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A Comparison of Populations: Formerly Incarcerated Men with Substance Use Disorder and Adolescent Psychiatric Patients

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Introduction

- Statistics published by the Bureau of Justice Statistics (BJS) in 2020 revealed the United States incarcerated an average of 431 persons per 100,000 across all 50 states. Arizona was among the states with the some of the highest rates at 559 per 100,000 (BJS, 2020).
- Additionally, studies show the US has extreme recidivism rates: 83% of prisoners released are expected to return to prison within 9 years (NIJ, 2019).
- In 2017, the BJS found 26% of jail inmates and 14% of prisoners met the threshold for serious psychological distress within 30 days prior to arrest, with one-third of those reporting mental health challenges being diagnosed with major depressive disorder.
- Occupational therapy mental health literature has largely focused on adult and pediatric populations, leaving adolescent mental health lacking in research.
- A systematic review (Pyle et al., 2016) found incarcerated and at-risk youth often demonstrate challenges related to mental health, psychological issues, emotional-behavioral and social challenges, intellectual development, academic achievement, victimization history, personality, and substance use.
- Recidivism risk factors:** age, antisocial history, family criminality, family rearing, gender, antisocial personality scales, criminogenic needs, personal distress, social achievement, substance abuse, risk scales, lack of meaningful employment, unstable housing
- Aims of the project**
 - Equip Maricopa Reentry Center (MRC) residents with life skills necessary for successful reentry.
 - Utilize knowledge gained at MRC to teach life skills to adolescents patients at St. Luke's Behavioral Center (SLBC).

Program Design

- A dual program based on needs identified: (a) within the literature, (b) by the reentry facility staff, and (c) by residents of the reentry facility.
 - The intrapersonal skills program focused on life skills needed for successful reentry and was implemented 2x per week for 1 hour sessions.
 - The social skills program focused on skills necessary for building and maintaining prosocial relationships and was implemented 2x per week for 1.5 hour sessions.
 - Please see Justine Gonzales's poster presentation for a breakdown of the social skills program design.
- The program at SLBC required significant changes in material delivery.
 - Focused on utilizing games and activities to deliver content.
 - Games were both premade and custom crafted based on the topics of the MRC program.
 - Intrapersonal skills program was provided on 2 units once per day, 5 days a week.
 - Social skills program was provided on one unit once per day, 5 days a week to patients left on the unit while patients with privileges engaged in Activity Therapy's off-unit group.

INTRAPERSONAL SKILLS PROGRAM	
Description	
<ul style="list-style-type: none"> Canadian Model of Occupational Performance and Engagement (CMOP-E) model Based on findings from Turpin and Shier (2017) Participants: All residents/patients Daily Program Surveys (MRC only) 	
Week	Session Topics
1	<ul style="list-style-type: none"> Self-awareness Emotional intelligence Cognitive distortions and methods to correct those distortions
2	<ul style="list-style-type: none"> Coping skills Leisure resources, interest checklist Stress and effects on body Meditation, guided imagery, journaling
3	<ul style="list-style-type: none"> Self-worth, self-esteem Self-care Strengths exploration
4	<ul style="list-style-type: none"> Outlook Re-framing negative self-talk Positive affirmations
5	<ul style="list-style-type: none"> Self-determination Balanced Lifestyle Plan Vision boards

Methods

- Setting 1:** MRC is a minimum-security facility run by the Arizona Department of Corrections (AZDOC) whose aim is to reduce recidivism by providing programs to address criminal thinking/behavior and addiction.
- Participants 1:** Formerly incarcerated men, ages 18 and older, struggling with chemical dependency and enrolled in MRC's 90-day Intensive Treatment with Housing (ITH) program.
- Setting 2:** SLBC is a mental and behavioral health facility offering inpatient and outpatient services to adults, children, and adolescents in need of psychiatric and chemical dependency support.
- Participants 2:** Male and female adolescents, ages 13-17, referred for inpatient services due to mental or behavioral health crises.

