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Research Article

Mental Health in The Line of Duty: Psychological Pain, Depression Severity, and Attitudes Toward Seeking Help of Jail Officers

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ABSTRACT

Mental health concerns among jail officers remain understudied despite the psychological demands and occupational stress associated with correctional work. To address this gap, this study examined psychological pain, depression severity, and attitudes toward seeking mental health services among jail officers from the Bureau of Jail Management and Penology–Imus City Jail. Using a correlational research design, data were collected from 79 jail officers through standardized self-report instruments, namely the Psychache Scale, Patient Health Questionnaire-9 (PHQ-9), and Inventory of Attitudes Toward Seeking Mental Health Services. Descriptive and inferential statistical analyses were employed to determine the levels and relationships among the variables. The majority of respondents reported low psychological pain (60.8%), although 39.2% experienced high psychological pain. Depression severity was generally minimal (62.0%), with fatigue and sleep disturbance identified as the most frequently reported symptoms, whereas suicidal ideation was the least reported. Participants also demonstrated a moderate willingness to seek mental health services. Psychological pain was significantly and positively associated with overall help-seeking attitudes ($r_s = .385, p < .001$) and depression severity ($r_s = .554, p < .001$). However, depression severity was not significantly associated with the help-seeking dimensions of psychological openness ($r_s = .204, p < .071$) and help-seeking propensity ($r_s = -.052, p < .650$), although it showed a weak but statistically significant association with indifference to stigma ($r_s = .239, p < .034$). Overall, although most participants reported minimal to low levels of distress, a considerable proportion continued to experience elevated psychological pain. These results underscore the importance of strengthening institutional mental health support systems, occupational stress management initiatives, and workforce resilience programs within correctional settings to promote personnel well-being and sustain effective correctional services.

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Introduction

While jail officers are often thought of as physically strong and emotionally hardy when doing their job, they are the most susceptible group to psychological strain. Jail officers are commonly exposed to many incidents of violence, work-related stressors, and psychological challenges in their work routine. Consequently, exposure to traumatic situations and stressors, such as lengthy hours, intense work pressure, and a heavy duty towards public security, causes occupational stress for jail officers (Canning et al., 2025; Malik, Padder, Kumari & Burhanullah, 2022). If ignored, such occupational risk factors in terms of psychological health could threaten not just the health and welfare of jail officers, but also workforce stability, staff productivity, service delivery efficiency and sustainability. Unfortunately, many jail officers are dealing with their own mental illness without recourse to mental health treatment professionals as they have adapted to their demanding work through the use of emotion-focused and cognitive avoidant coping (Boyd, 2022). Though temporary respite may be provided by these methods, they help to prolong the stigma, the psychological strain, and the need for untimely intervention. These officers are at a high risk of multiple mental illnesses in line with the findings of multiple international studies, including the development of burnout, psychological distress, and suicidal ideation (Easterbrook et al., 2022).

Beyond just general work-related stress and psychological distress, the concept of psychache or psychological pain becomes a more specific way to examine the emotional distress suffered by people. According to Shneidman (1993), psychache was defined as the severe psychological pain caused by unmet psychological needs, and the concept was associated with emotional distress and suicide. In this context, psychological pain does not necessarily mean having a diagnosed mental disorder, but it means the psychological pain experienced by people prior to other psychological disorders. Therefore, examining the psychological pain of

jail officers may provide further information beyond just depression.

Correctional staff in the Philippines faced challenges like overcrowded facilities, understaffing, and long hours, but their psychological well-being remained underreported in academic literature. Mental health became an increasing concern in law enforcement; however, research focusing on jail officers remained very limited, particularly regarding psychological state such as suicidal ideation or death-related issues. Ponce et al. (2023) identified issues related to staffing and the operational environment of jail officers in Ozamiz City. However, they did not identify suicidal ideation and self-harm or death-related issues in participants' mental health. Researches added that jail officers are one of the most understudied groups in the academic literature, which underscores the importance of conducting research that aims to generate preventative strategies and develop lasting support structures and services in jails. They stated that jail officers encounter different stressors which have traditionally been neglected in mental health research.

