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Exploring Community Reentry After Incarceration with Recently Released American Indian/Alaska Native Persons

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EXPLORING COMMUNITY REENTRY AFTER INCARCERATION WITH
RECENTLY RELEASED AMERICAN INDIAN/ALASKA NATIVE PERSONS

by
Holly Wohlers

A Dissertation Submitted in
Partial Fulfillment of the
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ABSTRACT

EXPLORING COMMUNITY REENTRY AFTER INCARCERATION WITH RECENTLY RELEASED AMERICAN INDIAN/ALASKA NATIVE PERSONS

by

Holly M. Wohlers

The University of Wisconsin-Milwaukee, 2015
Under the Supervision of Leah Rouse, Ph.D.

American Indian/Alaska Native (AI/AN) persons comprise 1.7% of the population in the United States (U.S.), 1.1% of the population in the state of Wisconsin (WI), and represent immense diversity with over 566 federally recognized Sovereign Nations. Despite their relatively small numbers, AI/AN persons suffer a wide variety of extreme biopsychosocial disparities. In Wisconsin, this includes the highest incarceration rate of any ethnic group. Building upon a community partnership, the project examined the areas of challenge and support for AI/AN persons in Wisconsin who sought reintegration into an urban community after incarceration. Via the Extended Case Method, the project explored the applicability of Danieli's Trauma and the Continuity of Self: A Multidimensional, Multidisciplinary Integrative (TCMI) Framework, through the lenses of Historical Trauma (HT) and persistence. Participants presented with significant health and social disparities, consistent with the HT literature. Although there is little literature on the AI/AN experience of incarceration and reentry, the participants shared many stories of challenge that mirror those of other racial populations who do have an extant body of research in this area. However, the findings revealed more collectivist, less individually-focused, experiences that included emphases on family, community, and their tribal nations. These findings exposed some gaps in the utility of Danieli's TCMI framework to address experiences at the collectivist level for AI/AN persons reintegrating. The findings seem to support the assertion already made in the literature that the TCMI framework may not well accommodate an

understanding of incarceration and reintegration experiences among AI/AN groups.

Recommendations to the partner agency, limitations, and implications for future research are described.

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CHAPTER I: INTRODUCTION

Presently, there are 566 federally recognized American Indian/Alaska Native (AI/AN) sovereign tribal nations in the United States (U.S.) (APA, 2010; West, William, Suzukovich, Strangeman & Novins, 2012). Seventy eight percent of AI/AN persons in the U.S. live in urban and off-reservation areas where they are subject to state and other municipal legal jurisdictions (U.S. Department of Health and Human Services, 2012). This is likely in part due to the fact that states with large AI/AN populations also tend to have cities that once hosted Indian Relocation Centers spawned by federal Act in 1956. The Act implemented federal policy intended to urge AI/AN nations to terminate their treaty trust-relationships with the U.S. government. AI/AN persons were encouraged to relocate to urban settings, with the federal promise of training and employment opportunities. A primary outcome of the Act was that many AI/AN individuals and their families faced increased oppression and racism, a lack of economic security, the absence of a sense of their former tribal community, and increased incarceration rates. Growing bodies of literature document the extraordinary mental, behavioral, and medical health disparities faced by AI/AN groups; however, no published studies presently address incarceration and resulting reentry issues specific to AI/AN populations.

Nationally, AI/AN persons are disproportionately represented in the correctional population. Approximately 78,900 AI/AN persons were under correctional supervision in the U.S. in 2011—more per capita, than any other ethnic or cultural group (Beran, 2005). There are also disparities specific to the sentencing of AI/AN youth. Compared to other ethnicities, they are more likely to be institutionalized than placed on community sanctions or supervision (Hartney & Vuong, 2009). Further, AI/AN youth represent 40-55% of all juveniles in the federal system, depending upon the stage of sanctioning referenced (Adams et al., 2011). The federal

treatment of AI/AN youth not only forces a context of institutionalization upon AI/AN children, but overlays a criminalization template on the developmental trajectory of many AI/AN lives.

In an effort to aid the community partner agency in addressing such issues, this project focused on the experiences of AI/AN persons seeking to reintegrate after incarceration in the State of Wisconsin (WI), the state which demonstrates the most disparate rates for AI/AN groups. AI/AN persons make up only 1.1% of the population (Census Bureau, 2013) in WI, but are incarcerated at the highest per capita rate in the U.S. (Pawasarat & Quinn, 2013). Of working-age AI/AN men in WI for 2010, 7.6% (1 in 13) were being housed in state prisons and local jails. This compares with 3.1% (1 in 32) men nationally (Pawasarat & Quinn, 2013). In 2011, the rate of incarceration for AI/AN youth was 3 times that of white youth in WI (WI Council on Children & Families, 2011). More alarmingly, the aforementioned statistics are based only on reports by facilities that use AI/AN as a racial category. At times, AI/AN persons are lumped into “other” or “non-white” categories (Holm, Vogeltanz-Holm, Poltavski & McDonald, 2010); leading to under-reporting. Additionally, it is difficult to determine how many AI/AN persons from WI are incarcerated at the federal level, as the Bureau of Prisons does not routinely track the state from which the person came.

The Indian Relocation Act was just one of the many detrimental federal policies to negatively impact AI/AN people. AI/AN persons have persisted through a wide variety of socioeconomic and health disparities as a result of colonization and historical oppression. AI/AN persons suffer disparities of medical, mental, and behavioral health, and a litany of structurally oppressive socioeconomic challenges. The unemployment rate for AI/AN persons is significantly higher than that of the general population (Covin, 2012), and the national poverty rate is 27% (U.S. Census Bureau, 2013)—higher than for any other race or ethnic group in the

U.S. Further, AI/AN persons have twice the rate of violent victimization in the U.S. compared to African Americans and more than two and half times that of whites (APA, 2010). They are also the only group victimized primarily by out-of-race perpetrators (Buchanan, 2006). These issues all influence the experience of reintegration for AI/AN men and woman after incarceration.

Mirroring national trends, AI/AN communities in WI continue to experience significant negative disparities in a wide range of health, social, economic, and service access categories. In WI, over 25% of AI/AN persons live in poverty—higher than the national average poverty rate for these groups (U.S. Census Bureau, 2011). The high school graduation rate in WI is lower than any other ethnic group in the State (WI Department of Health Services, 2012). The birth rate for AI/AN teenage girls is 3.9 times higher than white teenage girls in WI (WI Department of Health Services, 2012). AI/AN males have a suicide rate for those aged 15-24 of 3.3 times that of the national average for all males of that age group regardless of ethnicity (WI Department of Health Services, 2012). There is also an underutilization of services in the State. Indian Health Services - appropriated funding provided only 55% of the necessary federal funding to assure mainstream personal health care for AI/AN persons (WI Department of Health Services, 2006). There are thus not sufficient funds to deliver the healthcare services necessary to the state's AI/AN population. It seems clear that structural oppression and low socioeconomic status act as barriers to successful outcomes in AI/AN youth, both nationally and in WI, including for reentry.

Whether adults or children, most detained and incarcerated persons return to their communities after release—whether on or off reservation (National Institute of Justice, 2014). Current estimates show that 97% of inmates now in prison nationally will eventually be released and return to their own communities (National Institute of Justice, 2014). Currently, the recidivism rate calculated within three years of the individual's release indicates that

approximately 67% return to prison in that time frame (Hattery & Smith, 2010). This means that 2/3 of released offenders will be re-arrested within three years. Former inmates face a wide variety of barriers, including hesitancy by employers to hire ex-offenders, a lack of skills to easily market themselves, a lack of education, and a lack of social support to help with the reentry process. Employment is an important predictor of an ex-offender's success after reentry (CSG Justice Center, 2011) and having been incarcerated reduces one's job prospects in the community. Persons released from incarceration face homelessness due to their lack of employment and are often not able to utilize federal housing services. Depending on a person's conviction record, he/she may no longer be eligible for housing assistance. Some families even experience the loss of housing assistance, if a person with a criminal background is found living in the unit. The two primary convictions that bar persons from federal housing assistance are placement on lifetime sex offender registration and being convicted of producing methamphetamine on public housing grounds. Tribal housing agencies use special federal laws concerning housing on tribal lands and because of their sovereignty, have the authority to make their own policies. For many tribes, a felony conviction blocks a returning offender from tribal housing options for 10 years. Additionally, each public housing authority has a right to impose its own rules and time periods. The restrictions can be confusing, as they are not universal (Stoloff, 2004).

Despite all of the structural and systemic challenges faced by AI/AN persons, the sovereign nations continue to persist and are endowed with strengths, assets, and resources which help them continue to thrive. The populations are resilient, as evidenced by positive, healthy outcomes, even in the face of significant adversaries and disparities (Substance Abuse and Mental Health Services [SAMHSA], 2015). There are many factors that may influence

persistence in a population. In many AI/AN communities, there is a strong sense of positive family bonds, for example. Studies have shown that positive family attachment is effective in reducing suicidality and substance use in AI/AN teens (SAMHSA, 2015). A sense of belonging in the AI/AN community and building positive relationships in the community has been shown to lower the risk for negative outcomes (SAMHSA, 2015). Furthermore, spirituality is central in many AI/AN communities (SAMHSA, 2015). The fact that AI/AN communities in the U.S. were forbidden from practicing their traditional spiritual ceremonies, but still many of the practices have been retained and revitalized, is a testament to the enduring persistence of AI/AN groups. This project thus explored both the challenges and supports to successfully reentry for participants in this sample.

Theoretical Framework

The aforementioned disparities constitute formidable challenges to those reintegrating after incarceration. A case has been made to frame these as symptoms of colonization and Historical Trauma (HT) (Evans-Campbell, 2008; Rouse Arndt & Davis, 2011). HT constitutes “the legacy of numerous traumatic events a community experiences over generations and encompasses the psychological and social response to such events” (Evans-Campbell, 2008, p. 320). Similarly, in her work with survivors of the Jewish Holocaust and their children, Danieli (1998) developed the Continuity of Self: A Multidimensional, Multidisciplinary Integrative (TCMI) Framework. The framework aims to operationalize an understanding of how HT impacts individuals over generations. This project utilized the TCMI Framework in the backdrop of AI/AN HT to examine the relationship between AI/AN disparities in incarceration and reintegration. These paradigms are detailed at greater length in Chapter 2. Finally, the project employed the Extended Case Method to guide data collection and analysis. Thus, the project

strove to remain congruent with published practices for culturally-congruent research strategies that accommodate both qualitative and quantitative orientations without the conventional mainstream constraints of each (see Deloria, 1999).

Purpose

This project is unique in its specific focus on AI/AN persons' experiences with incarceration and reentry into their communities. AI/AN persons often face extreme barriers without a history of incarceration, and such challenges can make reentry even more difficult. The lack of information on the true incarceration rate for AI/AN persons results in a dire lack of information on reentry needs and programming regarding AI/AN inmates. Via a university-community agency partnership, an examination was undertaken to further understand the reentry experience for AI/AN persons in an urban setting after six or more months of incarceration with the following aims:

1. What is the AI/AN experience of incarceration (supports/challenges), and how (if at all) is racial/ethnic identity/culture a factor in incarceration?
2. What is the experience of re-entry (supports/challenges) for AI/AN persons in an urban setting after six or more months of incarceration?
3. How do issues of Historical Trauma factor into the two previous aims, if at all?

CHAPTER II: LITERATURE REVIEW

The U.S. ranks first in the industrialized world in incarceration of its citizens (Covin, 2012), and outpaces the next highest country, China, by over 550,000 inmates (International Centre of Prison Studies, 2013). This is true, even despite the U.S. correctional population having decreased by 41,500 people in 2013. According to the Bureau of Justice Statistics, the total correctional population in the U.S. in 2013 was 6,899,000 offenders.¹ This is the first time since 2003 the correctional supervision number dropped below 6.9 million. In 2013 there were approximately 2.2 million people incarcerated in the adult correctional system (Bureau of Justice Statistics, 2014). Although that number marked the fifth consecutive year of a decrease in the correctional population, it is still a stunning number that far outpaces the rest of the world. The majority of the decline occurring over the last five years was due to changes in sentencing that decreased the probation and local jail populations. One in every 35 adults in the U.S. was under some form of correctional supervision at the end of 2013 (Bureau of Justice Statistics, 2014). In 2010, it cost an average of \$31,000 to keep someone in prison for a year, ranging from a high \$60,076 in New York to a low \$14,603 in Kentucky (Jacobson, 2012). To provide some context, the College Board reports that a moderate college budget for an in-state public college for the 2012-2013 academic year averaged \$22,261 (College Data, 2013).

