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2023

## **Life Skills intervention for Formerly Incarcerated Individuals at Maricopa Reentry Center**

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## Background

- ❖ Greater than 2 million individuals are currently incarcerated in the United States
- ❖ Others will have community corrections status or may enter into a community reentry center.
  - Ensure the individuals have the tools and knowledge they need to be successful upon community reentry with the goal to reduce recidivism. Without intervention, more than 50% of those released will be rearrested and this is especially true for those with drug related offences

### Risk Factors and Health Disparities

- ❖ Risk factors and health disparities must be considered including the environmental context, social determinants of health, unique demographics, physical and mental health, and substance use.

### Community Reentry

- ❖ When addressing community reentry stages, health concerns, access to resources, family connections and social relationships, maladaptive cognitive beliefs, and self-efficacy should be addressed, among other topics
- ❖ Rather than correct undesirable behaviors, occupational therapists should provide tools so that they can make their own, adaptive, decisions.

## Program Purpose

### Community Partner – Maricopa Reentry Center (MRC)

- ❖ The goal of MRC is to facilitate a successful community transition after a period of incarceration.
- ❖ MRC provides substance abuse treatment, cognitive restructuring classes, employment assistance, life skills classes, and housing as part of a 21 or 90 day program for individuals in technical violation of supervised release or who need more structure to be successful

### Purpose

- ❖ Add to repertoire of current programming to increase successful reentry

### Participants

- ❖ Men residing at MRC as a part of their daily classes in groups of 6-24

## Program Development Process

- ❖ This **Life Skills Program** was created based on literature and site-based needs. This program was adapted for the 21-day program group.

Topic	Topic
1 Introduction and cognitive distortions	7 Navigating healthcare
2 Coping and stress management	8 Planning for the future
3 Interpersonal relationship building	9 Choosing meaningful and safe occupations
4 Formal language and conveying appropriate messages	10 Job selection and preparation
5 Nutrition	11 Job maintenance
6 Physical health	12 Money management

## Guiding Theory

### Model of Human Occupation (Kielhofner & Burke, 190)

- ❖ This model was selected because of its focus on decision making and motivation, as this would, ideally, help the residents feel empowered and motivated to make adaptive and safe choices

### Cognitive Behavioral Model (Beck 1991)

- ❖ This model was selected for the focus on addressing maladaptive thought patterns to help develop and strengthen adaptive thoughts and behaviors

## Program Outcomes

### Life Skills Program Daily Survey (McMay & Contronea, 2015)

- ❖ Assessed resident perception of quantity and quality of information presented in order to evaluate perceived effectiveness and benefit of the program
- ❖ 573 surveys were collected across 41 sessions

### Likert scale questions

- ❖ Residents rated that they learned “quiet a bit,” the amount and type of information was “more than expected,” “most of it” would apply to their daily lives, their overall session rating was good, and they “probably would recommend” the session to a friend

