody was viewed as a necessary form of confinement for safety purpose, some institutional leaders were concerned about the staffing resources consumed by housing movements and the stigma that follows the persons through the system. While incentives (such as "good time" credits) can motivate people to engage in prosocial activities, individuals reported that there are simply not enough incentives to make a real difference in the care and management of the individuals most likely to engage in violence.

Specialized Populations

Correctional staff and behavioral health specialists discussed the complexities of managing specialized populations within correctional facilities. They highlighted the significant challenges that exist between the security and the behavioral health sectors. The root of this tension is in determining whether violence is "a behavioral issue or a mental health issue" and the belief that some incarcerated persons are exploiting systematic loopholes to fulfill personal interests, such as influencing housing placements. Across the states, institutional leaders had varied perceptions on the effectiveness of the management of gang affiliated persons (i.e., security threat groups). Institutional leaders from states in the west shared at length the many challenges associated with the custody of these subgroups and questioned whether their policies to manage them were effective. These divergent perspectives often lead to challenges in developing cohesive, effective strategies for managing specialized populations, such as those with severe mental illness, chronic behavioral issues, or high security risks.

Institutional Resources and Staff Training

Institutional leaders expressed varied perspectives on the effectiveness of technology as a tool for reducing violence. Although correctional staff and behavioral health specialists viewed cameras as an essential tool in promoting safety, the dated nature of cameras, coupled with the blind spots, made them ineffective in preventing violence. In states where body-worn cameras were recently implemented, institutional leaders believed they would reduce use of force incidents and grievances towards staff but not reduce violence among incarcerated individuals. Overwhelmingly, institutional leaders expressed that staff training on handling violent incidents is inconsistent and ineffective. Further, the multi-generational workforce which has received various forms of training (e.g., de-escalation) has led to confusion and tension among staff.

Impacts on Staff Well-Being

Uniformly, correctional staff and behavioral health specialists conveyed not having a work-life balance. Further, they unanimously considered existing mental health resources in their departments as insufficient and expressed a need for additional resources to effectively handle and cope with prison violence. The majority of institutional leaders expressed that exposure to violence has led to paranoia at work and that they have become desensitized to violence. They reported becoming detached from life and their families. Not surprisingly, the current staffing crisis has only compounded work stress. While exposure to and managing violence are expected in correctional professions, inconsistent policies, training, and resources have left the majority of the interviewed institutional leaders feeling confused, powerless, and lacking organizational support.

> **Institutional leaders unanimously considered existing mental health resources in their departments as insufficient and expressed a need for additional resources to effectively handle and cope with prison violence.**

Strategy 5: A Systematic Review of De-Escalation Training

A goal of Strategy 5 was to systematically review training documents and materials, particularly about de-escalation, provided to new correctional staff during onboarding from all seven state correctional systems. Training materials pertinent to handling prison violence were obtained from department representatives between 2022 and 2024. This review led to understanding the purposes of de-escalation strategies, the various components of de-escalation training, and the amount of training time dedicated to de-escalation strategies compared to use of force techniques and weapon proficiency. Key findings from the training review are summarized below.

Purposes of De-Escalation Training

The training materials from the seven state correctional systems uniformly emphasized that de-escalation training is crucial as it aims to mitigate hostility, reduce anger, and avoid conflict by proactively engaging incarcerated persons through pro-social communication skills. Effective communication contributes to a reduction in violence while helping individuals in crisis. Correctional staff are expected to be knowledgeable of their surroundings through situational awareness, identify individuals experiencing a mental health crisis, and use effective communication to resolve most conflicts before they reach the threshold of violence.

## De-Escalation Training Components

The review of de-escalation training explicitly focused on materials that are relevant to communication strategies and supervising/assisting incarcerated persons with mental health needs. While the specific training materials varied, several key components were consistently present across the states. These components included effective communication (e.g., active listening and interpersonal communication), mental health awareness (e.g., emotional intelligence and managing persons with mental health issues), crisis intervention, and conflict resolution.

The goals of these key components were to train correctional staff to be approachable, relatable, and engaged, while remaining mindful and alert of their environment and surroundings. These de-escalation strategies emphasized the importance of making requests instead of demands, speaking with intent, and being considerate of others.

Time Allocated to Training Modules

On average, new correctional recruits received a total of 261 hours of training across the seven states, with a range from a minimum of 160 hours to a maximum of 400 hours. The average amount of time dedicated to de-escalation training was 37 hours, which represents 14% of the total training hours. In comparison, the combined amount of time dedicated to forceful techniques was higher: 16% for the use of force and 13% of weapon proficiency. New recruits spend the majority of their training on other topics such as ethics, professionalism, legal rights, restraints and escorting, and contraband searches (see Figure 13).