AI/AN Persons and the Correctional System in the U.S.

AI/AN populations have a unique legal status and are the only racial group to be subject to double jeopardy under U.S. law. Not only can AI/AN persons be tried in tribal court for a particular offense, but their cases may also be tried in federal court, state, or municipal court

¹ The total correctional population consists of all offenders under the supervision of the adult correctional systems, including offenders supervised in the community under the probation or parole agencies, and those held in the custody of prisons or local jails.

depending upon jurisdiction. The populations' disproportionate federal incarceration rate is due to the chaotic U.S. treaty era which spawned the present justice system disparities, and "[t]he demography of jails and prisons at the county and state levels in the U.S. is disproportionately made up of individuals lacking property, position, and power," (Covin, 2012, p. 443).

Nationwide, 78,900 AI/AN persons were under correctional supervision in the U.S. in 2011 (Carson & Golinelli, 2013). Estimates show that more AI/AN persons are in prison relative to population size than any other ethnic or cultural group in the U.S. (Beran, 2005). In 1999 and 2004, the Bureau of Justice Statistics (BJS) report, *American Indians & Crime*, indicated that AI/AN persons account for just over 0.5% of felony convictions across the Nation. The rate of felony convictions is 1 for every 200 AI persons aged 18 or older, while the rate for whites is 1 out of every 300 adults. Four percent of the adult AI/AN population was found to be under correctional supervision (whites = 2%, African Americans = 10%, and Asians/Asian Americans <.5%). In 2011, 62% of AI/AN persons under correctional supervision were on probation or parole. On a per capita basis, AI/AN persons are incarcerated in prisons at a rate that is 38% higher than any other ethnic group in the U.S. (Ditton, 2000; Luna-Firebaugh, 2003). AI/AN arrest rates are the same for all ages, while the arrest rate for other groups is significantly higher for youths than adults (Ditton, 2000). AI/AN youth are two to three times more likely to be incarcerated than their white peers (National Opportunity to Learn Campaign, 2013).

AI/AN persons make up a small percentage of the national population (1.7%, according to the Census Bureau, 2011), yet there are no studies that offer an explanation for their grossly disproportionate imprisonment rate. Further, AI/AN persons tend to be lumped into artificial categories, such as "non-white" and "other" with statistics regarding behavioral risks, health disparities and incarceration rates (Holm et. al., 2010).

State of WI. The WI Department of Corrections (DOC) held a correctional population of 22,444 adult inmates in mid-2015. The prison population in WI has more than tripled since 1990, due to increased government funding for drug enforcement, prison construction, three strike laws, mandatory minimum sentences, truth in sentencing, heavy policing in minority communities and incarceration for minor probation and supervision offenses (Pawasarat & Quinn, 2013). The WI Department of Corrections operates 20 adult facilities, 16 smaller correctional centers and a Division of Juvenile Corrections. WI has 72 counties, and according to the latest jail census taken in 2006, there are 77 jail facilities and approximately 14,500 inmates. The Department of Corrections Division of Community Corrections supervised 68,636 persons on probation or parole as of November, 2014. WI leads the nation in incarceration of AI/AN men, with 7.6% of working age men (1 in 13) in state prisons and local jails in 2010, compared to 3.1% (1 in 32) nationally (Pawasarat & Quinn, 2013). The Census Bureau 2013 shows that 1.1% of the population of WI is AI/AN persons. In the State of WI, in 2011, the rate of incarceration for AI/AN youth was 3 times that of white youth (Wisconsin Council on Children & Families, 2011). This project thus focused on the experience of AI/AN persons reintegrating to an urban community in the state that is most disparately incarcerating AI/AN groups.

While the history of the colonization of AI/AN groups is still largely hidden by mainstream mythology in the U.S., recent events such as those that occurred in Ferguson, MO illustrate the racial disparities in the national and local justice systems. To fully understand the disproportionate incarceration rates of AI/AN persons, one must examine the historical oppression, stress, and trauma through which they continue to persist in the U.S. today. AI/AN groups have endured the oppressive acts and policies of many countries in both North America and Europe. "...American Indians experienced one of the most systematic and successful

programs of ethnic cleansing the world has seen,” (Whitbeck, Adams, Hoyt, & Chen, 2004). According to current estimates, about two thirds of the Indigenous people in North America were annihilated between 1500 and 1900. Other less conservative figures put that toll at 99% of the populations (Struthers & Lowe, 2003). In fact, it is apropos that the foundational work in intergenerational and HT was done with survivors of the Jewish Holocaust, since Adolf Hitler himself modeled his eradication of the Jewish population in Europe, after the U.S. policy toward AI/AN persons.

Theoretical Paradigms

The study of incarceration disparities and the facilitators and constrainers of reentry for AI/AN groups is complex and impacted by centuries of colonization effects. The theoretical model used to conceptualize this project’s data is Danieli’s (1998) Trauma and Continuity of Self: A Multidimensional, Multidisciplinary Integrative (TCMI) Framework. Danieli sought to understand the transmission of trauma as it relates to populations’ experiences, such as those of AI/AN persons and communities. She focused on the survivors of the Jewish Holocaust and their children, developing an individually based model.

The TCMI framework conceptualizes an individual’s identity as comprised of the interactions between multiple spheres or systems including interpersonal- familial, social, communal; the ethnic, religious, cultural, ethical, spiritual, natural; the educational/occupational; legal, environmental, political, national and international (Danieli, 1998). An individual may move through each sphere and experience psychological access to all identity dimensions. Dimensions of a person’s identity may include their significant identity constructs, such as race or sexual orientation, and contextual influences, such as family background and life experiences. The interplay between the multiple dimensions is what makes up the individual’s identity. When

an individual experiences trauma, such exposure may inflict a rupture and affect multiple identity spheres, causing a person to become “stuck,” which Danieli (1998) termed as “fixity.” This results in disruption and disorganization of the person’s understanding of the self, others, and one’s own relationship to all dimensions affected by the trauma. Again, because these dimensions are all connected, the model asserts that a disruption in one dimension may cause a disruption in the entire system. Without healing, this disruption and disorganization may be transmitted intergenerationally in a variety of ways, including oral and written history, or even silence about the event. In order for healing to occur, rupture repair is needed in all systems of the individual, including the self, community and international community—though the framework conceptualizes “community” as a context for the individual, and the framework does not accommodate a community’s experience of trauma. The framework asserts that the transmission of trauma occurs through generations as well as within communities:

“Multigenerational transmission of trauma is an integral part of human history. Transmitted in word, writing, body language, and even in silence, it is as old as humankind. It has been thought of, alluded to, written about, and examined in both oral and written histories in all societies, cultures and religions,” (Danieli, 1998, p. 2).

Persistence and coping can also be conceptualized using this same model. The TCMI model allows for evaluation of whether and how much of each system was ruptured or proved resilient and may inform systemic interventions.

Trauma Theory and American Indians/Alaska Natives

Duran’s (1990) doctoral thesis, *Transforming the Soul Wound*, was the first to address disparities from an indigenous perspective. He talked to traditional healers to understand the effects of trauma on the individual and AI/AN communities. He found that traditional elders,

leaders, and healers conceptualized the trauma as resulting from living under colonization, referred to as a wounding to the fabric of the soul. Duran coined the phrase “soul wound,” defined as a spiritual injury, soul sickness, and/or ancestral hurt. It refers to an individual and collective injury inflicted upon AI/AN persons as a result of colonization and oppression that manifests multi-, intra-, and intergenerationally. Soul wound also transcends time—thus it infers an intergenerational aspect (Duran, 1990). The Earth, Duran argued, had also been wounded in the respect that it was not respected and cared for through colonization and industrialization. He asserted that when the Earth is wounded, the caretakers of the Earth also are wounded at a deep soul level. This trauma, or soul wound, may be healed via individual and communal recognition through ceremony (ritual). Therapy is considered a ritual within Duran’s perspective. The soul wound construct is an Indigenous paradigm that finds little congruence with mainstream psychological, medical, and sociological conceptualizations of trauma.

Duran’s early research established the foundation for his work toward integrating the soul wound perspective with mainstream constructs. He partnered with Bonnie Duran to publish their seminal text in the field of AI/AN colonization effects and trauma: *Native American Post-colonial Psychology* (1995). The work utilized the Diagnostic and Statistical Manual (DSM IV-TR, 2000) construct of post-traumatic stress disorder (PTSD) as outlined in the DSM-III and DSM-IV to conceptualize soul wound. PTSD was defined as the experience of stress or fear, even after the event had passed. Three components of a PTSD diagnosis included re-experiencing (flashbacks, nightmares), avoidance (isolation, emotionally numb, strong guilt, depression, worry) and hyperarousal (easily startled, tense, difficulty sleeping, anger). Soul wound was seen to be embedded within the PTSD construct, and could be transmitted through time—thus intergenerationally. This reworking of the soul wound paradigm was more in line

with mainstream understandings and particularly focused on explaining alcohol abuse among AI/AN men.

Yellow Horse Brave Heart also endeavored to understand the disparities experienced by AI/AN persons. She found similarities between Danieli's work with the experiences of Holocaust survivors and their families during World War II (Yellow Horse Brave Heart & DeBruyn, 1998). Her work focused heavily on the intergenerational transmission of trauma. Intergenerational trauma is construed as trauma that is transferred through both explicit and implicit modeling, from the first generation of survivors to the second generation, and so on. The intergenerational perspective reveals the impact of the trauma in repeated patterns within the family. It may help explain certain behavioral patterns, symptoms, roles, and values adopted by family members as well as family sources of vulnerability and resiliency. Trauma and its impact may be passed down as the family legacy, even to children born after the event (Danieli, 1998). Direct transmission can include children who vicariously experience the trauma through stories heard about the experiences of their parents or grandparents, and may consequently suffer from associated psychological problems. Indirect transmission can include poor parental mental health or poor parenting styles as a result of the traumatic event, which may increase stress in children. Most of Danieli's foundational research focused on documenting the experiences and symptoms of her participants. However, as noted by Whitbeck et al. (2004), "there are many important differences between the Jewish [Holocaust] experiences...and that of American Indian people. The most important is the sense that the losses are not confined to a single catastrophic period. Rather they are ongoing and present," (Whitbeck et al., 2004).

Duran, Yellow Horse Brave Heart, and DeBruyn (1998) drew upon all the aforementioned work to develop their Historical Trauma (HT) paradigm. They found resonance

between AI/AN experiences and those of the Jewish Holocaust survivor's children, who reported visions and dreams about the horrors experienced by their parents that they never personally witnessed firsthand. Although many of the events AI/AN communities experienced as a result of colonization may have occurred over the course of many years and generations, they continue to have clear impacts on the individual and community today. HT refers to the cumulative emotional and psychological wounding, extending over both the individual lifespan and across generations, and is caused by significant group traumatic experiences. There are three distinguishing characteristics of the traumatic events: (1) The events were generally widespread among AI/AN communities; thus many people experienced or were affected by it; (2) The events generate high levels of collective distress and mourning in contemporary communities, either documented empirically or visible in narratives; and (3) The events are usually perpetrated by outsiders with purposeful and often destructive intent (Evans-Campbell, 2008). HT response refers to the features in the reaction to that trauma. For example, substance abuse is explained as a way to numb the pain and people may engage in self-destructive behaviors, such as suicidal ideation, to cope with difficult emotions, such as depression or anxiety. The construct of HT incorporates an Indigenous perspective and intergenerational piece, while adding the historical and artifacts of colonization.