### Short Answer Responses

#### Benefits and takeaways:

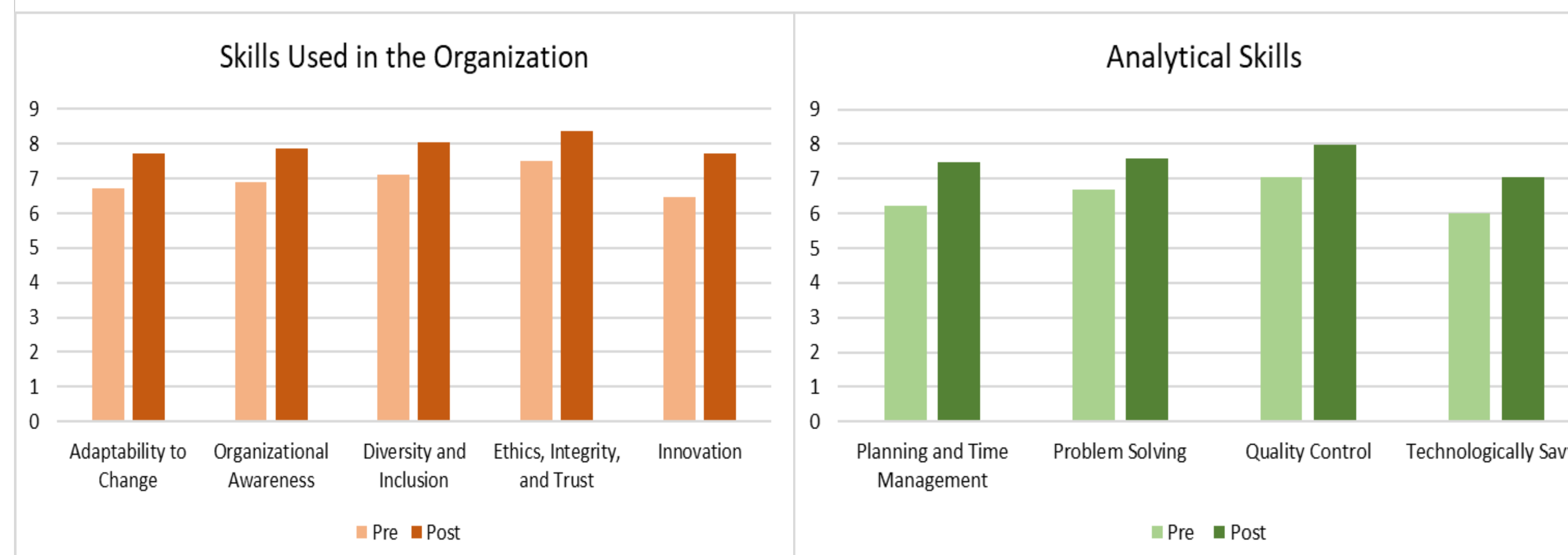
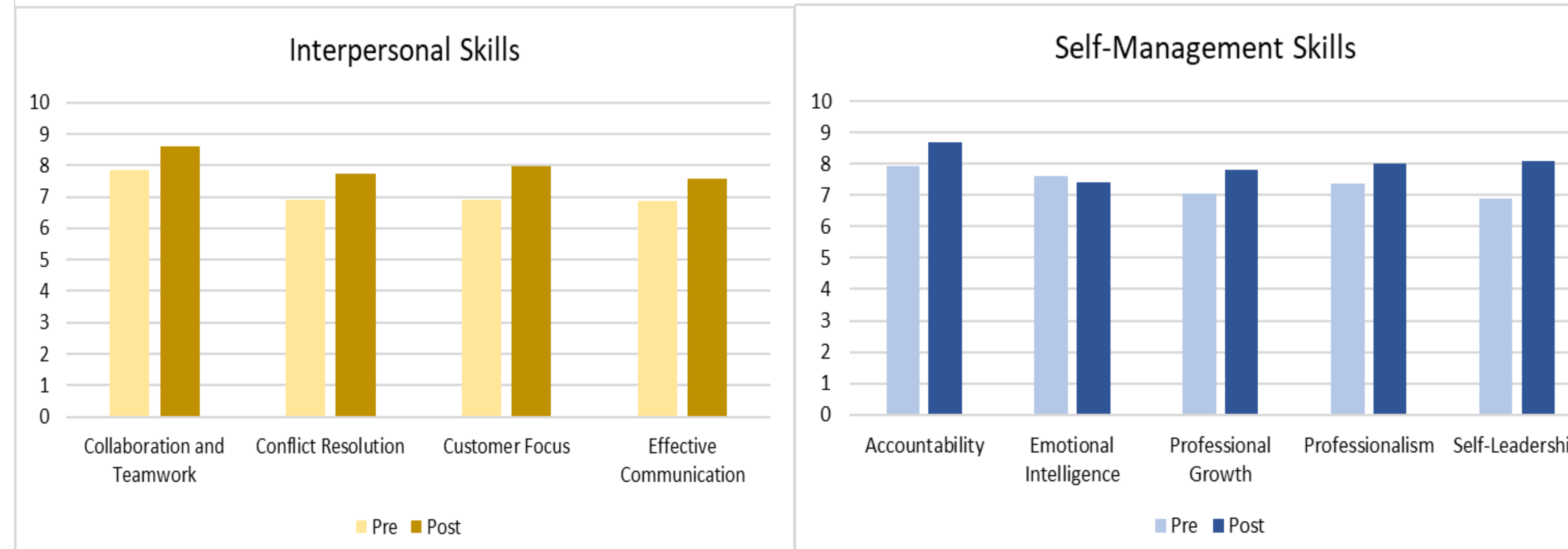
- ❖ Expressing myself positively
- ❖ Cognitive distortions
- ❖ Respecting boundaries
- ❖ Listening to our bodies needs