Figure 13: Proportion of Time Dedicated to Training Modules
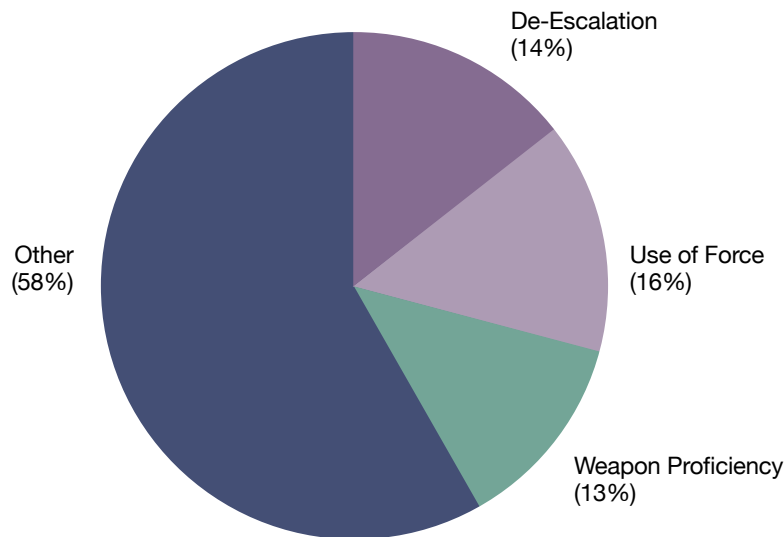
Policy Recommendations

Based on our study, we have identified six solution-focused recommendations to prevent and reduce violence, and more broadly reduce the harm caused by prison violence. We discuss these recommendations below.

Recommendation 1. **Implement detailed and dynamic risk assessment tools to identify high-risk individuals**

Implementing detailed and dynamic risks-and-needs assessment tools would significantly enhance prison safety. These tools should evaluate the risks of institutional violence during the initial classification process and allow for adjustments during re-classification, based on behavioral changes throughout an individual's incarceration.

Our findings reveal a concentrated pattern of violence in that only 15% of incarcerated persons have guilty violent infractions, and a mere 7% are responsible for repeated guilty violent infractions. Most individuals do not incur guilty violent infractions after their first 6-12 months in prison.

While intake characteristics and criminal history factors can help differentiate between individuals who have guilty violent infractions from those who do not, these are not strong predictors of who will commit guilty violent infractions repeatedly. This underscores the need for dynamic risk assessment tools that can better pinpoint individuals prone to become repeat violent rule violators.

To more accurately predict evolving risks of violence, these tools must include time-varying and detailed information on incarcerated persons' housing conditions (e.g., compatibility with cellmates and conditions of confinement), characteristics of incarcerated peer networks, systems of social support, degree of embeddedness in prison gangs, success of mental and behavioral health treatment, and overall prison climate and culture.

By leveraging such comprehensive tools, correctional personnel can more effectively target supervision efforts, tailor case management strategies to individual needs, direct resources towards the small group of individuals responsible for the majority of violent infractions, and avoid expending unnecessary resources on individuals at low risk for prison violence. Such a data-driven approach can optimize resource allocation while enhancing overall prison safety and violence prevention efforts.

Recommendation 2. **Enhance housing decision-making processes**

Housing assignments are one of the most consequential outcomes for incarcerated individuals. Our research revealed that housing individuals with disparate needs (e.g., substance abuse treatment, mental health care) or conflicting social statuses (e.g., gang affiliation, informant status) in the same cell or pod often created volatile situations. In the absence of a responsive housing reassignment strategy, growing tensions, whether between groups or between cell/bunkmates, often escalated into violence. Strategic, data-informed housing policies can prevent and reduce prison violence.

Initial classification and standard reclassification periods alone are insufficient to prevent violence given the dynamic nature of interpersonal and group dynamics within correctional facilities. To address this, we recommend that departments implement responsive protocols that allow for swift adjustments to housing placements as situations evolve. These protocols should emphasize continuous monitoring of emerging conflicts and changes in individual circumstances, push for rapid reassessments following incidents of violence, maintain flexible housing assignments for quick transfers when necessary, and ensure regular communication between frontline staff, intelligence units, and other housing decision-makers.

Housing movement decisions must be informed by real-time intelligence and data that go beyond individual characteristics captured in intake assessments. Life in a unit or pod is dynamic. Incarcerated individuals may experience changes in their gang affiliation, social reputations, mental health, substance use patterns, and involvement in illicit markets.

When making or adjusting cellmate/bunkmate matches, departments should also consider incarcerated persons' preferences when feasible (e.g., social and cultural norms), their history of conflicts with cellmates, involvement in serious incidents including and beyond violence (regardless of guilt), and emerging tensions within the facility.