Governmental Policies. In respect to HT among AI/AN peoples, there are a number of important governmental policies associated with the justice system in the U.S. that impact present day conditions for AI/AN persons in a HT lens. By its very nature, tribal sovereignty in the U.S. refers to the inherent authority of tribes to be self-governing. Tribal sovereignty has always been a contentious subject throughout U.S. history. Justice John Marshall stated in *Worcester v. Georgia* (1832) that Indian tribes are “distinct, independent political communities

whose inherent sovereignty was limited but not abolished as a result of coming under our guardianship,” (Fahey et al., 2011). Fifty years later, the government heard a case in which an AI person murdered another AI man in South Dakota on the Lakota Reservation. The Lakota tribe ordered the person convicted to pay restitution to the family of the deceased in the form of money, horses, and blankets. The federal government perceived this was an inappropriate punishment. They arrested, convicted and sentenced the person to hang for his crime. Since he was convicted and executed, there was no opportunity for restorative justice, as he could not therefore pay restitution to the deceased’s family for his crime. Historically tribes have used restorative justice so that families and victims would receive restitution throughout the lifespan, or other appropriate time period depending upon the transgression. In the case of a homicide, the family of the deceased would not then go without, since the deceased could no longer provide for his/her family. Given the lack of restorative justice in the federal government’s present punishment and ‘rehabilitative’ processes, the larger community rarely benefits from restorative justice. There is no rehabilitation in the execution of an offender. Exacerbating this fact, Congress passed the Major Crimes Act of 1885, which gave the federal government jurisdiction over felony offenses committed by AI/AN persons against other AI/AN persons in Indian Country (Fahey et al., 2011). Ironically enough, the federal government and modern criminal justice system are moving toward a restitution and reconciliation model: the same model they discredited over 100 years ago.

During the 20th century, the Indian Reorganization Act of 1934 was passed with the stated intention of conserving and developing AI/AN lands and resources; to extend to AI/AN groups, the right to form business and other organizations; to establish a credit system for AI/AN persons; to grant certain rights of home rule to AI/AN groups; and to provide vocational

education for AI/AN persons (Tribal Government Leadership Forum, 2013). Other purposes included the beginning of modern tribal courts. Additionally, Public Law (PL) 280 in 1953 was a “transfer of legal authority (jurisdiction) from the federal government to state governments which significantly changed the division of legal authority among tribal, federal, and state governments,” (Pecos Melton & Gardner, 2004; Fahey et al., 2011). Before PL 280, the federal government and Indian tribal courts shared jurisdiction over almost all criminal and civil matters involving Indians in Indian country, and the states had no jurisdiction. With the enactment of PL 280, states received jurisdiction over reservation-based AI/AN persons. The passage of PL 280 removed tribal sovereignty and states were not given funds to finance it, leaving major gaps of service. PL 280 continues to be opposed by many tribal nations and states.

The Indian Civil Rights Act of 1968 established a bill of rights requiring tribal courts to provide due process and equal protection for defendants while limiting tribal imposition of criminal sanctions. They were required to set up courtrooms in the mainstream model to meet the requirements similar to U.S. court proceedings (Fahey et al., 2011). In 1978, the Supreme Court ruled that tribal governments do not have criminal jurisdiction over non-AI/AN individual’s (U.S. Supreme Court, 1978; Fahey et al., 2011), regardless if the transgression by such a person occurred on sovereign tribal land. Although reservations were sovereign nations, many with their own police departments and courts in charge of prosecuting crimes on tribal lands, AI/AN police had thus no legal authority to arrest non-Indian persons. In only one example of the injustice this Act created, one tribal police force in AZ describes incidents in which AI/AN women are victims of domestic violence by their non-Indian husbands. The tribal police would remove the perpetrator from the home and from tribal lands with no repercussions. More often than not, the perpetrator would return. In March 2013, President Obama signed the Violence Against Women

Act (VAWA) Reauthorization of 2013, which, “recognizes tribes’ inherent power to exercise special domestic violence criminal jurisdiction (SDVCJ) over certain defendants, regardless of their Indian or non-Indian status, who commits acts of domestic violence or dating violence or violate certain protection orders in Indian country,” (Department of Justice, 2015). The law went into effect in March, 2015. Although it protects survivors of domestic violence, there is concern that it does not extend to other areas of violence that affect AI/AN women, including sexual assault. It also does not extend to Native women in Alaska. Most federally recognized tribes are organized under the Indian Reorganization Act of 1934, including some Alaskan villages. In 1971, the Alaska Native Claims Settlement Act passed, which created regional and village corporations under state law to manage money and lands granted to Alaska Natives by the act. Thus, there is different organization based on corporations versus reservations. According to Census Bureau, seventy-five percent of residents on reservations in the U.S. are non-AI/AN, and at least eighty-six percent of reported cases of sexual assault of AI/AN women, both on and off reservation, were perpetrated by non-AI/AN perpetrators (Department of Justice, 2015).

Although there are many other relevant court cases and Acts, these few help define tribal sovereignty and the relationship between federal, state and tribal governments. AI/AN Nations are now nearly completely disavowed of the opportunity to use their traditional sanctions for legal violations, including those based upon restorative justice. It is noteworthy that the mainstream justice system has developed an ad hoc interest in restorative justice, nearly disconscious of the history of forbidding such efforts by AI/AN Nations who practiced restorative justice for thousands of years. These issues are amplified for AI/AN persons living in off-reservation areas where they are subject entirely to the mainstream justice system.

Impact of governmental policies. The impact of colonization and the related traumatic experiences have changed the way AI/AN persons traditionally lived. HT in AI/AN communities is a result of genocidal policies developed and implemented by the a multitude of European occupiers, and most recently the U.S. government. The impact of HT includes economic competition, multiple wars and genocidal assaults waged against AI/AN groups, invasions of land and culture, relocation to Indian reservations, forced entry of AI/AN children into boarding schools and forced relocation to urban centers.

The boarding school movement warrants specific focus, having traumatically removed children from their families, eventually effectively stealing their parental rights and ability to enculturate their children. The boarding schools introduced non-Indigenous methods of authoritarian, institutionalized parenting in scores of cases. While enslavement of AI/AN persons during colonization first led to sexual abuse and exploitation among the populations under colonization, such sexual abuse continued and thrived throughout the boarding school period (Duran et al., 1998). The Department of Justice (DOJ) research has found that AI/AN women experienced more incidents of rape and sexual violence than any other racial groups within the U.S., and that more than one in three AI/AN women will be sexually assaulted during their lifetime (Department of Justice, 2015). Forced relocation from their tribal lands to urban centers and forced assimilation into the dominant culture, broken treaties, and other social injustices continue to affect AI/AN communities and persons in significant ways. These dynamics have intergenerational impact and continue to affect parenting among many AI youth today (Maupin & Bond-Maupin, 2005).

Historical Trauma and Disparity

There are many disparities that result from colonization, the aforementioned governmental policies, and the intergenerational transmission of trauma among AI/AN groups. AI/AN communities suffer from some of the highest rates of lifetime traumatic events, including interpersonal violence, child abuse and neglect, poor health, and negative stereotypes that affect AI/AN society and identity (Evans-Campbell, 2008). The following is a broad overview of many of the disparities that plague the populations and are correlated with disproportionately high incarceration rates.

AI/AN Youth. AI/AN youth suffer disproportionately from risk factors known to be common precursors to delinquency, including poor health, poverty, low educational attainment, violence, depression, and substance abuse (West et al., 2012). AI/AN youth are more likely to die before they reach adulthood, die an accidental death, die as the result of a homicide, complete suicide, be placed in court-ordered foster care, be placed in federal custody, experience violent victimization, and drop out of school when compared to youth in any other ethnic group (West et al., 2012; National Indian Child Welfare Association [NICWA], 2011). AI/AN youth also demonstrate elevated rates of past month cigarette use, marijuana use and nonmedical use of prescriptions drugs (SAMHSA, 2011).

Poverty. One in every four (25.3 percent) AI persons lives in poverty (APA, 2010) and 29.9 percent are without health insurance (U.S. Census Bureau, 2011). Counties in AI/AN tribal areas are among the poorest in the U.S. According to the Economic Research Service at the U.S. Department of Agriculture, nearly 60 percent of all AI/AN persons who live outside of metropolitan areas inhabit persistently poor counties. This is contrary to the popular belief that many tribes are wealthy due to gaming. Of the 566 federally recognized tribes, approximately

224 are involved in gaming. Within the mainstream psyche, attention is given to casinos with major success, such as the Mashantucket Pequot Tribe in Connecticut. This tribe is one of the most economically successful gaming tribes in the United States, at one point receiving profits of \$750,000 per tribal member annually (Fromson, 2003). Their success is the exception as opposed to the rule (Native American Rights Fund, n.d.). In reality, if the amount of money that was brought in by gaming for all tribes was evenly distributed to all AI/AN persons, they would still not come close to the average yearly income of other groups (Native American Rights Fund, n.d.). Further, most tribal land is situated away from economic opportunities, which results in low employment for many AI persons. This is interesting to consider, since land upon which most tribal populations live was chosen for them by the government that tried to terminate them (Rodgers, 2008). An example of extreme poverty is apparent on the Blackfoot Reservation in Montana, which has an unemployment rate of sixty-nine percent (Rodgers, 2008). The unemployment rate on the Menominee Indian Reservation in WI was 10.7% in 2003, compared to the state rate of 5.6% (Menominee Indian Tribe of Wisconsin, 2008). In the county of Milwaukee in September 2015, the unemployment rate for the entire population was 4.9% (Federal Reserve Bank, 2015). Covin, 2012, engaged in research regarding poverty and found that poverty is linked to many negative conditions, including homelessness, substandard housing, inadequate nutrition, lack of access to healthcare, poor performing schools, and unsafe neighborhoods, to name a few. Poverty also puts the population at a greater risk of violence and violence exposure, which can predict future violent behaviors in youth, which places them at greater risk of entry into the juvenile justice system, risk of injury and perhaps death (Covin, 2012).

Physical Health. AI/AN persons as a whole have a life expectancy of six years less than the general U.S. population (APA, 2010). The infant mortality rate is also much higher than the national average. The causes of death with the highest disparities include diabetes, unintentional injury and homicide (APA, 2010). AI/AN persons are significantly more likely than other ethnic groups to die from an alcohol induced death, tuberculosis, diabetes, unintentional injuries, suicide, and homicide (APA, 2010; Urban Indian Health Commission, 2007). Many of the studies on AI/AN persons and alcohol use focused on AI/AN persons living on reservation, even though only 1/3 of AI/AN persons live on reservations. In addition to the enormous physical and emotional tolls of alcohol abuse, “the problems have also led to an unfortunate stereotype that has further burdened the Native communities in North America,” (Beauvais, 1998). The stereotype of the “drunken Indian” reinforces a long held belief regarding indigenous people and alcohol, and has a lasting impact as it is difficult to avoid in mainstream society. The idea is that all AI/AN persons are “drunks” and have problems related to their use of alcohol. Alcohol is considered a cultural trait and there is a stereotype that AI/AN’s have a very high rate of alcohol use, when in reality, they also have a high abstinence rate (Beauvais, 1998).

Little has been done to ameliorate the significant health disparities faced by the AI communities. Thirty-two percent of AI/AN persons smoked cigarettes compared to an overall estimate of twenty-one percent for all adults in the U.S. (CDC, 2008). Adult car-related death rates are three times higher than for whites, and almost two times as high as African Americans (U.S. Department of Health and Human Services, 2012).

Symptoms of HT Among AI/AN Persons in WI

For many AI/AN persons, correctional facilities can be considered the gatekeepers for physical health, as this may be the first time they are seen for physical health disparities.

Between 2001 and 2005, the four leading causes of death among AI/AN persons in WI were heart disease, cancer, unintentional injury and diabetes. An estimated 36 percent of AI/AN adults in WI smoke cigarettes (WI Dept. of Health Services, 2012); with some tribes such as the Menominee approaching 50% rates (Menominee Indian Tribe of Wisconsin, 2008). AI/AN persons in WI have higher rates of death from heart disease (WI Dept. of Health Services, 2012) than any other racial or ethnic group. According to the report by the WI Department of Health Services, 33% of AI/AN adults in WI reported binge drinking, 41 percent reported they were physically inactive in terms of leisure-time activity and 65 percent of AI/AN adults were overweight or obese. They were also less likely than the total population to have health insurance (WI Dept. of Health Services, 2012).