Psychological pain can play a role in determining how people perceive and react to their need for psychological services. On the other hand, just because an individual experiences psychological distress, it is not necessarily true that the person will seek professional services because of certain attitudes about help-seeking that may have been developed due to stigma, barriers, and organization expectations. Thus, the present study was a response to the urgent need to assess the well-being of jail officers. Suicide attempts among law enforcement professionals, which led to proposals for routine psychological screening (Mallari, 2022; Recuenco, 2021), and which, even without available data, indicate the consequences of unmitigated distress and depression on people's safety, decision-making, and the viability of the organization, serve as a testament to the need to manage mental health risks in correctional facilities. The goal of this study is not to reach a clinical diagnosis or create a finalized intervention

frameworks or modules, but instead, to develop evidence-based understanding that will support further targeted mental health programs and institutional policies, as well as strengthening workforce resilience and long-term sustainability of correctional services. More specifically, this study attempts to accomplish the following: identify psychological pain levels using the Psychache Scale (PAS); evaluate the severity of depression using the Patient Health Questionnaire (PHQ-9); explore mental health help-seeking attitudes using the Inventory of Attitudes Toward Seeking Mental Health Services (IASMHS), which includes psychological openness, help-seeking propensity, stigma indifference, and overall help-seeking attitudes and assess the relationship between the said variables.

From the standpoint of sustainability, correctional services cannot be sustained if the psychological health and well-being of the correctional staff is neglected. In order to retain the operations (i.e. fulfill the mandate of correctional services) we must invest in the mental health and well-being of the correctional staff.

Materials and Methods

The researchers utilized a quantitative method, which is appropriate as it allows the quantification of data and the finding of any trends in answers, as well as the differences in individual respondents (Ghanad, 2023). To achieve this, the researchers adopted descriptive correlational design. This is a non-experimental method used for exploring statistical relationships among two or more variables within a single population (Devi, Lepcha & Basnet, 2023). This design was particularly useful in the study as it aimed to examine the measurable relationships among psychological pain, depression severity, and jail officers' attitudes toward seeking professional psychological help.

Respondents and Sampling

The study collected data from 79 jail officers from the Bureau of Jail Management and Penology (BJMP) - Imus City Jail, Cavite, Philippines, drawn from two jail dormitories; the male and female dorm. To ensure proper

representation, the researchers utilized complete enumeration or total population sampling. This method is a type of purposive non-probability sampling that involves inviting all individuals within a defined population who met the inclusion criteria to participate (Etikan, 2016). As such, the number of respondents was based on the official personnel records provided by the facility administration. This method guaranteed a comprehensive and inclusive dataset reflective of the entire personnel composition at BJMP Imus City Jail.

Research Instruments

The study utilized four research instruments to gather data relevant to the research objectives:

Demographic profile sheet.

A demographic profile sheet was used to collect respondents' sex assigned at birth and length of service. These data were used solely to describe the sample and contextualize the findings.

Psycheache scale (PAS).

The Psychache Scale developed by Holden et al. (2001) is a 13-item self-report instrument designed to measure psychological pain based on Shneidman's (1993) concept of psychache. Responses assess general experiences of psychological pain. The scale has demonstrated excellent internal consistency across studies, with Cronbach's alpha values ranging from .93 to .96 (Campos & Holden, 2020; Zhang, Pang & Zhu, 2022). Local reliability testing also reported a Cronbach's alpha of .93 (Aserios & Dela Cruz, 2015), indicating strong reliability.

Patient health questionnaire-9 (PHQ-9).

The PHQ-9 (Kroenke, Spitzer & Williams, 2001) is a 9-item self-report instrument used to assess the frequency and severity of depressive symptoms over the past two weeks. Items are rated on a 4-point Likert scale ranging from 0 (not at all) to 3 (nearly every day), with total scores ranging from 0 to 27. The PHQ-9 demonstrates strong reliability, with Cronbach's alpha values typically exceeding .80. Local validation among Filipino participants reported an alpha

coefficient of .87 (Ayalon, 2011). The instrument has also shown strong criterion validity across diverse populations.

Inventory of attitudes toward seeking mental health services (IASMHS).