Furthermore, departments should use specialized (non-restrictive) housing spaces for individuals who are either vulnerable to or pose a threat of violence. These spaces should allow for flexible movement of individuals in or out of these spaces as needed. These spaces should prioritize rehabilitation by providing programs tailored to address the individuals' specific risks and needs. By implementing these dynamic, responsive housing protocols, facilities will be better equipped to maintain safety in the face of shifting interpersonal and group dynamics, ultimately contributing to a more secure and manageable correctional environment.

Recommendation 3. **Develop a coordinated interface between security operations and behavioral health specialists**

Security operations and behavioral health personnel play crucial roles in the prevention and treatment of violence. Consequently, the interface between these two sectors must be highly coordinated, cohesive, and efficient. In our study, we found high levels of mistrust between operations and behavioral health personnel, including perceived inaction when information about the risk of victimization and violence was shared.

To improve safety in prisons, we recommend enhancing coordination through improved communication and information sharing. It is imperative that departments develop protocols that outline parameters for data sharing to prevent and reduce violence. Clear, transparent policies on the vehicles for data sharing across these two sectors, from line staff to supervisors, will improve day to day practice, increase level of coordination, and enhance case management.

While the use of multi-disciplinary teams is a positive step, it alone is insufficient to address the disciplinary walls that exist due to differing orientations on punishment and treatment. Instead, we propose conducting routine, multi-disciplinary meetings that include personnel from operations, correctional health care, intelligence officers, and administration. Such meetings will provide consistent knowledge on a case and alleviate information gaps caused by staff turnover.

Importantly, mental health challenges and gang issues as drivers of violence must be understood as safety *and* health concerns, not one or the other. A greater focus on proactive strategies for the prevention of violence among risky or vulnerable individuals and not strictly on reactive responses to violence will improve practice, treatment, and reduce violence. Improving the coordination between operations and behavioral health personnel has the added benefit of promoting effective communication and consistent information sharing across all correctional personnel.

Recommendation 4. **Provide extensive de-escalation training for correctional personnel to better equip them in managing and preventing prison violence**

Today's multi-generational corrections workforce varies considerably in their training academy experiences, communication and interpersonal skills, and stress coping mechanisms. These differences result in diverse approaches to managing and communicating with the incarcerated population. Despite the importance of use of force tactics and de-escalation methods in the context of violence, we found that new recruits spent more time on firearm use and use of force training than on de-escalation techniques. We encourage departments to allocate more time to de-escalation training by incorporating these strategies into existing training modules. In this manner, de-escalation strategies can be used as a first-response to handling a variety of situations correctional staff are likely to experience on the job.

Our work identified several dimensions that could improve de-escalation training modules. These include having clear de-escalation techniques and protocols for early intervention in potentially violent situations and specialized training for staff in managing high-risk individuals. Our findings indicate that humanizing persons and engaging them directly can be effective in preventing violence, but there are a variety of ways to establish rapport that may be more effective than others.

We encourage correctional systems to review their de-escalation training and seek staff input on its use and effectiveness. Departments should routinely survey staff to determine how frequently they apply de-escalation techniques, the specific de-escalation strategies that appear to be more effective at establishing rapport, and how de-escalation strategies help them navigate correctional supervision and management.

Recommendation 5. **Improve data collection on prison violence**

To promote safety in prisons, correctional systems must collect better data on violence and move beyond the overreliance on disciplinary infraction data. As we outlined in *The Dark Figure of Prison Violence: A Multi-Strategy Approach to Uncovering the Prevalence of Prison Violence*, guilty violent infractions pick up only a small portion of all violence that occurs in prison and most violence is unknown to prison authorities. We recommend the following strategies to address this data gap.

First, we urge departments to improve their incident reports to capture more comprehensive details for each violent event, including the consistent reporting of all individuals involved, the specific location of the incident, the presence of and types of weapons used, details on the nature and severity of violence, and staff responses to the incident. Information of this sort will provide far more insight on the circumstances surrounding violence and aid in investigations and adjudications.

Second, correctional systems should also work towards developing and implementing an "injury tool" to capture detailed information about injuries resulting from prison violence. This tool should be accessible to both operations and medical staff, be completed for each incident of violence, and integrate information about the individuals involved, the location of the incident, the degree of harm suffered, and subsequent staff and medical responses.

By implementing these data collection improvements, correctional systems can gain a more accurate and comprehensive understanding of violence within their facilities. This enhanced knowledge will enable more effective violence prevention strategies, ultimately contributing to safer environments for both incarcerated individuals and staff.

