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Rehabilitative Methods and Their Corresponding Recidivism Rates

A Qualitative Analysis across Select U.S. States

By
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An Honors Thesis Submitted in Partial Fulfillment of the
Requirements for Graduation from the
Western Oregon University Honors Program

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Abstract

The present study aimed to identify rehabilitative programs at correctional facilities in Alaska and Oregon. This research also sought to identify obstacles and aids in the rehabilitative efforts at these facilities. It was hypothesized that reintegration programs would be perceived as the most effective type of rehabilitative program and that a lack of funding in prisons would be the greatest obstacle to the rehabilitative process. After reaching out to correctional facilities in multiple states, three key stakeholders in Alaska and Oregon were interviewed. Results indicated that no specific type of program was considered more effective over others. Rather, all programs were considered necessary to provide individualized treatment to all adults in custody. Furthermore, the greatest obstacles to rehabilitation at these facilities were difficulties motivating offenders to take advantage of treatments and understaffing. Further research should explore various ways to empower and motivate offenders to utilize rehabilitative programming.

Keywords: incarceration, rehabilitation, recidivism, inmates, offenders, adults in custody

Introduction

In 2020, approximately 1.2 million men and women were reported to be in prisons across the United States, making it the country with the highest rate of incarceration across the globe (Bureau of Justice Statistics, 2021 December). When considering the number of individuals in jails, this number increases to nearly two million (Institute for Crime & Justice Policy Research, n.d.). This abundance of prisoners is, in part, due to a high percentage of those who are released from prison reentering the criminal justice system soon thereafter; this is also known as the recidivism rate. Recidivism can be measured in a variety of ways such as through rearrest, reconviction, or reincarceration. In a 2021 study on recidivism rates across 34 states, the Bureau of Justice Statistics (2021 December) found that approximately 70% of prisoners are likely to be rearrested just five years after their release. It was also found that almost half of those previously incarcerated will be reincarcerated within five years, indicating that those in the prison system are not being effectively rehabilitated or redirected away from crime (Bureau of Justice Statistics, 2021 December).

The impact of recidivism does not only affect those incarcerated, but their families and communities as well. Family members have been found to have increased economic or social stress caused by the separation from their incarcerated family member (Miller, 2006). This trauma may cause

behavioral issues and changes in sleeping behavior such as insomnia or nightmares (Morris, 1967). Furthermore, children and siblings of incarcerated individuals are significantly more likely to exhibit criminal behavior (van de Rakt, 2011, as cited in Besemer, 2017). As stated by Springer et al. (2000), children who have an incarcerated parent are approximately five times more likely to go to prison than other children.

Aside from the impact of crime on families, research also suggests that victims suffer immediate and long-term psychological health consequences from the crime perpetrated against them (Kilpatrick et al., 1987b; Parsons & Bergin, 2010). In addition, victims are negatively impacted by the lengthy legal process to seek justice, which oftentimes requires victims to relive trauma or questions the victim's credibility (Herman, 2003; Kilpatrick et al., 1987a).

The scope of impact widens further upon examination of the impact on taxpayers. According to the Equal Justice Initiative (2017), the United States prison system costs over 81 billion dollars per year simply to cover the operating costs of prisons, jails, parole, and probation. This large sum of taxpayer money is used to operate a system that fails to keep over 70 percent of individuals from reentering the criminal justice system just five years post-release (Bureau of Justice Statistics, 2021 December).

There is a large difference in the recidivism rates from state to state. Whereas Alaska has a reincarceration rate of approximately 66% three years after release, Oregon's reincarceration rate is significantly lower at a rate of approximately 12% (Alaska Judicial Counsel, 2007; Statistical Analysis Center, n.d.). Comparing different states and their rehabilitative methods might provide insight into these differences in rehabilitative success. Thus, the aim of the present study was to describe the rehabilitative efforts in various states and identify strengths and obstacles in the current prison systems. The goal of this research was to inspire experimental research on the effectiveness of programs designed to reduce recidivism.