AI/AN persons in WI experience serious psychological distress, 1.5 times more than the general population (APA, 2010). They suffer a high prevalence of depression, suicide, substance use disorders, and anxiety, including PTSD (West, et. al., 2012). According to Duran & Duran (1995), most of the literature on the health problems plaguing AI/AN communities is psychological in nature. AI/AN communities generally suffer from significant rates of alcoholism, depression, anxiety and have the highest suicide rates among any ethnic group. Correctional facilities have also been identified to serve an important gatekeeping role for AI/AN persons regarding mental health, as this may be the first time they are seen for mental health disparities, resulting in the first time they may be treated for mental health concerns (Novins, et al., 1999).

Barriers to Successful Reentry. A combination of disparities along with the transmission of HT can create major barriers to successful reintegration after incarceration. Reentry refers to returning to the community from jail or prison. These health-related,

sociological, and psychological characteristics may be viewed by mainstream society as a race-related problem. Thus, the traumatized group may be seen as less capable, less desirable, and more troubled.

“The social conditions within the U.S. society that contribute to criminogenic pathologies include homelessness, poverty, social location, drug and alcohol addiction, undiagnosed mental illnesses, dysfunctional familial patterns, underperforming pedagogical institutions, and a criminal justice system struggling with the juxtaposition of rehabilitative and punitive justice,” (Covin, 2012, p. 439).

Furthermore, in the case of AI/AN persons, the relatively hidden history of colonization and the incorporation into the U.S. mainstream psyche of the noble savage stereotype, have created a historically de facto invisibility for these groups.

Nearly 750,000 people were released from incarceration in 2010 in the U.S. (Hattery & Smith, 2010). This amounts to roughly 1600 inmates per day. The National Institute of Justice (2014) estimates that 97% of all inmates now in prison will eventually be released and return to their communities. Most ex-offenders will return to impoverished communities. Inmates released from these facilities face barriers in successful reentry. “People leaving incarceration tend to have low incomes, and, often due to their criminal history, lack the ability to obtain housing through channels that are open to other low-income people,” (Blasco, 2011, p. 1). These are key structural barriers to success for any returning offender. Barriers include unemployment, employment bans, housing, lack of social welfare programming (e.g., cash assistance, food stamps, public housing), student loans, driver’s license and children (Hattery & Smith, 2010; Covin, 2012). For example;

“The Higher Education Act of 1998 makes students convicted of drug-related offenses ineligible for any grant, loan or work study assistance. This federal barrier cannot be lifted by states. No other class of offense, including violent offenses, sex offenses, repeat offenses, or alcohol-related offenses results in the automatic denial of federal financial aid eligibility.” (Hattery & Smith, 2010, p. 21).

Due to the lack of resources to deal with these barriers, correctional systems appear to operate on a revolving door concept in which people are released and re-enter facilities at a staggering rate. Recidivism refers to returning to jail or prison after release from one’s initial sentence. The recidivism rate is calculated across the three-year period after release from incarceration. The U.S. recidivism rate is currently 67% (Hattery & Smith, 2010) for all groups. Thus, 67% of inmates released from incarceration will be incarcerated again within three years of their release. In a meta-analysis of over 336,000 offenders in which researchers examined the relationship between time spent in prison and offender recidivism, Gendreau and Goggin (1999) found no evidence that prison sentences reduced recidivism. Rather, they found that longer incarceration led to increased recidivism (Gendreau & Goggin, 1999).

Urban populations in general face unique social challenges. Minority families and their communities are now feeling the consequences of imprisonment and release in unprecedented ways (Petersilia, 2003). There are communities, especially in urban areas, that have been decimated by the removal of either one or both parents from the home as a result of being incarcerated, (Petersilia, 2003; Covin, 2012). Incarcerated persons rarely return to affluent communities, but rather return to communities in which unemployment is high and employment opportunities rarely exist. In Milwaukee, WI in 2009, most ex-offenders returned to inner-city neighborhoods in which the gap between the numbers of active job seekers compared to

available full time work was 25 to 1 (Pawasarat & Quinn, 2013). Although much of the discourse on racial disparities exists for the African American communities, other populations have also experienced systematic discrimination on the basis of their race and/or ethnicity, particularly AI/AN populations (Thomas & Quinn, 2008). About two-thirds of AI/AN live in urban, suburban or rural, non-reservation areas. (APA, 2010; West et al., 2012). There are no studies that examine reentry issues with AI/AN groups.

Reentry Programs. There are programs available to inmates that can help with their reentry process. According to Bouffard and Bergeron (2006), reentry programs in prisons assist inmates with successful reintegration into their communities. Successful reentry programs start before the inmate is released and includes programming on substance abuse, life skills, education and mental health. They also focus on the offender's charges, particularly in the event of a violent and/or sexually based offense. Prisoner reentry programs help to identify the needs of inmates, while providing them with the necessary resources to maximize successful reintegration into society (Bouffard & Bergeron, 2006). A primary concern with reentry programs are budget cuts. The recent sequester in the federal government led to many cuts in the Federal Bureau of Prisons (BOP). It cut \$338 million from the BOP's current budget and over 36,000 staff faced 12 furlough days (Pavlo, 2013). Although there was a reduction in budget and resources, the number of inmates stayed the same. Because of this, the BOP needed to implement full or partial lockdown and reduced inmate reentry programs (Pavlo, 2013). When facilities are forced to make cuts, reentry programs and mental health services are the first areas to get cut. Most federal governmental funding is focused on maintenance of facilities. Congress recognized the importance of reentry issues and services when they passed the Second Chance Act in 2007. It

provides federal grants for programs and services to help facilitate the reentry process to reduce recidivism and improve offender outcomes.

Historically, AI/AN communities were able to utilize their own mechanisms to maintain peace and order. They had the authority for public safety and responsibility and were able to utilize their own justice structure, specifically restorative justice. Due to policies instituted by the federal government as discussed earlier, tribes do not have full jurisdiction over their own citizens and tribal lands. Most tribes that have law enforcement departments utilize tribal funds, as well as federal funds from the Bureau of Indian Affairs or through contracts with the Department of Justice. Tribes manage 82 jails and detention facilities on tribal lands. Each tribe has its own law enforcement standards that may be different than the state and federal policies, leading to issues with enforcement, punishment and reintegration. As of March 2015, the VAWA act allows tribal police to arrest non-AI/AN persons for domestic violence, dating violence and criminal violations of protections orders. Otherwise, they have no jurisdiction over non-AI/AN persons when crimes are committed on tribal lands. It is likely that there are probably other elements emic to individual AI/AN cultures that could be helpful to those reentering, and the hope is to explore what those might be (i.e., the facilitators, spiritual leaders) with this project.

Bouffard and Bergeron (2006) conducted a study focused on the effectiveness of the State of North Dakota's Serious and Violent Offender Reentry Initiatives (SVORI) program as considerable federal funding is currently utilized to implement many of these types of programs. SVORI receives most of its funding from the federal government and is the most common reentry program at the state level. This type of program is a collaborative effort with the federal government to concentrate on improving criminal justice, employment, education, health, and housing outcomes of offenders. Sixty-nine state and community agencies have received funding

through SVORI to facilitate reentry and reintegration. Bouffard and Bergeron evaluated 71 SVORI participants and 106 comparable offenders who did not participate in the reentry services, but received traditional, pre-release services before being released. Their results indicated there was no significant difference between the SVORI participants and traditional mainstream programming when it comes to revocation of parole. Persons have their parole revoked for a variety of reasons, from alcohol and/or drug use to re-offending, resulting in new charges. For offenders that successfully completed parole, 30.9% were rearrested while 28.3% of offenders who did not participated in SVORI groups were rearrested after successfully completing parole. This finding was not statistically significant, however. It would therefore be beneficial to explore what, if any, programs offered to incarcerated individuals helped with successful reentry so changes, if necessary, could be made to existing programs

Previous researchers have found that although there are fewer resources for individual inmates, many inmates choose not to participate in programming offered by their facilities. For example, Petersilia (2003) found that only 12% of prison inmates took part in pre-release planning programs (Bouffard & Bergeron, 2006). “The general increase in prison time served by inmates, changes in sentencing policies, decreased monies spent on prisoner rehabilitation programs, greater disorganization of communities and larger numbers of ex-inmates reentering the community are aiding the renewed interest in prisoner reentry programs and research,” (Bouffard & Bergeron, 2006, p. 5). Lack of funding also affects reintegration programming for tribally-based entities.

The Reentry Project

There is scant literature addressing the incarceration rates of AI/AN persons, and no studies examining their disproportionate imprisonment. Thus, there is even less information on

reentry programming with AI/AN offenders. The purpose of this project was to use the Extended Case Method (Burawoy, 1991; 1998) to explore the impact of incarceration on recently-released AI/AN individuals in an urban area, and thus their families, and communities. The effects of trauma-related disparities on a full ecological level are presumably formidable and will be explored to understand the barriers, resources, and experience of incarceration on AI/AN participants. In addition, the project utilized Danieli's TCMI framework to provide context to the data. The university – community agency partnership worked to address the following aims:

1. What is the AI/AN experience of incarceration (supports/challenges), and how (if at all) is racial/ethnic identity/culture a factor in incarceration?
2. What is the experience of re-entry (supports/challenges) for AI/AN persons in an urban setting after six or more months of incarceration?
3. How do issues of Historical Trauma factor into the two previous aims, if at all?

CHAPTER III: METHODOLOGY

Core Tenets of the Extended Case Method (ECM)

While Danieli's TCM Framework provides a framework for organizing the findings, the Extended Case Method (Burawoy, 1991; 1998) was selected as the project's methodological theory. A case has been made in the literature that its orientation toward indigenous methods of data collection is congruent with AI/AN Indigenous ways of knowledge gathering, which is a holistic approach (Rouse Arndt & Davis, 2011). The method offers data collection techniques that go beyond traditional case studies, considers all relevant sources of information, and is not constricted by the mainstream time or space constructs (Burawoy, 1998), and thus can incorporate both contemporary and historical data, including significant events. The ECM conceptualizes the theory of methodology as distinct from the vehicle of research. Theory therefore, does not prescribe how to gather data; rather the population and community dictate such according to their ways of knowing. In this project, the primary investigator considered relevant sources of information including personal narrative which included a family history and public records from the State of WI with regards to criminal history.

ECM draws from micro case analysis as well as the individual's entire ecological and sociopolitical context at the macro level. It also allows for both inductive and deductive methods of analysis, thus accommodating the emic while allowing for conceptual and theoretical reconstruction or augmentation as necessary. The specific topic and population at hand do not benefit from a well-established body of research and long-standing empirically validated constructs for exploration or testing. As a qualitative case analysis approach is most appropriate when exploring situations in which phenomena (coping with reentry) and context (AI/AN identity/culture) are difficult to disentangle from one another (Morrow, 2007; Yin 1989), it is

useful to also accommodate macro influences on intersectionality, such as community support during reintegration. Primary to the ECM is the reflexive process and reflectivity in the data analysis process; different ways of seeing produce a more developed understanding of the phenomena and act to triangulate findings. Each researcher also has a position or background that effects what is investigated, analysis, etc. ECM calls for a consideration of such positions, beliefs, and perspectives the researcher may hold, in an effort to understand innate biases and their role in analysis. Multiple researchers were thus involved to maintain credibility and triangulate the findings. The reflectivity process aims to review and evaluate procedural analysis, also to bolster trustworthiness, credibility and data triangulation in the qualitative process.

Core to the ECM is the acknowledgement that the researcher can never be a true insider-participant. The researcher is positioned as an insider-participant-expert, owning the fact that researchers come into partnerships with a unique lens, knowledge, and training that sets them apart from the community in critical ways. This perspective requires that the researcher actively acknowledge his/her role and power differential in the partnership, and actively processes his/her role (Rouse Arndt & Davis, 2011). This aspect of the ECM is particularly critical in this project, given the historical reticence to trust researchers among many AI/AN populations—who have been part of the infliction of harm historically and in profound ways, including via research (Duran & Duran, 1995). In fact, the principal investigator is a white woman entering into the community to conduct research. “A high level of mistrust exists among Native American people to anyone asking questions, regardless of the good promised by the results of the research and often regardless of the tribal affiliations of the researcher,” (Duran & Duran, 1995, p. 25) Struthers and Lowe (2003) discussed the needs for culturally appropriate strategies to heal HT. These strategies should be derived from ancient knowledge and the world view of the AI/AN

persons and the ECM allows for incorporating emic perspectives, not relying solely on mainstream views.