The IASMHS developed by Mackenzie, Knox, Gekoski & Macaulay. (2004) is a 24-item self-report measure assessing attitudes toward seeking professional psychological help. The instrument consists of three subscales: Psychological Openness, Help-Seeking Propensity, and Indifference to Stigma. Previous studies reported strong internal consistency for the overall scale ($\alpha = .87$) and acceptable reliability for subscales ranging from .76 to .82. Local studies also reported satisfactory reliability and construct validity among Filipino populations (Tuliao, Hechanova & Velasquez, 2019).

Data Collection and Analysis

Proper communication with the BJMP Imus City Jail and the BJMP Regional Office Calabarzon was necessary to obtain official permission for the study's conduct. This includes a formal request for the total number of jail officers to determine the feasibility of employing a total enumeration sampling. Data collection was through a hybrid set-up of pen-and-paper and online Google Forms. Regardless of the mode of administration, the respondents received an informed consent form that contains the study's objectives, affirms their rights, and guarantees the anonymity and confidentiality of their data. For the pen-and-paper questionnaires, completed forms were collected directly by the researchers and stored appropriately, but for the online questionnaires, the respondents answered them using Google Forms without any personal identifiers. Both sets of data were only accessible to the researchers and were consolidated for analysis without identifying information. Gathered data were subjected to analysis using both descriptive and inferential statistical methods. Descriptive statistics such as mean, frequency, and percentage were used to summarize the respondents'

scores on the respective scales. For inferential analysis, Spearman's rho correlation was utilized to examine relationships between psychological pain, depression severity, and mental health help-seeking attitudes, since the data do not conform to normality assumptions.

Ethical Consideration

Ethical considerations were carefully observed to safeguard the protection, dignity, and well-being of all respondents during the performance of the study. Participation of respondents was voluntary; respondents were free to refuse and terminate the research at any time without any form of consequences. Before collecting data, informed consent was taken, ensuring that respondents were made aware of the goals and purposes, procedures, possible benefits and risks of taking part in the study, confidentiality, and other rights of respondents. Moreover, all data were handled as required by RA 10173 or the Data Privacy Act of 2012; data and information pertaining to the privacy and interests of the subjects were properly protected, stored, and kept confidential. Information was deleted or destroyed in accordance with the standard retention period, to be shredded for physical data or permanently destroyed for electronic data. Findings of the research will be reported in a true and accurate manner; only relevant results of the study shall be given to the BJMP administration upon request, and these shall be presented in an aggregate form that it would be impossible to identify the specific respondents.

Result and Discussion

Psychological Pain Among Jail Officers

As Table 1 indicates, the respondents' psychological pain are distributed as follows: 48 (60.8%) have low levels of psychological pain, while the other 31 (39.2%) fall in high level category. Although most respondents experienced lower levels of psychological pain, a substantial proportion still reported high levels, indicating that emotional distress remains prevalent among jail officers.

Table 1. Description of respondents' level of psychological pain.

Level	Frequency	Percentage
High	31	39.2%
Low	48	60.8%
Total	79	100%

The findings present a clear picture that the nature of work in the correctional facilities may contribute to psychological suffering of jail officers. The correctional environments are plagued with psychological distress in the form of chronic stress, traumatic exposure, rigid organizational structures, overcrowding, understaffing, and limited resources that may lead to burnout, frustration, hopelessness, and emotional distress (Alipoyo, 2022; McQueen, 2024).

Although the majority of the data showed low or no psychological pain, this report should be viewed with caution. It is likely that the respondents are underreporting distress considering that the correctional culture centers around emotional control, toughness, and resilience. The presence of both high and low psychological pain indicates a high number of emotional experiences of jail officers. According to the definition of the cited sources, high

psychological pain leads to severe emotional distress and signals the union of psychological pain and distress. This necessitates the intervention of jail officers' psychological first aid and mental health care.

Depression Severity Among Jail Officers

The levels of depression severity among the respondents are presented in Table 2. There was no respondent who falls in the severe depression category. There were five respondents (6.3%) who were identified to have moderately severe depression, five (6.3%) who were in the moderate, and 20 (25.3%) in the mild category. In the case of 49 respondents (62.0%), depression was classified as minimal or not present at all. Although a portion of jail officers exhibit some level of depression, the results demonstrated that most respondent jail officers were able to endure the psychological challenges posed by correctional work.