Educational Programs

Several studies have found that educational programs in correctional facilities can have a positive impact on individuals during their incarceration (Alzua et al., 2010; Pompoco et al., 2017). A study conducted on men incarcerated in Argentina found that those who participated in educational programs during their incarceration were significantly less likely to be involved in prison conflict or to be injured in such conflict (Alzua et al., 2010). Researchers attribute these results to a change in psychological and moral attitudes from education participation as well as reduced idle time. Another study conducted in Ohio found that participants who completed their GED or

a college class during their first year of incarceration were significantly less likely to be involved in violent misconduct (Pompoco et al., 2017); however, this effect was not found among those who participated in, but never completed, a course. It is important to note that these results could also be attributed to the idea that the type of adults in custody (AIC) who would choose to participate in an educational program may also be the type of individual who does not engage in misconduct. More research into this relationship could provide insight into whether participating in an educational program causes lower misconduct rates.

Research has found that educational programs can have a positive effect on those in the incarceration system after their release as well (Bozick et al., 2018; Pompoco et al., 2017; Vacca, 2004). Pompoco and colleagues (2017) found that if an individual completed a GED, a college course, or any vocational training or apprenticeship program during their incarceration, the likelihood that they would recidivate within three years was significantly reduced. Furthermore, Bozick and colleagues (2018) conducted a meta-analysis spanning 35 years of research on the relationship between educational programs in correctional settings and related outcomes and found that participating in educational programs made formerly incarcerated individuals 28% less likely to recidivate than those who did not participate

(Bozick et al., 2018). Decades of research findings are consistent with the theory that education is correlated with recidivism.

The United Nations Office of Drugs and Crime has cited multiple international standards, also known as the Nelson Mandela Rules, that should be met regarding prisoner education (Allen, 2017). The Nelson Mandela Rules state that rehabilitative efforts should be made to further the education of all prisoners, with special focus given to those who are young and illiterate, during their incarceration. These programs should be in line with the country's existing education system to allow prisoners a smooth transition back into society to continue their education (Allen, 2017).

Despite the benefits derived from correctional education programs and support from the United Nations, there are significant obstacles to their implementation and continued use. (Bauer, 2018; Dove et al., 2018; Martin et al., 2012). According to Allen (2017), the United Nations Office on Drugs and Crime found that the overcrowding of prisoners leads to a lack of classrooms and private studying spaces. Furthermore, understaffing—a common phenomenon in the United States prison system—is cited as one of the main reasons offenders do not have access to their educational rights, since there are not enough officers to escort prisoners to their classes or to an internet source (Allen, 2017; Bauer, 2018). Both issues are cited as obstacles to the implementation of educational services for those who are incarcerated.

Reintegration Programs

Crucial to the success of rehabilitation programs are the programs in place to ensure a smooth and effective transition back into society. It has been found that programs specifically aimed to assist prisoner reentry through job preparation, building connections within the community, providing housing opportunities, and peer mentoring show significantly lower recidivism rates (The National Reentry Resource Center, 2018; Miller, H. V. et al., 2016).

In the United States, reentry is a difficult process for many formerly incarcerated persons. According to Michelle Alexander, a civil rights activist, those released from prison must pay fees and fines that accrued while they were incarcerated, including child support (Moyers & Company, 2013). Individuals may be barred from certain positions of employment because of their criminal history while searching for a job to pay back these fees (Moyers & Company, 2013; Von Hirsch & Wasik, 1997).

Common characteristics of someone who used to be in the correctional system, such as a history of substance abuse, mental illness, or lack of education, hinder job opportunities (Zakaria et al., 2018). Indeed, employers are reluctant to hire those with a criminal history (Pager, 2003; Zakaria et al., 2018). In some cases, it was found that the likelihood of receiving a “call back” from an employer was reduced by 50% if the applicant had a criminal record

(Pager, 2003). Thus, someone recently released from incarceration is likely to have a large amount of debt. Yet, their likelihood of getting and maintaining a job is significantly lower than that of the average individual. Not repaying these debts in a timely manner can result in a violation of one's probation or parole, leading to reincarceration or rearrest (Moyers & Company, 2013; *Bearden v. Georgia*, 1983).