Finally, since a primary goal of the ECM is to confirm, augment, or re-construct existing theories as relevant, the methodological theory focuses on what would be construed as outlier data as a means of examining theory. This is in contrast to some theories in both the quantitative and qualitative traditions that tend to discount “outlier” data and seek to identify the commonalities among a sample or population. All of the data gathered in this project were analyzed and reported, even if only reported by one participant.

Community Research Partnership

The principal investigator utilized a university - community partnered research approach to develop this project at the request of the agency. The principal investigator was asked to help the agency partner to better understand the needs of their service population re-entering the community after incarceration. The stated mission of the partner agency is to assist AI/AN individuals in successfully entering the workforce. The agency sought to explore reentry as clients with a criminal history seemed to remain on the agency’s caseload for an extended period of time, even with full implementation of the agency’s resources. The agency sought to understand whether more could be done to help their clients. The agency partner aimed to learn of opportunities to gain understanding of the barriers and resources available for AI/AN persons who are reentering after a period of incarceration. The stated goal of the agency was to refine its service-delivery with the information gathered through the project, in an effort to better meet its mission. The agency Director at the start of the project indicated that information gained via the work would be shared with the AI/AN community at large.

Participants/Sample Characteristics

Participants included 12 American Indian and/or Alaska Native adults (18+ year) who were recently (within five years) released from incarceration, identified as enrolled (n=10) or legal descendants (n=2) of federally recognized tribes, resided in WI, and were receiving services from the partner agency, or on the waitlist to obtain services. Ten of the participants were enrolled in their tribe and two were identified as legal descendants, although all were eligible for services. There were nine male participants and three female participants. All participants spent at least six months incarcerated in a jail or prison facility. The timeframe of six months was chosen as the U.S. Federal Prison Book (n.d.) suggested that incarceration of six months or less is considered short term, resulting in less difficulty with reentry. The length of incarceration has an impact on the barriers and facilitators a person faces when released. The mean age of the sample was 38 years (range = 21 - 56 years). Finally, as part of the comprehensive history questionnaire (see following section), data were collected regarding the participant's experiences with common medical and/or psychological symptomology that are well established in the HT research with AI/AN groups.

Data Collection

Two tools were utilized for this project to gather historical and existing data for each participant. They included the Comprehensive History Questionnaire (CHQ) and semi-structured interviews.

Comprehensive History Questionnaire (CHQ). The Comprehensive History Questionnaire (Appendix A) was originally used in a study of intergenerational trauma and coping with grandchildren of survivors of Stalin's purge in Russia (Baker & Gippenreiter, 1998). It has since been adapted and used to gather specific symptoms of HT among a number of

populations (e.g., LGBTQ-identified persons (Charles & Rouse Arndt, 2011; the Hmong (Xiong & Rouse in progress), and AI/AN populations (Rouse Arndt & Davis, 2011). The questionnaire gathered initial data on participants' family history with the goal of further informing the interview session. The CHQ was adapted for use with this project due to its utility in gathering critical information on possible barriers for the project sample and the community partner. The CHQ addressed symptoms well established in the HT literature with AI/AN populations and served to inform the interview process.

Participants were also asked to respond to qualitative, open-ended statements to share qualitative data on their perceptions of identity on their correctional experience, as well as their experience with re-entry. These statements were developed with the partner agency Director, the research advisor, and community consultants. The statements were included on the CHQ and are included below:

1. Being an American Indian/Alaska Native and incarcerated in jail or prison
2. The problem with re-entry after incarceration is
3. My feelings when returning to my community after incarceration include
4. The least difficult part about returning to the community is

During the data gathering portion of the project, some participants answered questions on the CHQ before they interviewer could ask them. This was a good sign the tool was capturing items related to HT and incarceration. Thus, the CHQ tool utilized for the project seemed to gather critical information on supports and challenges for the project sample, as well as to inform the interview process.

Interview Protocol. Semi-structured interviews were conducted with questions developed after an extensive review of the literature regarding the experience of reentry after

incarceration, as well as with the help of the partner agency Director, research advisor, and community consultants. Questions were also developed to meet the needs of the agency partner to determine why individuals with a criminal history remained on their caseload longer than other clients. Seven open-ended questions were used to allow the participants to express themselves with little influence by the investigator. The interview questions were used to address the following aims: (1) What is the AI/AN experience of incarceration (supports/challenges), and how (if at all) is racial/ethnic identity a factor in incarceration?, (2) What is the experience of re-entry (supports/challenges) for AI/AN persons in an urban setting after six or more months of incarceration?, and (3) How do issues of Historical Trauma factor into the two previous aims, if at all? The interview questions appear in table 1, along with the study aims addressed by each question.

Table 1. Research Questions and Associated Aims

| Research Aims/Probes | Aim 1 | Aim 2 |
|---|--------------|--------------|
| 1. What strengths did you have in your life before being incarcerated? During incarceration? | X | |
| 2. What challenges or barriers did you have in your life before being incarcerated? During incarceration? | X | |
| 3. What strengths have you experienced after your release? | | X |
| 4. What do you see are challenges or barriers since your release, if any? | | X |
| 5. What has your experience been like since returning to the | | X |

community after incarceration? Strengths? Barriers?

6. What role, if any, has your family, community, and/or tribe played in your re-entry process? X
7. What were some of the resources you have utilized since returning to the community? (specify if any used from jail/prison) X
-

Research Team and Consultant General Characteristics

The faculty investigator has a Ph.D. in Counseling Psychology and identifies as a woman of Métis heritage specializing in trauma with forensic populations, intergenerational HT, consultation with AI/AN communities in regards to culturally appropriate research and interventions, and is a qualitative methodologist. The student members of the team were two Latina counseling psychology doctoral students and one white female counseling psychology doctoral student. All student members were trained on qualitative research and analysis. Additionally, the team was augmented by community consultants. They provided advice about the efficacy of the informed consent process and implementation of the research protocols. One community consultant was AI/AN-identified person and worked with community members at a health center, which provided services to the urban AI/AN community. Another AI/AN-identified consultant worked with AI/AN persons at a community agency focusing on workforce development. One white identified consultant worked through the reentry process personally and worked at a community agency focusing on workforce development. Another white-identified

consultant worked with the homeless population in the city. Three of the consultants were identified by the agency Director while one was identified by the primary investigator.

Principal Investigator's Biases and Trustworthiness. The principal investigator brings her experience as a counseling psychologist in training with a focus on trauma and stress issues facing law enforcement and inmate populations. As a racial and cultural outsider, she brings an understanding of AI/AN populations that has been acquired through mainstream education and practicum immersion experiences at the partner site. The principal investigator worked with the community agency as a practicum student when the agency included a high school, and also during a consultation project aimed at completing a service needs assessment. She also offered volunteer services, tabling at community events and administering a survey for the community agency at a festival. She is experienced in utilizing the ECM and in participating in the reflexive-reflective processes in qualitative research, having completed research using the method for more than five years. This opportunity has given her the chance to re-explore her biases and to gain insight into her personal experiences of HT, including a familial history of domestic violence, sexual abuse and divorce.

Procedure

Participants were recruited by the agency Director through the agency, which assists AI/AN persons in their efforts to successfully reenter the community after release. Since all of the criteria, besides incarceration history, were necessary for the participant to obtain services at the agency, the only additional question asked for the project was if the participant had been incarcerated for at least six months in the past. If yes, the agency Director asked if they were interested in being contacted regarding the project. Participants were reminded that their participation was voluntary and had no effect on their services received through the partner

agency. The Director provided the contact information to the principal investigator when persons consented to be contacted. The Director explained that participation in the project could count as their enrichment project for the month. This was only one of several options for the enrichment activities for the month, and the participants were not required to participate in this project to complete an enrichment activity. The monthly enrichment program was explained by the Director as a way for their clients to receive transportation (gas cards, bus passes) or grocery store gift cards in exchange for completing activities related to their employment search. Activities could include applying for jobs, attending trainings and completing a resume, for example.

Once participants were selected, informed consent forms (Appendix C) were presented by the principal investigator, detailing the purpose and structure of the project. This included information about the project, what to expect, length of time for participating, benefits and risks, incentives for participation, confidentiality, and understanding of voluntary participation. The Consent Form was written at a seventh grade level. It was read to the participant by the principal investigator and then signed by the principal investigator and participant. After obtaining consent, the participant was given the Comprehensive History Questionnaire to complete independently before the first interview. Participants were encouraged to gather as much information as they could as it pertains to the form, but it was reviewed and discussed during the interview. Participants were not asked to take the survey home to complete with others, nor to seek information from any additional persons. Six participants chose to take it home to work on independently, to minimize meeting time with the principal investigator. The survey questions mirrored routine medical questions on family history in Indian Country, particularly related to HT. This is standard practice measuring constructs of HT within AI/AN communities, as is

inclusion of the Adverse Childhood Experiences Scale (which the project did not include). Family members were not solicited in this project. Home completion was an option- the tool was provided as in past projects--in a sealed envelope to the participant, for those that chose to take it home to complete. Participants were advised to maintain it in that envelope until returned to the principal investigator to ensure confidentiality. No personally identifying information appeared on the envelope to help ensure confidentiality.

All interviews took place at the community agency to ensure confidentiality of the participants and averaged one hour in length. Information collected for this project was completely confidential and no individual participant was ever identified with his/her interview information. The 12 participants completed their interview face-to-face and consented to being audiotaped. Participants were reminded that audiotaping could be stopped at any time, and they could choose to participate and not be audiotaped. Audiotaping helped ensure the accurate gathering and recording of the data. Audiotapes were transcribed for coding accuracy. The principal investigator also searched for each participants on Wisconsin Circuit Court Access, a public website utilized to access public records of the WI Circuit Courts. Since many participants had difficulty with remembering details regarding their incarceration and/or criminal history, including dates and length of time spent incarcerated, Wisconsin Court Access was utilized as a way to gather additional information, as well as to triangulate the findings.

After the data were collected, transcribed and analyzed, the participants were contacted to discuss the findings to ensure that all information was collected correctly, known as member checking (Lincoln & Guba, 1985). Member checking is a technique used to help improve the accuracy and credibility of qualitative research. Member checks allowed the participants to critically analyze the findings and comment on them, by providing an additional layer of

triangulation (similar to the concept of reliability in quantitative research). The debriefing of participants was completed by the principal investigator over the telephone. No script was used, and instead a general conversation was had about the participant's feedback on the data they shared. Participant transcripts of the interview protocol ranged from eight to 20 pages double spaced.

Participants were offered a \$15 gas or grocery store gift card for each hour of participation in the project. The limit was \$60, which was equal to four hours of the participants' time. Participants were reminded that the data collection could go over the four hour period, although none did. The limit on the incentive for participating in this project was equal to the time period for their enrichment activity at the partner agency. Participants were also entered into a drawing for a \$50 grocery store gift card, which will be issued after completion of the project. The agency director managed the process of providing the gift cards.

Data Analysis

Data were analyzed using reflective and reflexive processes by the principal and faculty investigator and the research team members to ensure trustworthiness and data triangulation. It included inter- and intra-case coding as well as coding in the NVivo 10 qualitative program. Researchers independently read and coded each case to extract common themes in the data. Data were categorized by first abstracting the two large deductive domains, (a) supports and (b) challenges. Data were then rendered to six themes identified deductively in the study's conceptualization: (a) pre-incarceration life supports, (b) pre-incarceration life challenges, (c) during incarceration supports, (d) during incarceration challenges, (e) post-incarceration supports, and (f) post-incarceration challenges. The "pre-incarceration supports and challenges" were selected because of their importance in the literature on AI/AN experiences and how this

can have an effect on behaviors. The “during incarceration supports and challenges” were selected because of their importance in the literature on experiences during incarceration and how this can have an effect on behaviors during incarceration and post-release. The “post-incarceration supports and challenges” were selected because of their importance in the literature on re-entry, which was a primary focus of the study. Once the data were analyzed for the domains and themes, further analysis was conducted and found no additional large domains or themes. Themes were then rendered to categories and subcategories utilizing first the deductive themes of received theory (e.g., risk for incarceration and troubles with reentry include poverty, familial disruption, etc.) and inductive analysis process (i.e., themes that emerge organically from the data). Inductive analysis was utilized to capture emerging constructs that might affirm, augment, or dispute existing theory as necessary. Although much of the literature explained the supports and challenges reported by participants, there were data that could not be explained by the literature. Thus, the inductive analysis uncovered additional subcategories. With ECM, it is important to search for and discuss the elements of the data that do not support or appear to contradict patterns emerging from analysis. This “outlier” data is used to better understand emerging patterns from the data, even if only endorsed by one participant. The information is still utilized in analysis and discussed.