Table 2. Description of respondents' level of depression severity

Level	Frequency	Percentage
Severe	0	0.0%
Moderately Severe	5	6.3%
Moderate	5	6.3%
Mild	20	25.3%
Minimal/ no depression	49	62.0%
Total	79	100%

The absence of a severe depression category may be the result of several factors that can aid respondents' handling of issues within their workplace, including coping techniques, emotional self-regulation and a support system of other officers. It should also be noted, however, that a considerable number of respondents classified symptoms in the mild to moderate depression category, and may indicate that a considerable number of jail officers are emotionally and psychologically distressed. Common symptoms of psychological distress, fatigue, sleep disturbances, and low energy are

frequently associated with work-related stress and the presence of symptoms of depression.

The absence of severe symptoms, including suicidal ideation least reported, the presence of mild symptoms of depression is of concern and should be addressed and not overlooked, as they can lead to the development of more serious mental health problems. The PHQ-9 depression criteria state that people in the moderate and moderately severe depression categories require, at the minimum, counseling, psychotherapy, further monitoring, or the prescription of depression-related medications

(Kroenke, Spitzer & Williams, 2001). The results underline the critical nature of mental health programs aimed at early identification

and provision of mental health resources in correctional facilities.

Attitudes Toward Seeking Mental Health Services

Table 3. Description of respondents' help-seeking attitudes

Level	Frequency	Percentage
<i>Psychological Openness</i>		
High	13	16.5%
Moderate	45	57.0%
Low	21	26.6%
<i>Help-seeking Propensity</i>		
High	19	24.1%
Moderate	35	44.3%
Low	25	31.6%
<i>Indifference to Stigma</i>		
High	19	24.1%
Moderate	38	48.1%
Low	22	27.8%
<i>Overall help-seeking attitude</i>		
High	20	25.3%
Moderate	37	46.8%
Low	22	27.8%

Psychological Openness

Table 3 suggests that most of the respondents (57.0%) displayed moderate levels of psychological openness, indicating an average level of willingness to accept, admit and discuss psychological issues. Furthermore, 26.6% of respondents were located at the psychological openness low level, while high psychological openness was found in only 16.5% of respondents. Given this data, it can be concluded that more jail officers are recognizing the role mental health plays; however, there are still some restrictive factors that prevent them from discussing their emotional challenges or psychological problems.

Coulling, Johnston and Ricciardelli (2024) suggest that moderate psychological openness may be the product of correctional workplace culture, in which emotional toughness, resiliency and self-reliance are highly valued. Jail officers may hold back from opening up, expressing vulnerability or looking for help due to fears about being stigmatized, concerns about the confidentiality of their case, and the potential impact on their career (McQueen, 2024). These findings demonstrate the necessity for psychological well-being interventions that facilitate

meaningful communication, enhance peer support and normalize help-seeking within correctional institutions.

Help-seeking propensity

It is observed that nearly half of the respondents (44.3%) had a moderate level of help-seeking behavior, meaning an average inclination to seek professional help when they experience psychological problems. In comparison, the low category comprised 31.6% of respondents, and the high category comprised 24.1% of respondents. The findings suggest that jail officers may seek assistance primarily when symptoms become disruptive rather than as a preventive measure.

The tendency to moderately seek help might be due to the apprehension of stigma, concerns about loss of confidentiality, the fear of possible negative effects on one's career, and the apprehension of how the use of a mental health service would be viewed by the others (Lane et al., 2021). Like other employees, correctional employees may prefer to use the informal work, family, or friend support systems rather than the formal mental health service systems. In addition, Grupe (2023), states that

the internal and perceived public stigma greatly restrict the likelihood to use mental health support systems. This shows that there is the need for ensuring accessible, private, and supportive mental health services in correctional environments.