Those with a history of incarceration are likely to face similar discrimination when searching for housing after release (Evans et al., 2019; Johnson & Beletsky, 2020; Moyers & Company, 2013). Evans and colleagues (2019) found that being labeled a felon significantly decreased the likelihood of a landlord's willingness to accept an application from that individual. In fact, some stated that most applications submitted by those convicted of a felony are denied outright. Furthermore, some family members or friends of those recently released who live in public housing risk eviction if they allow that individual to stay with them (Moyers & Company, 2013).

Despite evidence in the literature that suggests formerly incarcerated individuals face significant discrimination when searching for housing, there are very few laws that address or prohibit it. Only eight cities in the United States prohibit housing discrimination against those who were formerly incarcerated (Johnson & Beletsky, 2020). No states prohibit housing

discrimination either. As a result, formerly incarcerated individuals are more likely to become homeless after release.

Mental and Emotional Health Support Programs

Past research suggests that there is a disproportionate number of individuals with mental illness in prisons and jails throughout the United States (Prins & Draper, 2009). Community Corrections Officers, when interviewed, discussed the poor quality of mental health treatment that offenders were receiving. These offenders become known as “frequent fliers” since they are likely to reenter the system, thereby placing a greater burden on resources due to failed treatment of mental illness (Andrews & Baldry, 2013; Helfgott et al., 2016). Many individuals suffering from severe mental illness become entangled in a cycle of repeated incarcerations and arrests. This occurs despite current research findings indicating that many of these individuals can be safely treated in community diversion programs (Delgado et al., 2020). Delgado and colleagues (2020) elaborate on mental health diversion programs, stating that they would provide more targeted and effective care for mentally ill persons by providing treatment, long-term housing, and stability. Furthermore, researchers stated that if half of the arrested individuals who were admitted to state hospitals for incompetency were instead routed to mental health diversion programs, the criminal justice

system could save approximately 1.4 billion dollars annually (Delgado et al., 2020).

A large percentage of incarcerated persons suffer from substance abuse as well. Haviv and Hasisi (2019) examined the relationship between addiction and recidivism. These researchers state that a quarter of the incarcerated population in 2008 were convicted of a drug related offense. This drug conviction rate indicates the need for reform on drug rehabilitation, especially considering that these prisoners, once released, are more likely to recidivate (Haviv & Hasisi, 2019). Researchers compared the recidivism rate of those who completed a drug rehabilitation program to those who had not and found that not only does completing a drug rehabilitation program reduce the chance of recidivism, but that the programs are most effective when the programs are longer, more intense, and use cognitive behavioral therapy in a positive, therapeutic community.

Compounding this issue is the lack of access to treatment for substance abuse. Gunnison and Helfgott (2017) interviewed 40 formerly incarcerated individuals and Community Corrections Officers (CCOs) in Washington state who identified a delay in substance abuse treatment in institutional facilities. While treatment should begin immediately after admittance, CCOs noted that treatments were frequently postponed (Gunnison & Helfgott, 2017). Moreover, CCOs and those formerly incarcerated described the programs as

being unhelpful, ineffective, and a waste of time. Here one can see a disconnect between the research literature and the current rehabilitative practices in use; while research states that drug rehabilitation programs are more effective over a long-term therapeutic treatment, treatments are being shortened and the treatment that is provided is low-quality (Gunnison & Helfgott, 2017; Haviv & Hasisi, 2019).

Present Study

The aim of the present study was to identify rehabilitative methods—such as educational, reintegration, and mental/emotional support programs—and their perceived efficacy in lowering recidivism rates by interviewing key stakeholders from prisons in select states. The current study also sought to identify the perceived obstacles to rehabilitation. It was hypothesized that reintegration programs would have the strongest correlation with lower recidivism rates. Furthermore, it was hypothesized that the greatest obstacle to rehabilitation would be lack of funding.