Individual participant member checking was then conducted, at which time participants were offered the opportunity to provide feedback on the findings related to their data, adding another layer of triangulation to the data. Participants were called at the phone numbers provided at the beginning of the project to discuss their data. No additional categories or subcategories emerged from member checking.

Finally, since the partner agency had a new Director after the completion of data collection and the first round of analysis, feedback was sought by the new Director. The new agency Director had a different vision for the agency, and viewed some of the findings differently from the first Director. This feedback provided an important final tier of scrutiny on the findings.

Procedural reflexivity and trustworthiness. To help avoid the imposition of personal biases on data analysis, Lincoln and Guba's (1985) standards for trustworthiness were utilized throughout the process. The community consultants' input was sought when identifying the problem, throughout the development of the design and procedures, as well as during data collection, and analysis. The principal investigator consulted with the faculty investigator to select the study's theoretical perspective (TCMI framework), and the methodological framework (ECM). The principal investigator consulted with the faculty investigator, research team, and community consultant's to select the study's deductive domains of analysis, the use of the CHQ, the development of interview questions and data analysis. She also kept a journal reflecting on the methodological framework, participant interactions, and the process of analysis. The reflexive journal was utilized to establish trustworthiness in the research process. It served as a way to document research decisions as well as for the researcher to examine personal assumptions and goals, and clarify individual belief systems.

The principal investigator's reflective and reflexive processes figured into the analysis and findings. The principal investigator has worked in correctional settings for approximately five years, which brings about a different lens compared to working with persons reentering after incarceration. There was considerable knowledge of the correctional systems, which helped in analyzing the data, especially when focusing on the "during incarceration" experience. It was

also helpful in recognizing the lack of reentry services at all correctional levels, from county to state to federal.

During the project, one of the participants was murdered after participation and after data collection was closed. The faculty investigator, a faculty consultant member, the Institutional Review Board (IRB), and the community partner Director consulted to process their shock and the implications for the use of the participant's data. It was decided that the data would be utilized, as this tragedy was representative of the AI/AN experience in relation to violence and the urban experience, illuminating the highly disparate need AI/AN persons have for support in reintegration.

Thoughts related to research ethics were also discussed between the principal investigator and faculty investigator. During the first interview, it was difficult to get enough information and initially there was concern that the principal investigator did not gather enough information for the project. The principal investigator discussed concerns related to her non-AI/AN presentation as off-putting to participants as opposed to understanding the process of research. The participants might not have shared all of their information to the much warranted historical reticence of the population to participant in research (Rouse Arndt & Davis, 2011). This was also explored when the partner agency director stepped down and a new director took her place. During the transition, there was concern about the project, as much of the information about the project's intent and design had not been shared with the new director. A discussion among the faculty investigator, new director, and IRB was utilized to address concerns and to also provide the new director with access to the de-identified raw data.

Another challenge during the project was encountered with the untimely death of a primary community consultant, who worked closely with the agency clients and provided

guidance to the principal investigator during the project. The deaths of both a community consultant and a participant after data collection solidly underscore and highlight the disparities faced by AI/AN populations and outlined earlier in this document. Further, these events made salient for the entire project partnership, the propensity for exposure to grief, loss, stress, and/or trauma within the community. The events that unfolded during the project were of importance to understanding the AI/AN experience.

As a final means of seeking triangulation to bolster trustworthiness, the new agency Director provided substantial feedback on the findings. She commented on both the themes and the implications for the agency and the clients served. Her thoughts were somewhat divergent on the direction the agency should take for customer service for reintegrating offenders, and this additional feedback provided an excellent insider perspective in guiding final analysis. For example, one suggestion by a participant was that services in the community should be better advertised. The Director suggested that word of mouth is a fairly common way to “advertise” in American Indian country since many AI/AN persons typically do not go to unknown programs. They need a vouch from friends or family and advertising is typically not well received. She revealed concerns the agency has in regards to client’s readiness to work. Clients seek the services out as opposed to the agency seeking clients. She also had concerns that some of the recommendations by participants as well as the investigators would cloud their agency goal, which is employment, although she understands some of these suggestions (transportation, alcohol and other drug abuse services) are barriers to securing and maintaining employment.

CHAPTER IV: RESULTS

Demographics

The Comprehensive History Questionnaire (CHQ) gathered data on participant demographics and their HT experience if relevant. Data from the CHQ indicated the following basic demographic information: The mean age of the sample was 38 years, (range = 21 - 56 years) and all participants identified as heterosexual in orientation. The sample included three women and nine men and was diverse, with 10 different tribal affiliations including Oneida, Mole Lake, Oneida/Stockbridge, Stockbridge Munsee Mohican, Bad River Band of Lake Superior Chippewa, Lac du Flambeau, Odanah Ashland LCO, Menomonee, and Ho-Chunk. Ten participants identified as enrolled in their tribe while two identified as legal descendants. Five participants listed clan/band affiliations, including Bear, Turtle, and Wolf. Participants identified themselves by three racial identities, including Native American, AI/African American, and Biracial. None of the participants indicated they spoke a traditional AI language, with all reporting English as their primary language. Legal history for participants varied. Length of sentence was not calculated, as many participants were unable to recall specific dates and public information available to the agency partner via Wisconsin Circuit Court Access did not have adequate information on probation violations.

Table 2 offers a visual summary of information collected by the CHQ. The information is also presented in demographic case summaries below, that serve as a backdrop for the remaining findings.

Table 2. Familial and Social History

| Event | Self | Mother | Father | Maternal Grandmother | Maternal Grandfather | Paternal Grandmother | Paternal Grandfather | Other Sig. Relationship |
|----------------------------------|------|--------|--------|----------------------|----------------------|----------------------|----------------------|-------------------------|
| Foster Care | 6 | 1 | 0 | 0 | 0 | 0 | 0 | 5 |
| Mainstream Adoption | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 3 |
| Attend Boarding School | 1 | 3 | 5 | 3 | 5 | 2 | 5 | 2 |
| Spoke traditional language | 2 | 0 | 0 | 0 | 2 | 0 | 0 | 2 |
| Belong to Native American Church | 2 | 1 | 0 | 2 | 0 | 0 | 0 | 0 |
| Military | 0 | 1 | 2 | 0 | 2 | 0 | 0 | 2 |
| Suicide Attempt | 2 | 2 | 0 | 0 | 0 | 0 | 0 | 5 |
| Domestic Violence | 10 | 7 | 6 | 2 | 2 | 0 | 0 | 10 |
| Physical Assault Victim | 6 | 5 | 4 | 1 | 1 | 1 | 1 | 5 |
| Sexual Assault Victim | 1 | 2 | 1 | 1 | 1 | 1 | 1 | 4 |
| Serious Legal Problems | 12 | 0 | 5 | 0 | 0 | 0 | 0 | 10 |
| Discrimination due to Heritage | 5 | 2 | 2 | 2 | 2 | 2 | 2 | 4 |
| Crime Victim due to Heritage | 3 | 2 | 2 | 1 | 0 | 0 | 0 | 3 |

Participant Demographic Summaries

Following are brief summaries of participant stories based upon the basic demographic information and data gathered based upon received theory via the CHQ—which focused primarily on gathering details on both risk (e.g., HT, proximate trauma) and protective (e.g., enculturation, spiritual orientation, community/family cohesiveness) factors for incarceration and challenges to reentry. The summaries provide a springboard for the consideration of the themes,

categories, and subcategories that emerged in both the deductive and inductive analysis processes.

Sarah

Participant #1 is Sarah, a female in her mid-twenties. Her case demonstrated some substantial risk for intergenerational transmission of HT, given her family history of physical and sexual abuse, as well as risk posed by more proximal trauma (e.g., troubling stays in foster care). A protective factor revealed in Sarah's demographic information includes her graduation from high school, given the lower rates of graduation for AI/AN populations overall. She also completed some college. Sarah indicated she received a lot of support from family members throughout her incarceration as well as post-release.

Sarah and her family racially identify as multi-racial. She is a legal descendent of her tribe and says she has been incarcerated at least three times in the past. She currently works in a warehouse, but has experience as a personal care worker, retail employee and parks and recreation staff. Sarah was raised by her family; however also spent time in and out of foster care while growing up. She was not aware if any family members ever attended a tribal or governmental boarding school. Her mother and father both served in the military but she was unsure of which branch. Her family religion was reported as her traditional tribal spirituality. All of her siblings were placed in foster care, though no adoptions were reported. One of Sarah's brothers and her father reportedly had serious legal problems in the past and served time in jail or prison. Her brother was accused of committing a homicide. Two of her sisters, as well as her mother were reported to have attempted suicide. Sarah, her siblings, and mother have all been involved in domestic violence. Sarah also indicated her mother was physically and sexually assaulted as a child. When asked about her childhood, Sarah stated, "I think I had a pretty good

childhood with my family but not with foster care.” She has been pregnant three times but one child did not survive childhood. When asked about her family history, Sarah did not know any stories related to generations prior to her grandparents. She did indicate that her maternal grandfather spoke a traditional American Indian language. She was unaware of any traditions the family practices and of her tribe’s warrior, male, or female traditional roles

Sarah discussed her experiences with incarceration and stated she had a very difficult time, due to missing her family. She felt forgotten at times due to not being able to get in contact with her family. She also felt like her son might forget about her, as she was not able to see and hold him. Sarah shared that she isolated herself when she first arrived at her detention facility, but started socializing and talking with others as her release date neared. Sarah indicated she had a hard time adjusting to her community after release. She felt it was difficult to talk to others and leave her mother’s house. Her siblings helped her by inviting her to community events, family gatherings, etc. While incarcerated, she said that she engaged in some programming just to pass the time.

James

Participant #2 is James, a male in his mid-thirties who has his high school equivalency diploma. Although he did not report significant trauma while growing up, his chaotic and criminal lifestyle has led to numerous incarcerations and a loss of custody of his children. At the time of this project, he was working with the state on reunification with his children, but continued to struggle, due to past alcohol and other drug issues and anger management problems. A protective factor revealed by James indicated his resiliency in the face of barriers related to reunification with his children and his utilization of community services.

James and his family members racially identify as “Native American.” James, his father and paternal grandparents are all members of their tribe. He was raised by his mother with a number of siblings, although one sibling died of a drug overdose. James is currently employed by a telephone company but has experience in home repair and landscaping as well. He was unsure if any family members attended tribal or governmental boarding schools. No one in his family had served in the military. His family’s main religion is Lutheran. No one in his family has been placed in foster care or for adoption. At least one of James’s siblings has had serious legal issues in the past, and one died from a drug overdose. James, his siblings, and parents have all been involved in domestic violence. His mother was also physically abused as a child. He was unaware of any racial or ethnic discrimination suffered by his family due to their AI/AN heritage. James characterized his standard of living as good both growing up and currently. James did not know any stories related to generations prior to his grandparents. He was unaware of any traditions the family practiced and was unaware of his tribe’s warrior, male, or female traditional roles. James reported he has attended sweat lodges in the past and discussed his connection with his tribe and not wanting to go back to his reservation. He stated, “They are way up North and I’m a city boy. Things are too crazy up there and it’s a small area so everyone knows you there.”