#### Room for improvement

- ❖ Parenting styles and discipline
- ❖ Co-dependent relationships
- ❖ Nothing

### Employee Self-Assessment Tool (County of San Mateo, n.d)

- ❖ This self-assessment was completed by the residents on their first and last day of Life Skill Program involvement in order to gather information about resident self evaluation of various hard and soft skills and evaluate the influence of the program over time.



### Clinical Observation

- ❖ The capstone student completed informal clinical observation in addition to formal measures
- ❖ This was valuable for rapport building and therapeutic use of self especially when addressing cognitive distortions, increasing mutual respect and participation, and to better gauge needs of the groups including various group dynamics
- ❖ Resident quotes:
  - “It is nice to learn about topics other than my substance use”
  - “We can truly tell that you care about us and our success”
  - “We really enjoy having someone who we know sees us as humans first rather than criminals first”

## Discussion

### Life Skills Program Daily Survey

- ❖ Residents report sufficient knowledge and tools were provided
  - ❖ Allowed for program improvement for increased benefit and satisfaction
- ### Employee Self-Assessment Tool
- ❖ The Life Skills Program likely assisted in skill development and self-reflection – all areas significantly increased except for emotional intelligence

### Clinical Observation

- ❖ Clinical observation was beneficial as it added on to information gathered in the formal measures. This can even help negate some of the measure limitations

### Limitations

- ❖ **Challenges with research:** There are strict guidelines for research to ensure their protection. Although needed, this can make finding and completing research challenging
- ❖ **Low census:** Upon capstone initiation, resident census was lower than expected
- ❖ **Variation in resident needs:** All residents are in different stages of their recovery and life
- ❖ **Reliance on community partners:** Community reentry centers often rely on support from community partners. This is variable and affected by the COVID-19 pandemic
- ❖ **Challenges with outcome measures:** Residents may change rating based on the setting, literacy may be insufficient for written surveys, the questions may not relate to everyone, residents are in different stages of their community reentry and recovery, self-perception and actual behavior may not align, many experience withdrawal upon program entry, residents participate in other programs, residents attended different Life Skills Program Sessions

## Impact

- ❖ Although there are limitations, residents reported an overall program benefit.
- ❖ The resources available to the residents at MRC increased

### Implications for Occupational Therapy

- ❖ OT is beneficial in this setting, especially when considering motivation, willingness to participate and the ability to engage in and apply prosocial and adaptive skills.
- ❖ OT increases the practice and availability of rehabilitative approaches to correctional facilities, rather than a purely punitive approach
- ❖ In the future, it is important to continue to explore and establish the scope of OT practice within these settings, especially in regards to evidence-based approaches to increase successful outcomes.

## References

References available upon request. Correspondences may be addressed to Dalenna Bellum at [sa204166@atsu.edu](mailto:sa204166@atsu.edu) or [dalennaot@gmail.com](mailto:dalennaot@gmail.com)

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