Ex-Offenders Orchestrating Occupational Performances for Community Integration

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CONCEPTUAL FRAMEWORK

SCOPE OF THE ISSUE

- The U.S. has the highest rate of incarceration in the world[1].
- > 2.1 million Americans are incarcerated at any given time[2].
- ~ 630,000-700,000 offenders are released every year[3,4].
- 30% of those released reoffend within 6 months and another 37% percent within 3 years[3].

OCCUPATIONAL THERAPY PRACTICE FRAMEWORK

- There is a negative impact on health when opportunities for social participation are marginalized by context.
- The OTPF defines an OT scope of practice that includes creating contexts that facilitate occupational engagement[5].
- OTs possess a skill set to address the range of supports necessary to promote successful community living[6].

EX-OFFENDERS CHALLENGES TO COMMUNITY INTEGRATION

- Homelessness, substance abuse, health problems, and unemployment are common challenges for ex-offenders. 90% of prisoners awaiting release identify housing as a major post-release need[4].
- Unemployment and underemployment are chronic issues made more challenging by the stigma surrounding a criminal record[2].
- Offenders are typically released without basic resources, e.g., transportation, money, employment or housing options[4].
- Accessible resources that help ex-offenders acquire basic personal documents, programs that subsidize public transportation costs, or supports that help structure efforts to find, get and keep education or employment are effective resources that can ensure successful integration[3].
- OT reintegration programs have the potential to significantly reduce reentry into the correctional system[7,8].

THE RESEARCH CONTEXT

Supportive housing (SH) programs couple affordable housing and integrated, supportive services to enhance housing stability. Common SH outcome objectives include: housing stability, reunification of family, economic self-sufficiency, and the maintenance of recovery that supports healthy physical and psychological functioning[9]. The SH program at Michael's Place, in Allegheny County, PA addresses each of these outcomes[10].

PROGRAM GOALS: When men leave Michael's Place they will have attained:
1) a full time employment
2) a bank account with enough savings to establish a place to live
3) a healthy place to live
4) a support system that helps manage the stresses that accompany recovery

This program accepts homeless men, willing to live by house rules, participate fully in a recovery program (AA/NA) and attend outpatient therapy as needed. An average LOS is 6 months, but men can stay a maximum of two years. Michael's Place provides service coordination for health care services, mental health and addictions treatment, financial and legal aid, education and employment support, and housing assistance for graduates of the program[10].

RESEARCH OBJECTIVES

PURPOSE: Describe the occupational performance patterns of ex-offenders living in a community-based SH program that is designed to reduce recidivism, and generate insights that can be used to design effective OT evaluation and intervention processes for ex-offenders, which support their community reintegration and reduce recidivism.

DESIGN: Longitudinal, exploratory, qualitative study using phenomenological research methodologies[11].

OBJECTIVES: 1) To describe time use and occupational performance patterns of ex-offenders living in SH and their efforts towards self-sufficiency (e.g., housing stability, employment, training, parenting, etc). 2. To understand ex-offenders' perspectives of environmental supports and barriers to self-sufficiency. 3. To longitudinally track habits of time use and role participation in various environmental contexts ex-offenders engage in.

METHODS

Data Collection Phase One:

- **Demographic Form:** Elicits descriptive data and historical patterns of education, employment and housing.
- **Independent Living Skills Survey-Self Report (ILLS)**: 51-item self-report measuring social and independent living skills (e.g., hygiene, care of clothing, personal possessions and living space, food prep, health and safety mgmt., job seeking/maintenance, etc)[12].
- **Time Diary:** Self-report tool monitoring time use, initially for a day, then for a week at a time.

Data Collection Plan- Phase Two:

- **Kawa River Model Interview Process:** Culturally relative, interview process asks participants to visually represent their current life situation[13].
- **Occupational Circumstances Assessment Interview and Rating Scale:** Forensic version of a semi-structured interview eliciting participants' perceptions regarding MOHO components (e.g., roles, habits, personal causation, skills, goals, interpretation of past experiences, physical/social environment, readiness for change, etc)[14].