Method

Thirty-four key stakeholders at prisons and correctional centers were contacted across four different states to participate in an interview. The following states were chosen for their wide range of recidivism rates: Delaware, Virginia,

Alaska, and Oregon. Delaware and Alaska have the recidivism highest rates in the country, and Virginia and Oregon have some of the lowest (Alaska Judicial Counsel, 2007; Celi & Jin, 2020; Huenke, 2019; Statistical Analysis Center, n.d.). Each individual prison was contacted via phone call to request an interview with a key stakeholder at that prison. Interviewees were not compensated for their participation.

Participants

The sample included three individuals ($N = 3$), two who were employed for an Oregon prison and one who was employed at an Alaska prison. Participants from Oregon were a Superintendent and Assistant Superintendent, and the participant from Alaska was an Adult Probation Officer III. The sample included two women and one man ranging from 37 to 46 years of age ($M = 41.6$; $SD = 4.5$). Their years of experience in the correctional system ranged from 13 to 20 years ($M = 15.7$; $SD = 3.8$) while the number of years in their current position ranged from 0.5 to 8 years ($M = 4.0$; $SD = 3.8$).

Procedure

All interviewees were contacted via phone call to participate in a virtual, audio recorded interview on Zoom. Interviewees were incentivized to participate by presenting their participation in this study as an opportunity to better understand the prison system and rehabilitation. Upon agreement of participation,

interviewees were sent the informed consent through email. Interviewees then affirmed their consent by signing the informed consent and returning it via email. If they did not consent, no further pursuit of an interview was made.

Each interview was approximately 15-30 minutes in length. During the interview, participants were asked questions regarding their prison's rehabilitation services and their perceived efficacy. Furthermore, interviewees were asked about the challenges they encounter in their efforts to rehabilitate those who are incarcerated and to reduce recidivism. After the interview had concluded, interviewees were thanked for their participation and debriefed through email. Recordings were downloaded to a password-protected computer when the interview was completed.

Measures

Questions Regarding Rehabilitation Services and Perceived Effectiveness

The first set of questions collected data about the types of services provided across four categories: educational, reintegration/reentry, mental/emotional support, and other unique services. The perceived effectiveness of each of these rehabilitative categories was also discussed. The questions are attached in Appendix A.

Questions Regarding Challenges in Rehabilitation

The second of questions aimed to identify any factors the participants believed to be obstacles in lowering recidivism rates and successfully rehabilitating persons who were incarcerated. The questions are attached in Appendix B.

Results

Participants provided several insights into the rehabilitative programs at their own facilities. Furthermore, they detailed the obstacles they perceive to hinder the rehabilitative process as well as the strengths that aid their efforts. It should be noted that interviewees frequently used the term Adults in Custody (AICs) to address individuals who are incarcerated at their facilities.

Available Programing and the Perceived Effectiveness

“It does make [AICs] more successful when they reenter the community”:

Educational Programing

After discussing educational programming with all the interviewees, it was evident that all their facilities provided similar programs. These opportunities included GED programming as well as access to college courses. One interviewee stated that these educational opportunities help AICs become “more successful when they reenter the community” because they will have access to areas of employment that they might not have had the educational background to apply to before.

However, another interviewee stated that it can be difficult to motivate AICs to take advantage of these opportunities:

Some are very resistant like “nope, I don't want to be educated. I know that I'm gonna swing the hammer. I'm gonna swing a hammer and hammer nails as soon as I get out” and then we have some guys that say “nope, the gang life is for me.”

The same interviewee stated that it is imperative that AICs “have a skill set that they can utilize and put to use when they walk out as well” and mentioned several of the vocational opportunities they have available. These opportunities include welding certifications, automotive certifications, electrical apprenticeships, bakery certifications, and firefighting certifications.

