

Prior health behaviors of newly admitted correctional inmates

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Through effective risking the counselor helps the client deal with his/her environment while incarcerations. The incarceration may be the presenting problem when an inmate comes to a counselor in a correctional setting. However, in many situations, there may be other problems underneath the surface that are impairing the inmate.

The intended therapeutic outcome focuses on the goals set (short and long term) for the client in the correctional facility. The counselor utilizes strategies such as modeling behaviors to demonstrate behaviors. Through this interaction, the client learns how to deal with situations. However, counselors can demonstrate counter-transference. The specific crime the inmate committed may affect the way the counselor feels about the client. Although counselors often deal with their feelings of countertransference, these feelings can affect the outcome of the client. The lack of resources in an incarceration setting may present challenges for the counselors' role in rehabilitating the client. Many incarceration facilities utilize educational and recreational programs in hopes of assisting in the rehabilitation process. Further differentiation of counselors in the criminal justice system includes probation and parole officers. Both of these types of counselors play an important role in managing the client. Probation officers are utilized when the individual has not been sentenced to jail time but to probation. Parole officers are utilized when the individual has been sent to jail and is being released into society. In addition to managing the client, the parole officer assists with the reintegration of the inmate into society.

Article Review

Incarceration facilities are harboring many individuals with mental illnesses.

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Society becomes more accepting of individuals with mental illnesses and treatment methods have increased. This article seeks to assess mental health problems in newly incarcerated individuals. Researchers hypothesize that many of these newly admitted individuals will suffer from mental illnesses. The research was performed in a medium-security correctional facility in Massachusetts. The length of incarceration is approximate: 1/3 1-3 days, 1/3 4-90 days and 1/3 stay more than 91 days but less than two years. The research occurred during a five-month period and assessed inmates upon the third day of their stay. The method utilized by researchers was an interview consisting of 120 open-ended questions. The participants consisted of 1082 men and 116 women age and race varied. The results demonstrated that women were more likely to believe they had mental health/emotional illnesses than men. In addition, results yielded that women are more likely to seek treatment than men for mental health problems. One-sixth of all individuals reported having a physical problem that prevented them from 'normal activities' during the past year. In regards to other the utilization of medical facilities while incarcerated 1/4 of men and 1/2 of women were interested in utilizing these services.

Women were more likely than men to report a sexually transmitted disease. To further support these researchers demonstrated in the findings that women were more likely to share needles (when doing drugs) than men. Researchers hypothesize that the two variables are interrelated. However, 1/3 of women were providing sexual services (prostitution) for financial means. In addition, 3/4 of women participating in the research reported feeling unsafe with their current boyfriend/husband/partner. Half of all

women participating in this assessment reported being physically abused within the past year.

This article further strength the chapters that argue that women are more likely to have different kinds of problems before and during incarceration than men. With the support of the research, women are more likely than men to utilize health (mental and physical) services with incarcerated. The research concluded that individuals that were new incarcerated were more likely to report health problems and lack of medical care before incarceration. Researchers hypothesize the lack of care may have influenced ' risky behaviors' that may have perhaps led them to incarcerations.