Data Collection Plan- Phase Three: Continued collection of time use data, review of habituation elements from OCAIRS and KAWA, qualitative interviewing addressing habit construction and role maintenance.

PRELIMINARY RESULTS

Participants: 5 men at different phases of the data collection cycle. Mean age: 29.4 (Range 22-40). Two with some college, 1 a HS graduate and 2 others have a GED. 80% have been in jail and formerly homeless. 80% are employed.

ILSS Results — Frequency / Problem Areas
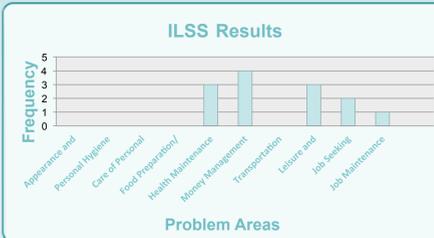
Independent Living Skills Survey-Self Report (ILLS)

- To date, only 5 of 10 areas of ADL/IADL are consistently identified as problem areas for one or more men.
- A common area of difficulty is money management. Most (80%) struggle in this area and many have significant debt.
- Personal health maintenance and engagement in the community/ leisure were identified as problem areas for 3 of the 5 of men.

Time Diary Results[15]

Necessary Time: Accounts for nearly 50% of time use. This includes personal-care, professional care (e.g. NA/AA, case mgmt.) and traveling.

Contracted Time: Accounts for 20% of time. Includes work and school.

Free Time: All unscheduled relaxing time, sports and socializing activities and accounts for 20% of the men's time. Notably, nearly all of this time use occurs on the w/e when far fewer program expectations for time use occur.

Committed Time: Includes time spent completing household duties, religious and spiritual activities, and volunteer activities.

Unaccounted Time: Very little time is categorized as unaccounted. The time men defined as "waking up" was designated as unaccounted time.

Time Use Data — Necessary Time, Contracted Time, Committed Time, Free Time, Unaccounted Time
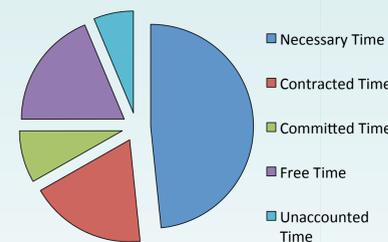
Kawa River Model Results

Rocks/Problems: Common issues related to recovery, finances, family, time use and personal issues such as belief in self/skills.

Banks/Environment: Michael's Place is perceived as both a strength (support) and a challenge (rules). Structured participation in NA/AA is supportive as are staff and family members.

Driftwood/Attributes: All the men could identify positive personal characteristics though each often shared stories of being unable to sustain and apply these personal traits in problem situations.
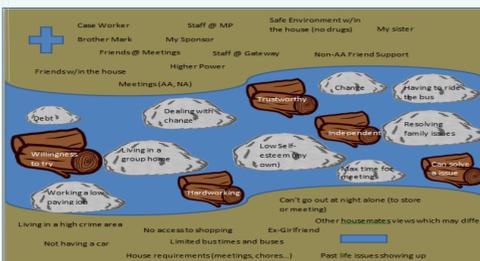
PRELIMINARY RESULTS

OCAIRS

Our analysis of data from the OCAIRS focused on respondents' descriptions of their habits and roles both before entering M-Place and the processes by which changes in habits and roles were occurring. Five preliminary themes are found in the data.