“Life has continued to be progressive without them being progressive with it”: Reintegration and Reentry Programing

Many reintegration and reentry programs were described by interviewees as being essential to lowering recidivism and described a variety of ways to implement this type of programming. Some programs take place far in advance of release, such as the Transitional Community Unit (TCU) that is being developed at an Oregon correctional facility. The goal of the TCU is to “normalize that environment as much as possible” by switching

to single bunk rooms, adding laundry machines and a kitchen area. In the same correctional facility, they try to take AICs out on field trips to grocery stores and to meet with parole and probation officers. The interviewee stated that programming such as the TCU and field trips helps to “take some of that anxiety out of [reentering the community] or that edge out of it before they do release to just better prepare them” since many of these AICs have been incarcerated for long periods of time.

A different interviewee stated that they have specific employees, such as transition and release coordinators whose job is to assist AICs in their reentry process. For example, the release coordinator is assigned to an AIC within six months of their release and works with the “community corrections parole and probation and kind of unites that relationship together.” They went on to describe an example of how the release coordinator can significantly help the parole or probation officer understand what supports an AIC may need to be successful in their reentry:

Let's say [the AIC failed a drug test] in prison. Then [the release counselor] would understand that, although he's been through several different cognitive restructuring supportive drug and alcohol programs while he was incarcerated, he may still struggle with sobriety. And so that may be something that the parole officer really needs to know... that the only way he is going to be successful is if, one, he completely

abstains from drug and alcohol use, which is typically in terms of their release, but also... he needs to go into a clean and sober environment. This example demonstrates how having a release counselor who informs the AIC's parole or probation officer on the needs of the AIC may aid in their successful reentry back into society. The interviewee stated that these reintegration efforts are necessary because "a lot of times, guys are in here for 10, 20 years, and... life has continued to be progressive without them being progressive with it because they haven't been out there to experience it." In order to help AICs readjust to a society that they have been removed from for long periods of time, these types of programs are essential.

"Stuff that they may or may not have had access to out in the streets... they're able to address some of those issues in here": Mental and Emotional Support Programming

There are multiple different avenues through which mental and emotional support programming is offered at these facilities. All interviewees described several classes related to mental and emotional health provided to AICs. Examples of some of these programs were cognitive restructuring classes, anger management classes, "thinking for change", and "good intentions, bad choices." Furthermore, one interviewee mentioned that a counselor gets paired with an AIC throughout their duration at the facility. To

supplement classes and counseling, AICs also have access to pharmaceutical therapy to treat mental illnesses.

What two of the interviewee's stated brings the most impactful emotional and mental support, however, are the clubs run by the AICs themselves and the peer-to-peer mentor groups. According to one interviewee, participating in these clubs, "teaches them quite a different skill set: how to communicate, how to work with others, you know, pro social behaviors." Club leaders (all of whom are AICs) meet with their groups and with prison security on a regular basis to organize events and discuss "how they want to help the community." Furthermore, when AICs are struggling with issues related to mental and emotional wellness, for example with sobriety, their peers in these clubs and in peer-to-peer mentor groups are the ones who may offer the most effective support. One interviewee described a scenario in which a peer mentor may be able to offer a fellow AIC better support:

If they're struggling, there's other peer mentors that are AICs that helped them and say 'I've been exactly where you are, but I've also maintained sobriety for 10 years', but they can say 'you're right the first two years that I came in, I may not have been sober, but now I've really recognized what that means to be living in a sober environment with sober mentors.'

The interviewee emphasized that the advice and guidance from an AIC peer who has experienced the same struggles can be most helpful.

Obstacles in Rehabilitation Programming

“It comes down to the individual”: Motivation to Change.

When asked about the factors that may hinder the effort to rehabilitate adults in custody, all interviewees mentioned the AICs lack of motivation as the biggest obstacle. One interviewee stated that AICs must be willing to embrace change to take advantage of the programming. Another participant stated that an AIC “could be here for five years until he finally has that epiphany that the only way that he's going to recreate himself or work on himself is to engage in treatment.”

