From Prison to the Community: The Pivotal Role of OT in Facilitating a Healthy Transition

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Background

• Approximately 630,000 prisoners are released into the community each year.¹
• First Step Act (2018) reduces minimum sentencing for populations such as non-violent drug offenders.²
• Majority released to unsafe areas due to shortage of affordable housing. ³
• Insecure housing and homelessness are related to increased: Recidivism⁴; Emergency room use⁵; Substance use⁶; Unstable family relationships⁷; Mental health (MH) problems.³

1965:
States incentivized for moving patients out of MI hospitals

1967:
Individuals with mental illness in criminal justice system doubles

1981:
MH federal spending cut by 30%

2004:
3x more individuals with mental illness in prisons than hospitals

• Post-release is a high-risk time due to poor care continuity and lack of support.⁸
• Individuals report difficulty:
  • Obtaining employment and stable housing, accessing relevant services, reintegrating with their families and communities.⁹
  • Stable housing provides a secure place to seek employment, creates a sense of community, and develops a routine for coping with post-release terms.¹⁰

Methods

Search in journal databases
Skim abstracts and select relevant articles
Identify themes and most significant research
Interpret findings and clinical implications
Communicate work to audience

Areas of Occupation

Housing
Employment
Community
Health
Management

Work:
EU: Employment interests and pursuits
JP: Job performance
SA: Employment seeking and acquisition

IAADL:
CM: Community Mobility
CR: Child rearing
FM: Financial management
HE: Home establishment and management
HM: Health Management and Maintenance

Other:
E: Education
L: Leisure

Results

• Programs included in this review focused on work (8/13 articles), social participation (3/13 articles), IADL (13/13 articles), leisure (7/13 articles), and education (2/13 articles)
• The most frequently reported outcomes were decreased recidivism (10/13 articles), increased housing (2/13 articles), increased employment (3/13 articles), increased healthcare linkage (3/13 articles), and increased program participation (3/13 articles)

Discussion

• Returning citizens often experience challenges when re-integrating into society.
• Occupational-based programming has the ability to decrease recidivism.
• OTs currently provide similar interventions with a related population, in the mental health setting, where common areas of focus include work, health and wellness, education, and skills training.¹⁰
• OTs have the ability to:
  • Facilitate self-advocacy skills
  • Provide group programming related to identified areas of need
  • Provide education and training
  • Provide interventions that are client-centered and occupation-based
  • Enhance overall occupational performance¹¹
• Although interventions from the studies analyzed were not provided by OTs, occupation-based programming has the power to facilitate a healthy transition from prison to community.

Future Implications

• Further research is necessary to explore the impact of occupational therapy programming for successful community re-integration
• Case management, an emerging area in OT practice, should be considered with this population.
• Telehealth is a cost-effective method of service delivery used to assist clients in promotion of healthy habits and routines.¹²
• Explore additional areas such as returning citizens within the aging population
• OTs currently working with returning citizens should consider collecting and analyzing data to show the impact of occupation-based programming and utilize this analysis to inform evidence-based practice