James felt his family was the main thing that helped him cope with his incarceration. His family and girlfriend were able to visit with him frequently. He also spent time in programming and exercising. He stated he was enrolled in anger management but left the group due to difficulty with the facilitator. Since his release, James’s main difficulty has been achieving reunification with his son. His girlfriend lost custody while he was incarcerated, and as a result, James must complete a variety of classes, such as parenting. He has difficulty with finishing his

classes while working around his employment schedule. His reported his main goal was reunification with his children, even though he believes the state is pushing for him to sign over his parental rights.

Katie

Katie is participant #3, a woman in her mid-thirties who dropped out of high school in the 12th grade. Her case highlighted substantial risk for intergenerational transmission of HT, demonstrated by a family history of attendance at a tribal/governmental boarding school, significant incarcerations, and sexual and physical abuse. Her lack of family and tribal support also highlights some of her difficulties in staying out of jail or prison. As a sign of her persistence, Katie revealed she was planning to attend school to obtain her HSED and learn a trade, so she could make enough money to support her children.

Katie and her family racially identify as “White, Black and American Indian.” She and her paternal side of the family are members of their tribe, and her maternal side of the family are members of a different tribe. She is currently unemployed but has experience working in warehouses. She does not recall the number of incarcerations in her past, stating, “I’ve been in and out of jail.” She was raised by both parents and has siblings. Her father and all four grandparents attended tribal or governmental boarding schools. None of her family members served in the military. Her family religion is Lutheran. Katie’s father was raised by his aunt and uncle but she was unaware if the state was involved in his placement. None of her family members were placed for mainstream adoption. Two of her siblings and her father had serious legal problems related to alcohol use. One of her siblings has reportedly attempted suicide. She indicated all of her family members were involved in domestic violence. Two of her siblings were physically assaulted as children and three were sexually assaulted during childhood. She

was unsure if her family members ever experienced racial/ethnic discrimination due to their AI/AN heritage. Katie characterized her standard of living growing up as good but stated she is financially unstable now, moving from house to house. Katie has five children but does not have custody of them at this time. She has never been married. Katie has been in two serious relationships in the past; her first serious boyfriend passed away in a car accident.

When asked about her family history, Katie did not know any stories related to generations prior to her grandparents. She is able to speak a little of her Native American language. Katie was unaware of any traditions the family practices and was unaware of her tribe's warrior, male, or female traditional roles. She stated, "My family didn't share a lot about their heritage."

Katie felt that incarceration was a struggle for her, as she was very stressed out and did not have anyone to talk to during her sentence. In the community, she considered herself to be independent, but while incarcerated, she was on a schedule that was not based on her needs. For example, she discussed having to wait for her attorney to reach out to her as opposed to being able to call on her own. Katie did not engage in programming while incarcerated but signed up for school for a refresher, as she would like to enroll in community college. Her main goal at this time is to gain some knowledge related to computers.

Brandon

Participant #4 is Brandon, a male in his upper forties who has his high school equivalency diploma. His risk factors for intergenerational transmission of HT included a family history of foster care, domestic violence and alcohol abuse. For example, when asked for the primary occupation of family members, he labeled his mother as "a drunk." He characterized his childhood as "not good" due to the alcohol abuse and his mother leaving when the children were

young. Protective factors include his obtaining a high school equivalency diploma, his sobriety after significant alcohol and drug use and his ability to work as his own boss. He was very proud of the fact he had many skills related to home repair and has his own side-business.

Brandon and his family members racially identify as multi-racial. He and his maternal side of the family are members of their tribe. He was unsure of the tribal affiliation or membership of his siblings. He has been incarcerated at least six times in the past. Although he is currently unemployed, he works side-jobs in home repair to make ends meet. He did voice concerns that as he ages, it may be more difficult to remain in this line of work. Brandon was raised by his mother as well as in foster care and has siblings, one of which is deceased from alcohol use related complications. They were never placed for mainstream adoption. Brandon was not aware of family members attending a tribal or governmental boarding school. He has a sibling who was in the Air Force for eight years but Brandon was never in the military. He considers his main religion as “Native” while his family’s main religion is Protestant. His only family member with serious legal issues was his father. No one in his family had ever attempted or completed suicide. Although he was involved in domestic violence in the past, he was unaware if his family members have ever been involved. Brandon reported physical abuse as a child and reported having a sister who had been sexually abused as a child. He was unsure if his family members ever experienced racial/ethnic discrimination due to their AI/AN heritage. Brandon characterized his standard of living growing up as not good, but stated his standard of living has improved as an adult. He has four children and has been married and divorced twice.

Brandon did not have a lot of knowledge related to his heritage. When asked about his knowledge related to his AI/AN heritage for generations before his grandparents, Brandon stated, “I know a little. Our band from the East Coast kept getting pushed further west. I have done

some reading about my history and seen some in the movies.” Brandon’s family did not share a lot of stories related to their heritage. When he was incarcerated, he got involved in the Native American church and attended a few sweat lodges. He also discussed a strong faith in God, which helped him cope while incarcerated.

Brandon felt his personality helped him succeed while he was incarcerated. He said that he communicates well with others and can meet people on their level. He had a lot to share in regards to institutionalization and stated he understands why people do not want to leave incarceration, especially if they have been incarcerated for a significant period of time. Brandon believes that his problems with alcohol and drugs contributed significantly to his criminal history and difficulty in relationships. He is very proud of his sobriety and continues to attend Alcoholics Anonymous meetings in the community on a daily basis. His adult son recently reentered his life and he reported concerns about his son’s sobriety.

Zachary

Participant #5 is Zachary, a male in his mid-fifties who has his high school equivalency diploma. He did not report any significant trauma while growing up, and discussed in detail stories of his grandmother’s experiences while attending a governmental boarding school. He also shared a significant family history of health related issues, such as his maternal grandmother losing two children to whooping cough and his paternal grandmother experiencing four miscarriages. Zachary also had a sister who passed away in a car accident at the age of 13. He detailed risk posed by more proximal trauma, including domestic violence, alcohol and other drug use, numerous incarcerations and volatile relationships with his children’s mother. His protective factors include significant family support during his incarceration and post-release. He

said his obtaining a high school equivalency diploma at the age of 53 also afforded him more opportunities post-release.

Zachary, his siblings and the maternal side of the family are all members of their tribe. He currently is self-employed, but has worked in cleaning, maintenance, construction and as a dishwasher in the past. He was raised by his parents and maternal grandmother and has siblings and half siblings. His maternal grandmother attended a governmental boarding school and shared stories with the family about her experiences. She shared with Zachary there were weekly beatings and a pit where children were “thrown” when they misbehaved. His father was in the Army and was honorably discharged after four years. His main religion and that of his family is Catholic. Zachary and his family members were never placed in foster care and none were placed for mainstream adoption. No other members of his family have serious legal problems. Zachary reported his uncle completed suicide at a young age, but that no family members have been victims of violence, domestic violence, physical abuse or sexual abuse. He was unsure if his family members ever experienced racial/ethnic discrimination due to their AI/AN heritage. Zachary characterized his standard of living growing up as very good and said his family never went without anything because his father was a good provider. When asked about his standard of living now, he stated, “I have food, clothing, shelter, and am getting by with help from my brother.” He has children and grandchildren. He was married in the past but his wife left him after 10 years. Zachary reported he is doing his best to maintain a healthy relationship with her for the sake of their children.

Zachary shared many stories related to his AI/AN heritage for generations prior to their grandparents. He stated, “We had to fight for our freedom from the government. They [settlers] shared botulism and small pox. They forced religion on [my ancestors], boarding schools and

learned about money stuff and treaties. My grandma talked about how bad she was treated. They took away all they had. Once in the 70's, she got a 50 cent check from the government for a past treaty.” When asked about his traditional AI/AN family practices, including healing practices. Zachary stated, “My grandma made Indian salves, and I remember her reading tea leaves. I smudge in my room but my brother and his girlfriend hate the smell so complain about it.” Zachary also reported that he has an uncle who is fluent in their Native American language.

Zachary discussed his experiences while incarcerated, indicating he did not have any family or friend support while incarcerated so had to survive on his own. One example of Zachary's persistence and positive coping was that he obtained his GED early-on in his incarceration stay. He spent a lot of his time reading, exercising and working. Zachary discussed, how because of his work experience in the community, he was able to secure a highly sought after job in the facility where he was incarcerated, which helped him earn more money and pass time in a more productive manner.

Doug

Doug, participant #6, is a male in his early twenties who has his high school diploma. He currently has one child and has never been married. Doug's case demonstrated some substantial risk for intergenerational transmission of HT, given his family history of poverty, foster care, domestic violence, sexual and physical assault and suicide attempts. His case also demonstrated risk posed by more proximal trauma, such as his stays in foster care and need to raise his younger siblings. A protective factor revealed Doug obtained his high school diploma and would like to attend college in the future.

Doug and his family members racially identify as multi-racial. He, his siblings, and his maternal side of the family are enrolled with their tribe. He currently is employed as a roofer but

the work is seasonal, although he has experience in working in factories. He has a number of siblings and stated he and his siblings raised each other because his mom and step-dad worked a lot. Doug stated, "Growing up, no one was really there to watch us during the day...so we raised each other." One of his siblings passed away at the age of one Doug he did not say how. He was not aware of family members attending a tribal or governmental boarding school. No one in his family served in the military. Doug and three of his siblings were placed in foster care and two of his siblings were placed for mainstream adoption. Some of his siblings have had serious legal problems. At least one sibling and his mother have attempted suicide in the past. He reported that all of his family members have been involved in domestic violence. Most of his siblings, as well as himself, his parents, and grandparents had experienced physical assault. Doug reported he, some of his siblings, his mother and some grandparents had experienced sexual assault. All of his family members experienced racial/ethnic discrimination due to their AI/AN heritage and his maternal grandparents had been victims of crime due to their heritage. Doug characterized his standard of living growing up as "normal" and stated it is the same currently. When asked what he meant by normal, he stated it was the same as other kids in the neighborhood. He did not remember ever going without things he needed.

Doug also discussed his knowledge related to his AI/AN heritage. He stated, "I have the documentation going back to my great-great grandfather, (family name), and the documents that contain the land he inherited from his father, which was passed through each generation all the way down to me. We had a whole town but it was divided in half by two daughters." When asked about traditional AI/AN family practices, including healing practices, Doug reported, "My mom makes oils and remedies to help with bruises and swelling of all kinds. She got all of us kids into smudging and bead work." Doug also speaks a traditional Native American language.

Doug discussed his experience with incarceration. He reported difficulty due to his charges. Because he denied an offer for protective custody², he was placed on a hold status, meaning he spent 23 out of 24 hours in his cell. Doug was offered protective custody due to the charge he was convicted of and served his sentence for. While on hold status, he was offered recreation time for one hour per day and shower time was extremely limited. When he was finally placed in a housing unit, his experience was more positive as he was able to interact with others and utilizing the recreation areas more often. Because Doug was one of the youngest people on his unit, he stated he felt more protected by the older inmates and also got special privileges, such as extra lunches from the officer. Doug also discussed his experience as “passing” as Hispanic on his housing unit. He reported that passing as a different race, other than AI/AN, made his experience during incarceration easier for him. He was not singled out; instead grouped with others in the category staff assigned to him.

Logan

Participant #7, Logan, is a male in his early fifties who has his GED. He outlined significant risk for intergenerational transmission of HT, including his family history of attending tribal/ governmental boarding schools, criminal history, racial/ethnic discrimination due to AI/AN heritage and history of violence. Although he reported he has not kept up with technology, a protective factor for Logan is his opportunity for self-employment. He stated he has more opportunities being self-employed and does not have to worry about his criminal history.