It was also stated that AICs might not take advantage of programming until maturing or “aging out”. One interviewee stated that change many not occur until individuals are “over it” or decide that they are too old to commit crime. They went on to say that some AICs “just don’t give a shit... so we try to meet them where they are and then hopefully try to get them to care.” Throughout all the interviews, it was apparent that this was the obstacle that was the greatest: finding a way to motivate adults in custody to utilize the resources at their disposal.

“Sometimes we just find that we don't have enough staff”: The Understaffing Phenomenon

While helping motivate AICs to utilize the rehabilitation programs is one of the primary difficulties mentioned, having sufficient staff was a large concern as well. In the interviews, it was labeled as a “nationwide” problem that limits the amount of programming that correctional facilities can provide. In fact, two interviewees said that some programs were not at operating capacity due to being short staffed. One interviewee stated that, due to short staffing, they “don't have as much programming going on as [they are] supposed to.” Another stated that it is difficult to bring in more employees because working in a prison is not most individuals’ “number one job choice”.

In fact, interviewees mentioned on several occasions that it is difficult to find qualified workers for these positions. The interviewee from Alaska stated the following:

We live in a small town [of] 3000 people so there's really not people sitting around with a degree who are unemployed and who could also pass the background check and all the drug [test] stuff and then be like, ‘and man, I want to work in prison’.

Another interviewee reiterated this point, stating that a resource that would benefit their facility would be more professionals who are educated in rehabilitation. They stated that they are always in need of more mental health professionals as well. It appears that not only is it a struggle to motivate individuals who are incarcerated to participate in rehabilitative programming, but it is also difficult to find properly trained professionals to facilitate these programs.

Alaska Versus Oregon Comparison

One interviewee from Alaska and two from Oregon were compared to examine differences in their struggles to rehabilitate individuals who are incarcerated. According to a report by the Alaska Judicial Counsel (2007), approximately 66% of those released are reincarcerated three years after release, making Alaska's recidivism rates one of the highest in the country. In comparison, 12.5% of those released in Oregon are reincarcerated in the same amount of time (Statistical Analysis Center, n.d.). Comparing the interviews from the two states have shed light on some differences between their facilities and may provide some correlational insight.

***“God these guys ain't got nothing coming”*: Humanizing and Normalizing**

Humanizing the adults in custody can be difficult at times according to the interviewee working at an Alaska state prison. When asked what resources would make the rehabilitative efforts easier, they stated that having staff that are caring and dedicated would be helpful. They emphasized that having staff with these qualities may help their inmate population to feel that there are individuals who care about their well-being.

While the interviewee stated that it is important to humanize and care for the adults in custody, not everyone in their staff shares that focus. Instead, they noticed that some of their coworkers have negative attitudes towards

those incarcerated at their facility. The interviewee described hearing their coworkers express ideas such as “God these guys ain’t got nothing coming.” They also described another incident where a fellow staff member tried to discourage the interviewee from using honorifics with an older inmate, stating, “we don’t call them sir.” As a result, they stated that Alaska’s correctional system was “way behind the times” and went on to state that “we still have a long ways to go to as far as... treating people with respect and dignity.”

In contrast, the interviewees from Oregon describe the humanizing environment at their facilities as a factor that aids in the rehabilitation process. One of the interviewees discussed The Oregon Way, a foundation that aims to better the well-being of correctional staff and those incarcerated by normalizing and humanizing prisons (Oregon Department of Corrections, n.d.). The interviewee describes this foundation in effect at their facility as painting walls, adding decorations and plants to the hallways, and staff no longer using terms such as “inmates” or “prisoners”, but rather using the term “adult in custody” or using an AIC’s first name.