Results

- Maricopa Reentry Center:**
 - "I hear nothing but good things from the residents. I want you to know we all think you are doing an excellent job" (Staff correspondence).
 - "This was the piece of the puzzle I was missing" (Resident correspondence).
 - Many residents enjoyed meditation and some asked for guidance on starting their individual practice.
 - Residents were unaware of how to get involved in prosocial leisure activities.
 - Residents hated the term 'homework.' Some residents felt overwhelmed by the amount of material and programming required of them while others were bored and felt there was too much 'down time.'
 - It was difficult to build rapport with this population, but once rapport was established, the residents were friendlier and more open to the material.
 - Residents often sought ways to use their new skills and at times used them inappropriately.
 - It was challenging to obtain a sufficient level of detail in all of the course material.
- St. Luke's Behavioral Center:**
 - Many of the adolescent patients at SLBC had a history of substance use and misuse.
 - Several patients had contact with juvenile corrections in the past or were in juvenile custody at time of admission.
 - The program required a change in delivery, but maintained the same topics.
 - "The unit staff have said wonderful things about you and your program. They love you up there" (Staff correspondence).
 - Challenges: acuity of patient illness, volatile behavior, wide range of intellectual performance levels, extended stays, differences in setting demands, COVID-19
 - Successes: engagement of behavioral health technicians in group sessions, modified behavioral plan



Discussion

- Occupational therapists can offer a number of services to support efforts to reduce recidivism: developing performance skills, awareness, competence, social and cognitive skills, and self-determination; maintaining occupational performance and providing vocational rehabilitation.
- One noteworthy observation was that characteristics and stories of the adolescent population reflected the stories of MRC residents at similar life stages.
- Many of the adolescent patients demonstrated sensory sensitivities, suggesting an avenue for occupational therapists to utilize to increase their presence in adolescent psychiatric services.
- While the needs of these two populations overlap, the program was not transferable.
 - One reason this may be true is the notable differences in treatment setting goals and purpose. It is possible that the program may have had better results if the patients at SLBC were in stable condition.
- Additionally, occupational therapists have existing models and theories supporting their place in addiction treatment.
- Limitations:**
 - Convenience sampling was used in both settings and MRC had mandatory attendance expectations.
 - The program at MRC was only 5 weeks long.
 - The SLBC program was prematurely terminated due to COVID-19.

Implications for Occupational Therapy

- Advocate for justice-based occupational therapy services at the local, state, and federal levels.
- Develop a continuum of care from prison to community reentry to decrease recidivism and increase health and well-being among the incarcerated population.
- Advocate for social and political change to promote occupational justice for the prison population.
- Develop community outreach programs for at-risk youth to target the social, emotional, and occupational needs of the population.
- Implement activity-based treatment within addiction treatment settings to increase skill retention.
- Administer Stages of Change brief screenings and interventions to patients and clients with substance use disorder histories and document the effectiveness of intervention.

References

See provided reference list

Acknowledgments

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Arizona Department of Corrections Rehabilitation & Reentry

SOCIAL SKILLS PROGRAM	
Description	
<ul style="list-style-type: none"> • The Social-Ecological Model • <u>Participants</u>: Residents 45+ days at MRC • <u>Frequency</u>: 2x/week – Wed and Fri (1.5 hr session) • Co-facilitated with A.T. Still peer • Daily Program Surveys 	
Week	Session Topics
1	<ul style="list-style-type: none"> • Values and Roles Checklist • Meditation, Tai Chi • True Colors (personality quiz)
2	<ul style="list-style-type: none"> • Love Languages • Styles of Communication (passive, aggressive, passive-aggressive, assertive)
3	<ul style="list-style-type: none"> • Benefits and Risks of Assertiveness • Conflict Resolution Skills
4	<ul style="list-style-type: none"> • Negotiation Skills and Conflict Resolution • Attachment Styles (secure, avoidant, anxious, disorganized)
5	<ul style="list-style-type: none"> • Trust, Communication, Problem Solving, Teamwork • Personal Boundaries • Family Roles and Social Supports