Indifference to stigma

Result shows that majority of the respondents (48.1%) exhibit an average level of indifference to stigma, indicating partial resistance to negative perceptions surrounding mental health help-seeking. On the other hand, 27.8% fell under the low category, suggesting that a considerable number of jai; officers remain sensitive and is likely to be highly concerned about stigma and may avoid mental health services because of fear of judgment. However, there was also 24.1% of the respondents who showed a high degree of indifference towards stigma, indicating that some officers are becoming increasingly accepting toward seeking and receiving psychological support.

These findings suggest that stigma remains a significant barrier within correctional culture, where emotional strength and resilience are often emphasized. Previous authors have observed that jail officers are most likely to abstain from seeking assistance because they are afraid they would be perceived as weak or they would be subjected to negative professional consequences (Ricciardelli McKendy, Jamshidi & Carleton, 2021; Wills, Bates, Frost & Monteiro, 2021). Although, the existence of respondents who were highly indifferent to stigma may signal a slow trend towards growing mental health awareness and sensitivity in the jail officer's community.

Overall help-seeking attitude

According to Table 3, almost half of the respondents (46.8%) exhibited a moderate attitude toward seeking mental health services. In comparison, 27.8% reported low attitudes toward mental health help-seeking, and 25.3% reported positive attitudes. Jail officers understand mental health services and their benefits, and seemingly, their overall attitude and help-seeking behavior indicate they are willing to use mental health services, but there seems to be a reluctance to access them.

Correctional culture likely discourages emotional expression and vulnerability, suggesting self-control over emotional discomfort, which is reflected by the overall moderate attitude. As noted by Hakeos et al. (2025), jail officers understand mental health services; however, help-seeking barriers include their occupational expectations and stigma related to their occupation. The respondents with positive attitudes are likely due to their perception of mental health services, while negative attitudes continue to suggest there are barriers to help-seeking, and there is an ongoing need for mental health programs, stigma reduction programs, and supportive structures and environments within correctional facilities.

Correlation between psychological pain, depression severity and help-seeking attitudes

The test for normality of data using Shapiro-Wilk was performed on the data, and the computed p-value of all domains have a p-value less than .05, which means the scores were not normally distributed; hence, the parametric test of relationship, particularly Spearman's rho correlation was used to determine the relationship. Results are as follows:

Table 4. Test of relationship between psychological pain and the dimensions of help-seeking attitudes of the respondents

Psychological Pain	Spearman Rho Correlation	df	P-value	Significance
Psychological openness	0.373***	77	< .001	Significant
Help-seeking propensity	0.171	77	.132	Not significant
Indifference to stigma	0.440***	77	< .001	Significant
Overall	0.385***	77	< .001	Significant

Note. * $p < .05$, ** $p < .01$, *** $p < .001$ = reject null hypothesis. The strength of association for Spearman's rho (ρ) was interpreted as follows: 0.00–0.19 = very weak, 0.20–0.39 = weak, 0.40–0.59 = moderate, 0.60–0.79 = strong, and 0.80–1.00 = very strong correlation.

Results in Table 4 showed a significant positive relationship between psychological pain and psychological openness ($rs = 0.373$, $p < .001$), indicating that higher psychological pain was associated with greater willingness to acknowledge psychological concerns. A significant positive relationship was also found between psychological pain and indifference to stigma ($rs = 0.440$, $p < .001$), suggesting that respondents experiencing greater psychological pain were less concerned about stigma related to help-seeking. Similarly, psychological pain was significantly associated with overall help-seeking attitudes ($rs = 0.385$, $p < .001$). However, no significant relationship was found between psychological pain and help-seeking propensity ($rs = 0.171$, $p = .132$), implying that although individuals may acknowledge their distress and become less concerned about stigma, this does not necessarily translate into an actual willingness and might still be unlikely to seek help themselves.

The results suggest that as people become more cognizant of their psychological pain and

the emotional suffering it induces, they may care less about the potential stigma of help-seeking behavior, as observed by Mee and Bunney (2011). The significant relationship between psychological pain and psychological openness, as well as indifference to stigma, supports the idea that individuals experiencing distress may develop more favorable attitudes toward mental health help-seeking. Even so, the positive but non-significant correlation between psychological pain and help-seeking propensity suggests that experiencing psychological pain does not necessarily translate into a greater inclination to seek professional help, indicating that jail officers may continue to experience barriers to seeking assistance. Lane et al. (2021) and Grupe (2023) argue that mental health help should aim to close the systemic and cultural gaps that keep people from seeking professional psychological support by incorporating stigma reduction, and sensitization of mental health discomfort efforts into their programs.