The Oregon interviewee continued to state that by humanizing and normalizing their environment, they can see many positive impacts on their correctional community:

Gone are the days of 'throw them in a dark cell and throw away the key'. We're really focusing on staff being mentors and hoping that then that kind of progresses into AICs wanting to really do good and then that lowers the potential of assaults that happen within our institution. This comment reflects a shift in mentality away from a negative and destructive mindset towards a constructive and productive way of interacting with AICs.

The same interviewee also discussed the purpose and goals of the correctional institution, reorienting it towards rehabilitation and safety and away from punishment-oriented thinking:

The punishment phase is already over. They got that when the judge handed down the sentence. Now it's our responsibility to, number one, rehabilitate them so that they can go back out and be good neighbors to our community, and, number two, reassure our community that we are releasing safe, productive, socially engaging clients that are coming out to engage with the population.

This response demonstrates a deviation from the retribution philosophy in the field of corrections. Rather than centering corrections solely on punishment, this response resembles an incapacitation and rehabilitation philosophy (Hanser, 2020). This perspective aims to remove offenders from

society to prevent further harm and to use that time to assist in the treatment of the offender (Hanser, 2020).

“Hey, we're also a little... part of the community”: Community Involvement

Another resource that the Alaska interviewee mentioned would aid rehabilitation at their facility was greater community involvement. They discussed that their facility has been in the process of trying to increase engagement and participation from community members. One example of the community involvement they currently have is through the hobby shop at their site. AICs can make crafts that community members can then come in and buy. The interviewee stated that after community members come in for events like these, the AICs would say to them “I kind of thought that people forgot that we were even here... we have some people.... who do know about us and care about our future.” It is evident that the community involvement has had a positive impact on some of the individuals in custody.

The interviewee also discussed, however, that it has been difficult to get more engagement from the community:

We are kind of across the bay, so we're over here and people just kind of ignored us. And so now it's like, hey, we're also a little bit part of the community and let's all be a little bit more collaborative.

They proceeded to describe the prison as a microcosm that is extremely different from the outside community. The norms between the two communities are incredibly distinct and that engagement from the community would help to ease stigma against AICs when they are released.

In Oregon, however, interviewee's cited community involvement as one of the strengths in their rehabilitative efforts. One interviewee from Oregon listed several community engagement programs where the AICs were able to go out into the community and do service projects. For example, the interviewee explained their use of offsite worker crews such as their fire crews who go out into the community. The interviewee stated that they AICs "get a great sense of accomplishment out of it, especially when they're able to do stuff in the community and help out." These offsite worker crews reflect a restorative justice philosophy in which AICs can go out and heal harm done by their actions and rebuild the health of the community (Hanser, 2020).

The interviewee provided another example of how AICs can take the initiative to help their communities. They describe an AIC who participates in the art room at their facility:

We had a guy that's really talented. He wanted to do a sign for the high school because the other one got kind of beat up. So, he was able to do that and then we're gonna go down and present it to the high school...

So that would be nontraditional stuff that we do here locally that benefits the population still in the community as well.

This example of an AIC helping the community demonstrates the positive interactions that can come from community engagement with the correctional facilities.

A different interviewee from Oregon also described a position in their staff called the transition coordinator. This coordinator would be assigned to an AIC as they are getting ready to release. The interviewee described the work of the transition coordinator, stating, “their purpose is to solely help provide that networking and that resource for them into the community... [and] helps them navigate community services.” This position aims to connect the AIC back with the community by helping them find resources such as transitional housing, setting up appointments, connecting them with religious services, and more. This helps the adults who are being released feel more connected to their community and aware of the resources that are available to them.

Discussion

This study aimed to understand the rehabilitative efforts in different states and discern how effective those efforts were perceived to be by key stakeholders at those correctional facilities. This study also sought to identify

key obstacles and aids in the implementation of rehabilitative programs. It was hypothesized that reintegration programs would be perceived as the most effective programs for reducing recidivism; however, no specific programs were identified as having the greatest impact on recidivism. Instead, key stakeholders found that all areas—education, reentry, and mental/emotional support—aided the multifaceted rehabilitative efforts. Instead, it was emphasized that each adult in custody has specific needs and should thus have an individualized treatment plan.