Recommendation 6. **Shift culture on how violence is perceived and addressed**

Preventing and reducing prison violence requires a fundamental shift in organizational culture regarding how violence is perceived and addressed. Our study found high levels of staff desensitization to violence and significant gaps in staff mental health support and counseling. For some incarcerated persons, violence was highly normalized and part of "doing time." Collectively, these perceptions and systemic gaps undermine violence reporting, treatment access, and overall well-being within correctional facilities.

To remedy these issues, we recommend that departments, labor unions, and community organizations work to combat notions of prison violence as allowable and permissible. This will require transparency on the various harms caused by violence and confronting the stigma and shame that come with victimization and violence. We encourage correctional leaders to review their staff wellness programs to ensure they are adequately meeting the needs of staff who routinely are exposed to violence.

Correctional systems must also prioritize the allocation of resources toward managing and rehabilitating violent individuals. Targeted, specialized programs that focus on conflict resolution, emotional regulation, and strategies for coping with prison life will improve individual outcomes, promote safety, and shift organizational culture to a treatment-based model of care.

Further, implementing enhanced reward systems for good behavior among incarcerated persons is crucial. Thes systems should offer more substantial privileges or increased program access for sustained non-violent conduct. Such incentives not only encourage positive behavior but also center interpersonal and professional development, reinforce a culture of non-violence, and contribute to improved organizational culture within correctional facilities.

Conclusion

Our study takes a significant stride towards developing an evidence-based framework for reducing and preventing violence in correctional facilities. We offer these findings on the sources and consequences of prison violence to aid policy makers and correctional administrators as they search for strategies to enhance safety in prisons.

As emphasized at the onset, we situate both the problem of prison violence and its potential solutions within the social-political context of criminal justice policy. This approach recognizes that the harm caused by prison violence is deeply rooted in systemic issues extending beyond facility walls. Our recommendations focus on specific, actionable reforms within correctional facilities. However, we acknowledge that fully addressing prison violence is challenging without also reforming the broader institutional structures of the criminal justice system. While our study provides a foundation for immediate improvements, lasting change will likely require more comprehensive systemic reforms.

Our work aims to shift the paradigm in how prison violence is understood, addressed, and—most critically—prevented. By providing a nuanced, data-driven perspective on this complex issue, we hope to catalyze meaningful changes in policy and practice. The ultimate goal is not just to reduce violence within correctional facilities, but to contribute to a more just, humane, and effective criminal justice system overall.

As we move forward, it is our sincere hope that this research will serve as a foundation for continued study, innovative policy-making, and transformative practices in correctional management. By addressing prison violence comprehensively and contextually, we can work towards creating safer environments that better serve the rehabilitative goals of incarceration and, ultimately, the well-being of our communities.

Footnotes

1 Guilty violent infractions refer to incidents where an incarcerated individual has been found responsible, through the prison's disciplinary process, for engaging in violent behavior while in custody. These infractions typically include actions such as physical assaults on other incarcerated individuals or staff, fighting, and other forms of aggressive conduct that violate prison rules and compromise safety. States included Arizona, Colorado, Ohio, Oregon, Pennsylvania, and Texas. States provided data starting in 2007, 2008, 2010 and 2011.

2 Incident reports are official documents created by correctional staff to record and describe violent events or disturbances that occur within the prison. These reports capture a broader range of violent incidents than guilty violent infractions, as they: (1) document all observed or reported violent events, regardless of whether they result in disciplinary action, (2) provide staff accounts of the incident, including information about those involved, the location, any injuries sustained, and staff responses, and (3) may include events that do not lead to formal disciplinary proceedings or findings of guilt. However, incident reports are still limited to events that come to the attention of correctional staff and may not capture all instances of violence that occur. States included Arizona, Colorado, Massachusetts, Oregon, and Pennsylvania. The research team initially coded 3,162 incidents of violence across seven state systems (see *The Dark Figure of Prison Violence: A Multi-Strategy Approach to Uncovering the Prevalence of Prison Violence* for more details regarding data collection). Data from Ohio and Texas were excluded because their data are not comparable.

3 One state correctional system did not report the time of incident, therefore the analytical sample for the timing of violence is 1,626 reports.

4 Correlations were estimated using logistic regression models. In both sets of regressions, incident level characteristics included in the models accounted for only 18% of the variation in the dependent variable (injury or serious injury).

5 The states include Arizona, Colorado, Massachusetts, Ohio, Oregon, and Pennsylvania. Data collection and analyses in Texas are ongoing.

6 States included Arizona, Colorado, Massachusetts, Ohio, Oregon, and Pennsylvania.

7 States included Arizona, Colorado, Ohio, Oregon, Massachusetts, and Pennsylvania.

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