PRELIMINARY THEME	PARTICIPANT DATA
MALADAPTIVE TIME USE Men describe past daily routines notable for both their lack of consistency and structure and for the overwhelming impact of substance abuse or criminal related patterns of behavior.	*"I would buy a case of beer at noon and start on that and I would fall asleep at some point. Then I would go to the bar and do shots and drink. And I would purchase a six-pack and bring it home because when I got home it would be 2 o'clock in the morning so I'd finish the case."* - Alabama *"When I was getting high and stuff like that. I just. It's, nothing was routine then. Like there was no routine. Like and uh no, I couldn't even tell you like break down of the day, you know what I mean? Just kind of floating wherever"* – Birmingham
OBLIGATED, NOT YET COMMITTED Even though each man realizes his historic lack of success in independently creating a healthy lifestyle, each struggles to fully internalize the significant set of obligations of time use and role involvement imposed by Michaels Place.	*" There are certain things that I have to do, like I have a budget that I have to follow. I have to keep my room straight. All the little rules around here that I have to follow"* – Birmingham *"I mean … um… there's some things that I don't like but it's just kind of one of those thing that I have to accept and do . . . there's 2 different fellowships [AA & NA] that we attend. I'd rather prefer not to attend one because it's just not me… it's not who I am… I can identify and kind of relate but I can't talk about what I want to talk about . . .and I feel that we should have a choice and not be forced"* - Denver
ACQUIRING FUNCTIONAL HABITS: Each man described how his behavior was becoming more habituated because of the imposition of a consistent temporal pattern and the expectations and stability of the physical and social environments at Michaels Place.	*"I get up at 7 and want to get things done. I was cleaning the kitchen a 9 o'clock this morning. If I was drunk, I'd think about it in May and probably get to it in July"* - Alabama *"Now, I kinda have it like, I just have the physical schedule going on. You know what I mean? Where I set an alarm, but I usually wake up like right before it"* – Birmingham *"It [having to do regular chores] keeps you within a routine and schedule and ya know, just trying to form good habits"* - Denver
ROLE RESTRUCTURING These men each described the challenges of learning and internalizing new functional roles and the process of leaving behind past dysfunctional roles or relationships.	*"Like when I used drugs and I drank, like everything was about me. You know like I didn't care about anyone else. I didn't care what was going on in the world. It was like, Where can I get more? That's all it was about, so like to be like present and like have a routine. Like go to bed at night, wake up, go to school and to work. Like be a son, a brother, a boyfriend, a friend. Stuff like that. Those are pretty big things, I guess"* – Birmingham *"Umm…I really didn't have a whole lot of roles . . . I'd like to get a job within what I'm going to go to school for. Um…try to get all my legal issues taken care of with my fines and I want to get my license back"* - Denver
SLEEP PATTERNS A surprise in these initial data is the consistency of problems with developing a consistent sleep pattern. Each man discussed historical issues with sleep and some suggested poor sleep was negatively impacting their current function	*"I'm still having trouble sleeping . . . Because I think for almost a year, maybe two years, I didn't sleep, I passed out. Blacked out, DTs [delirium tremors], wake up, try and drink before work. It was a nightmare. - Alabama "The sleeping part was a big one [problem]. I didn't get much sleep . . . It's, nothing was routine then. . ."* - Birmingham *"I don't know I think I have sleep apnea. . . So I wake up like 3-4 times a night"* - Denver

DISCUSSION POINTS

KAWA and OCAIRS data were analyzed using a process of constant comparative analysis. Time Diary data was analyzed using American Time Use categories examined through Aas's categorization of time use[15]. ILLS data was individually analyzed and synthesized across cases.

- Time use prior to admission to Michaels' place, for all the men is characterized by unbalanced and often self-destructive patterns of time use, a dearth of functional role involvement, irregular sleep patterns, and performance skill deficits particularly in interpersonal and money management skills.

- The significant and strict rules concerning time use at Michael's place is both welcomed and reviled. Most of the men express insight that they need the structure, but all also argue that they are capable of functional performances without the time demands this environment expects. Nonetheless, it is notable that nearly all the men have difficulty self-structuring free time not organized by the social environment.

- These men are beginning to establish regular habits that reflect productive role behavior, e.g., holding steady jobs, regularly attending classes, and participating in recovery meetings. While much of the men's time is being used productively the men are not currently independently orchestrating their time use. In a similar vein, the men have been unable to use their unstructured time to independentlyengage in community spaces that could support community integration and recovery.

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