Table 5. Test of relationship between psychological pain and depression severity of the respondents

Psychological Pain	Spearman Rho Correlation	df	P-value	Significance
Depression Severity	0.554***	77	< .001	Significant

Note. * $p < .05$, ** $p < .01$, *** $p < .001$ = reject null hypothesis. The strength of association for Spearman's rho (ρ) was interpreted as follows: 0.00–0.19 = very weak, 0.20–0.39 = weak, 0.40–0.59 = moderate, 0.60–0.79 = strong, and 0.80–1.00 = very strong correlation.

Table 5 shows that psychological pain had a moderate positive correlation with depression severity ($rs = 0.554$, $p < .001$). The strong correlation confirms that psychological pain is a core component of depressive experience in the study sample. The link suggests that psychological pain may be a more sensitive early indicator of depressive risk than traditional depressive symptoms. This coincides with Shneidman's model: psychache precedes overt depression and suicidality.

This finding supports previous literature suggesting that psychological pain is closely linked with depressive symptoms and emotional suffering (Mee & Bunney, 2011). The stressful and emotionally demanding nature of correctional work, including repeated

exposure to traumatic events and operational pressures, may contribute to both psychological pain and depressive symptoms (Alipoyo, 2022; Resurreccion, 2024). Institution should incorporate psychache screening as an early detection tool. Officers showing high levels of psychological pain with only low scores on depression tests might still be in the early phases of depression. This setup provides a key opportunity for intervention well before the symptoms really build up. Therefore, these findings highlight the importance of addressing mental health concerns such as psychological pain early, as early assessment and intervention may also help lessen or shine light on the jail officers' depression severity.

Table 6. Test of relationship between depression severity and the dimensions of help-seeking attitudes of the respondents

Depression Severity	Spearman Rho Correlation	df	P-value	Significance
Psychological openness	0.204	77	.071	Not significant
Help-seeking propensity	-0.052	77	.650	Not significant
Indifference to stigma	0.239*	77	< .034	Significant
Overall	0.140	77	.218	Not significant

Note. * $p < .05$, ** $p < .01$, *** $p < .001$ = reject null hypothesis. The strength of association for Spearman's rho (ρ) was interpreted as follows: 0.00–0.19 = very weak, 0.20–0.39 = weak, 0.40–0.59 = moderate, 0.60–0.79 = strong, and 0.80–1.00 = very strong correlation.

Table 6 results indicated that depression severity showed no statistically significant association with psychological openness ($rs = 0.204$, $p = .071$), help-seeking propensity ($rs = -0.052$, $p = .650$), and overall help-seeking attitudes ($rs = 0.140$, $p = .218$). Depression severity was associated with indifference to stigma ($rs = 0.239$, $p < .034$) having a weak positive association.

The results suggest that depression severity by itself does not necessarily increase willingness to seek professional help. Emotional fatigue, withdrawal, low motivation, and reduced energy associated with depressive symptoms may make it difficult for individuals experiencing greater psychological difficulties to initiate or sustain help-seeking behaviors (American Psychiatric Association, 2022). In this sense, the absence of a significant association between depression severity and overall help-seeking attitudes may indicate that experiencing depressive symptoms does not automatically translate into readiness to seek professional assistance. This may be particularly relevant in an institutional work environment where emotional control, toughness, self-reliance, and the expectation to remain psychologically strong may discourage the expression of vulnerability. Thus, even when jail officers experience depressive symptoms, emotional withdrawal and reduced motivation may coexist with occupational expectations that favor managing difficulties independently rather than seeking formal psychological assistance.