Another hypothesis of the current study predicted that a lack of funding would be perceived as the greatest obstacle correctional facilities face; however, this qualitative research has found that an AICs reluctance to accept treatment and understaffing are the greatest obstacles to rehabilitation. These results support findings by Allen (2017) and Bauer (2018) who found that understaffing limited the availability of educational programming; however, this research found that understaffing impacts reintegrative and mental/emotional support programming as well.

Furthermore, the present study found that the humanization of AICs, the normalization of the prison environment, and community involvement may be correlated to decreased recidivism. Results indicate that stigma, discrimination, and dehumanization against AICs that is heavily documented in the literature (Evans et al., 2019; Johnson & Beletsky, 2020; Moyers &

Company, 2013; Pager, 2003; Zakaria et al., 2018) may be combated with more engagement and involvement from the community.

Limitations

The present study is limited by its small sample size. While almost 35 correctional facilities were contacted asking for participation, most did not respond to the request for interview. A few who were contacted stated that, due to the demanding aspects of their employment, they did not have time for the interview. Due to the small sample size, the results are not easily generalizable beyond the three facilities.

Additionally, Virginia's Department of Corrections (VADOC) required a separate human subjects research review for interviews within their correctional system. Unfortunately, this additional research review was not possible due to the current project's timeline and, as a result, interviews with participants from VADOC was no longer a possibility. Moreover, no responses were received from Delaware. This limited the current research to two states studied: Oregon and Alaska.

Future Research

Finally, there are multiple avenues in which to build upon the present research. Future research can replicate this study with a larger sample size

with more states to see if the present results are consistent on a larger scale. This would assist in creating more generalizable results. Furthermore, while lack of engagement from AICs was found to be the greatest obstacle in the rehabilitative process, relatively little research aims to identify motivating factors for these individuals. Future research should examine what motivates adults in custody to engage in rehabilitative treatment.

This study sought to identify the common rehabilitative programs provided in Oregon and Alaska's correctional facilities. Furthermore, this research aimed to identify the potential obstacles that the facilities encounter in their efforts to rehabilitate adults in custody. After interviewing three key stakeholders from correctional facilities in Oregon and Alaska, it was found that motivating AICs to take advantage of the treatment available was a difficult obstacle the facilities faced. Moreover, key stakeholders stated that understaffing in their facilities made it difficult to provide programming to AICs. Finally, when comparing Oregon and Alaska, it was found that humanizing AICs, normalizing the prison environment, and having increased engagement from the community may be correlated with decreased recidivism.

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Appendix A

Questions Regarding Rehabilitation Services and Perceived Effectiveness

- Are there educational services provided at your facility?
 - If so, what kinds?
 - How effective do you perceive these programs to be in reducing recidivism and providing successful rehabilitation?
- Are there reintegration and reentry services provided at your facility?
 - If so, what kinds?
 - How effective do you perceive these programs to be in reducing recidivism and providing successful rehabilitation?
- Are there mental or emotional support programs provided at your facility?
 - If so, what kinds?
 - How effective do you perceive these programs to be in reducing recidivism and providing successful rehabilitation?
- Are there any rehabilitation programs your facility provides that do not fit into these categories?
 - If so, what kinds of services?
 - How effective do you perceive these programs to be in reducing recidivism and providing successful rehabilitation?

- Do all prisoners have access to these services?
- What kinds of requirements need to be met to participate in these programs?

Appendix B

Questions Regarding Challenges in Rehabilitation

- What factors (if any) hinder the rehabilitation process at your facility?
 - What are the obstacles you encounter the most?
- What factors (if any) aid the rehabilitation process at your facility?
 - What factors do you believe have the biggest impact?
- What resources do you perceive would make your facility's rehabilitation process more effective at reducing recidivism rates?
 - Why would this resource help?