Nevertheless, respondents with higher depression severity appeared slightly less concerned about stigma related to mental health services, as indicated by the weak positive association with indifference to stigma ($rs =$

0.239, $p < .034$). Despite this, mental health stigma remains a relevant concern for jail officers in correctional services, as fear of judgment and negative perceptions from colleagues, together with workplace-related barriers, may continue to influence help-seeking behavior (Wills, Bates, Frost & Monteiro, 2021). The findings therefore suggest that reducing stigma alone may not be sufficient to increase help-seeking; interventions should also address motivation, accessibility, confidentiality, and the organizational expectations surrounding mental health support.

Implications for mental health and workforce sustainability

Correctional work operates in a stressful work environment, and lack of adequate resources meant to relieve stress might result in burnout, problems with job performance, absenteeism, and employee turnover. Therefore, the researchers suggest implementing various mental health programs such as routine screenings, psychoeducation campaigns, stress-reduction initiatives, and peer support programs in jail facilities, as these interventions can promote early detection of psychological problems and encourage correctional employees to address their mental health needs appropriately.

The application of peer-led psychological first aid can provide a practical low-cost solution, complementing the use of various resources that are already available. Specifically trained jail officers would be able to spot the signs of psychological distress, respond to them appropriately, and help get a referral if professional assessment or intervention is needed. The method can serve as an easily accessible

first response to the problem in elimination of barriers created by stigma and unwillingness to contact professional mental health services. It is important to note that peer support should complement rather than replace a professional approach.

Prison institutions can further strengthen existing efforts in mental health promotion by providing brief mental health education, stress management programs, and convenient referral procedures and integrating these efforts into existing development or organizational activities. All initiatives may be implemented gradually depending on available resources in prisons. Efforts targeting employees' mental health and anti-stigma initiatives together with peer support are needed in order to create an environment that would foster positive attitude towards help-seeking initiatives among jail officers.

Conclusion

The results of the present research indicate that correctional authorities need to make improvements to the existing mental health services available to jail officers. Although most respondents reported experiencing low levels of stress, a substantial proportion reported experiencing a considerable amount of psychological distress. This may have led to a deterioration in occupational performance, inability to control emotions, and low job functioning. The moderate levels of help-seeking behaviors exhibited by jail officers may have been due to the influence of stigma, social norms regarding the need to be strong, and fears that accessing help would breach confidentiality.

The findings further showed that psychological pain was significantly and positively associated with psychological openness, indifference to stigma, overall help-seeking attitudes, and depression severity. In contrast, depression severity was not significantly associated with psychological openness, help-seeking propensity, or overall help-seeking attitudes, although it showed a weak positive association with indifference to stigma. These findings suggest that experiencing psychological distress does not necessarily translate into a greater willingness to seek professional mental health support.

Overall, the findings highlight the importance of recognizing psychological pain and depressive symptoms among jail officers while also considering the barriers that may influence their willingness to access mental health support.

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Declaration of competing interest

The authors declare that there are no competing interests for any authors.

The main findings (novelty) and why they are important and useful:

This study focused on the relationship between psychological pain, depression severity and the attitudes towards mental health help-seeking of jail officers assigned to the Bureau of Jail Management and Penology (BJMP) in Imus City, Cavite. This study is novel in that it simultaneously explored the following variables in relation to jail officers, an underrepresented population in mental health research in the Philippine jail setting. Jail officers work in a stressful, violent environment that is also overcrowded and highly demanding environments that places greater risk for psychological problems. Despite these risks, there is a considerable knowledge gap regarding the mental health of jail officers and the services that they have available to them and their professional mental health needs, as well as their attitudes toward seeking mental health care.

The result of this study is of great significance because it demonstrates that many jail officers report feelings of psychological pain and depression, yet, in many cases, they are hindered from seeking help due to negative mental health stigma and the need to suppress their feelings due to the prevailing

organizational culture. This research identifies significant relationships among psychological pain and depression severity and various subscales of help-seeking attitudes, and that psychological pain was significantly associated with psychological help-seeking attitudes. This research has significant value to formulate mental health programs and other psychological interventions and also provide psychological monitoring and countermeasure systems to help reduce stigma in correctional systems. This is also significant for developing strategies to enhance the sustainability of the jail workforce, improve employee effectiveness, and increase the longevity of jail service delivery, and it has relevance for mental health providers, public policies, jail administrators, and other mental health service providers in the field.

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