Logan, his siblings and his paternal side of the family racially identify as Native American. His mother and her side of the family racially identify as White. He, his siblings, and

² Protective custody is a type of imprisonment to protect a person from harm, either from outside sources or other prisoners. The person is segregated from general population.

paternal side of the family are all members of their tribe. He has siblings and step-siblings but one of his step-siblings was recently murdered due to drug related issues. He was raised by his mother and father. Although Logan was never sent to a governmental or tribal boarding school, one of his brothers, his father and paternal grandparents were. His paternal aunts and uncles all were as well. He had two uncles that served in the Army. Logan is a member of the Native American Church. His mother's side of the family was Catholic and his father's side was Episcopalian. He was placed in foster care due to his own behavior issues, but never was placed for mainstream adoption. Two of his brothers and his father also had serious legal issues. He reported he, his brothers and his father all had serious homicide attempts made against them. Logan stated, "I remember someone tried to kill my dad and was charged with substantial battery." Logan attempted suicide as a teenager due to being upset about his placement in foster care. Two of his sisters also attempted suicide in the past. He, his siblings, and his parents have all been involved in domestic violence. None of his family members have been physically or sexually abused. He and his siblings experienced racial/ethnic discrimination due to their AI/AN heritage, and Logan stated he experienced a lot of racial discrimination by correctional officers while incarcerated. He also reported him and his siblings, as well as his father, had been victims of crime due to their ethnic heritage. Logan characterized his standard of living both now and growing up as poor. He has one child and has been married and divorced once.

When Logan was asked about his knowledge related to his AI/AN heritage for generations prior to their grandparents he stated, "Our tribe was sent here from New York. Some say we were forced but others said we chose to come to Green Bay and Milwaukee. The tribe had a difficult time; there was a lot of poverty, alcoholism and legal issues." Logan also reported that his brother speaks a traditional Native American language.

Logan discussed his difficulties with incarceration, especially related to his records. Logan stated his legal records were merged with another family member, resulting in challenges. He had to work with the state to remove information from his records that did not pertain to him. He also ran in to this issue in the community. He reported he was once pulled over by officers and his brother had a warrant for his arrest, but Logan was arrested instead. He believes the issues have been resolved but he stated he feels targeted at times due to the past mistakes. Logan's mother also passed away when he was incarcerated, resulting in added difficulty in coping. A strength Logan noted was his family support as well as his spirituality. Logan discussed his lack of connection with his tribe on the reservation. He stated, "I don't feel like I'm part of that community up there." He also discussed how his alcohol and other drug issues impacted his life on the reservation. "Our barriers are with the drinking and the drugs. That has an impact on living up there because they basically don't tolerate that. They got zero tolerance up there for it."

Joseph

Participant #8 is Joseph, a male in his upper thirties who has his high school equivalency diploma. Joseph's case demonstrated a significant amount of violence, which could be considered a manifestation of HT. He detailed growing up in a very violent neighborhood and did not feel protected, so carried a gun starting at the age of 16. He had mistrust for the police and felt he needed to protect himself. Joseph was different than most of the other cases, in that he did not want to make changes in his lifestyle and enjoyed how his life was going. Joseph stated, "I'm very honest. Others lie about wanting to make changes." A protective factor for Joseph is he is very charismatic and is a people person, resulting in employment opportunities for him. He also obtained his high school equivalency diploma.

Joseph learned of his American Indian heritage at the age of 24 so now identifies as American Indian. He did not find out about his heritage until later in life as he was not close with his father's side of the family. He is a legal descendent of his tribe and identifies as wolf clan. His father is also a member of his tribe and his mother is affiliated with two other tribes. Joseph does not remember the number of incarcerations he has had, but indicated they constituted "a lot." He currently works in home improvement. Joseph was raised by his mother and had little contact with his father. He was not aware of family members attending a tribal or governmental boarding school. He has numerous family members that are currently incarcerated, including a close family member that is serving a life sentence for murder. He discussed an extensive history of violence, including shooting others and being shot himself, as well as a history of domestic violence. Joseph denied a history of suicidal ideation, intent, or plans. He characterized his standard of living as a child as "middle class in the hood." He stated his family always had what they needed, including food and clothing, and were not neglected. His current standard of living is similar to his childhood. He has a daughter and two grandchildren and has never been married. His parents are currently divorced.

Joseph discussed his heritage that had been passed down by many generations. "We had 13 tribes all over New York and helped set up the American constitution. Congress set it up but the British took it over when they arrived. We have a lawsuit now with the State of New York for 250,000 acres." He has participated in sweat lodges and wants to learn more about his AI/AN heritage."

Joseph's only concern while incarcerated was that he felt people were jealous of him, resulting in difficulties with others. He stated he always had fresh clothes, fresh shoes and lots of canteen and people did not like that about him. Joseph's family offered a lot of support but

Joseph typically turned them down. He stated he did not want his family to visit and he rarely talked to them on the phone. He stated, “I don’t want to see you. I’m just doing my time.” His brother is currently serving a life sentence for a homicide. Joseph indicated he would rather have his family offer their support to his brother.

Sue

Sue, participant #9, is a woman in her mid-twenties who has her high school equivalency diploma. Her case demonstrated some risk for intergenerational transmission of HT, given some of her family member’s attendance in boarding schools, and history of domestic violence. She was also at risk posed by more proximal trauma, including a mental health history (e.g., history of suicide attempts), placement in foster care and criminal history. Sue discussed in detail concerns about how her criminal history could impact her ability to obtain adequate employment as well. Protective factors for Sue include significant family support, traditional morals and values, and a desire to attend college in the future.

Sue is a member of her tribe. All of her family members are also members of the tribe and she is affiliated with the bear clan. She has been incarcerated twice in the past. She is currently unemployed but has worked as a waitress, janitor and childcare provider in the past. Sue was raised by both of her parents, as well as other family members. Her father and grandparents attended a governmental or tribal boarding school. She practices a traditional American Indian religion and considers herself traditional. Sue says morals, teachings, culture, and traditions have been passed down to her over numerous generations. She was placed in foster care off and on while growing up due to bad behaviors and is one of the only people in her family with serious legal problems. She reported a few suicide attempts in the past. Sue has been involved in domestic violence, either as victim, aggressor or child witness along with her siblings

and parents. She has never experienced racial or ethnic discrimination due to her American Indian heritage, but reported her parents and grandparents had. Sue characterized her standard of living growing up as upper middle class. Her current standard of living is low middle class. She has one child and has never been married. Her parents are divorced but her mother has been married to her stepfather for 23 years.

When asked about her AI/AN heritage for generations prior to her grandparents, Sue stated her family passed down the morals, teachings, culture, values and traditions of her tribe. Her maternal grandfather speaks a traditional Native American language. She has participated in prayer, smudging, spirit feast and ceremonies. She is aware of the traditional roles that males and females have in her tribe but did not share them in her interview.

Sue described a chaotic and volatile childhood, resulting in difficulty in her relationships with family members. The children in her family were separated and bounced around to different family members throughout her life. She discussed how she always felt like she had to care for herself, resulting in her not attending school. Her relationship with her mother was unhealthy, with her feeling that they were more friends than parent and child. When she was incarcerated, Sue repaired the relationship with her mother. She stated she felt more supported by her family when incarcerated as compared to pre-incarceration. Sue discussed difficulty with other inmates, resulting in more charges while incarcerated. She also discussed difficulty with her tribe after release. She does not feel she can return to the reservation. "It was too small up there. Everybody was in my business. Once you get in trouble, you're known for a troublemaker."

Robert

Participant #10, Robert, a male in his upper thirties, does not have a high school diploma and completed the 11th grade. His case demonstrated a substantial risk for intergenerational

transmission of HT due to the family history of attending governmental boarding schools, racial/ethnic discrimination, and poverty. A risk posed by more proximal trauma included his placement in foster care and lack of his high school diploma, resulting in an inability to find employment. A protective factor for Robert included significant family support. He is also working to get back in touch with his spirituality, as this was a source of comfort for him in the past. He has one child and has never been married.

Robert and his family racially identify as Native American. He, his siblings and paternal side of the family are members their tribe. His maternal side of the family are members of a different tribe. He has been incarcerated numerous times and was unable to remember the exact number. He was raised by his mother but his father sent the family money while they were growing up. He is currently unemployed and has been looking for employment for approximately 2 years. Robert attended a governmental/tribal boarding school for ninth and tenth grade due to difficulties in the public school system. He stated, "I needed to get away from city schools. They were too hard." His mother and father attended governmental/tribal boarding schools, as well as his grandparents. His brother served in the military but he was unsure of the branch. His paternal grandfather served in the Navy. Robert was not raised with a main religion but remembered that his mother was "Christian and Traditional." He was placed in foster care, along with his sister but for less than one year. They were not placed for mainstream adoption. The only other family member with a criminal history was his brother, who served a 2 year prison sentence. No one in his family has been a victim of domestic violence, homicide, or physical assault, nor has anyone attempted or completed suicide. When asked if he or anyone in his family experienced racial/ethnic discrimination due to his/her AI/AN heritage, Robert stated, "In [city], the kids picked on us and pushed us. We got bullied and we would get in trouble." He

also stated his parents both dropped out of high school due to discrimination and bullying. He characterized his standard of living growing up as poor and considers his current standard of living as average.

Robert discussed his experience during a rite of passage he participated in when he was growing up. He explained it as having to survive in the woods for three days and three nights, at the age of 12 or 13. Robert stated, “How could I forget something like that?” He also talked about gathering leaves with his mother to make salves and soups. When asked specifically about family stories, he stated, “They all had difficult times. Things were changing; we couldn’t go to many places.”

Robert spent a lot of time working while incarcerated, not only to make money but to pass the time. He had some family support in the way of letters and phone calls, but no one could make the trip to the facility due to distance. He discussed his sobriety as his biggest barrier to success in the community. He had a hard time when first incarcerated but made a few friends and attended school. Unfortunately he was unable to complete his GED test before the new year, so he will have to retake his tests at a later date. When released, Robert’s family reportedly offered a lot of support and helped him get back on his feet.

Kevin

Participant #11 is Kevin, a male in his fifties who has a high school diploma and completed some technical college classes. A family history of domestic violence, legal issues, as well as some family attending governmental boarding schools demonstrated risk for intergenerational transmission of HT. Kevin’s father also left the family when Kevin was young, resulting in his older brother taking on the role of his father and “terrorizing the family.”

Protective factors for Kevin include obtaining his high school diploma and having family support during incarceration and post-release.

Kevin and his family racially identify as Native American. He, his siblings and paternal side of the family are members of their tribe. His maternal side of the family are members of a different tribe. His father and nephew are highly regarded in their tribe due to their acquisition of the traditional language. At the time of his interview, Kevin was unemployed for approximately 2 months. He has been incarcerated numerous times and was unable to remember the exact number. Kevin was raised by his mother. Although he did not attend a governmental or tribal boarding school, his older sister did. His mother was sent by her dad to boarding school. “She was only there a few months. There are lots of stories but she doesn’t like talking about being there.” The main religion of his family is Traditional but Kevin stated he and his siblings were baptized Lutheran. No one in his family was placed in foster care or placed for mainstream adoption. His brother, one of his sisters and his father has had legal problems in the past. He has never attempted suicide, but one of his sisters had a few attempts in the past while struggling with drug addiction. He discussed domestic violence and stated he was the aggressor in the past. Kevin was aware that his brother and one of his sisters were also the aggressor in their relationships. He was unsure if he or his family members experienced racial/ethnic discrimination. He stated, “I’m sure it was there but I wasn’t aware of it. I didn’t experience any discrimination until jail. There, everyone is a racist.” When asked about his standard of living growing up, Kevin stated it was difficult due to being a single parent family. His family utilized “all” of the community resources. He characterized his current standard of living as, “It could be worse. I get a lot of family support.” Kevin has one daughter he is in contact with. He has never been married.

Kevin stated he learned a lot about his AI/AN heritage by talking to elders. He stated his family did not share a lot of their own stories. He and his nephew participate in drumming, and his mother volunteers with the church. When asked if Kevin was familiar with warrior or male or female traditional roles for his tribe, Kevin reported, “In my mother’s tribe, the women held leadership roles. In my father’s tribe, men held leadership roles. This led to a lot of conflict in my family.”

Kevin played a lot of sports while incarcerated but struggled due to a lack of other AI/AN persons in his facility. He reported he felt very lonely and isolated. He also experienced frustration due to lack of choice when engaging in programming. Kevin reported the state put him in a lot of programs, even if they were not relevant to his situation. He was able to obtain employment while incarcerated and attended Alcoholics Anonymous. Kevin reported sobriety as a strength for him post-release.

Mark

Participant #12 is Mark, a male in his early thirties who has his HSED and completed an apprenticeship program while incarcerated. His case demonstrated some substantial risk for intergenerational transmission of HT, given his family history of domestic violence. His family lived on the reservation their entire life and most attended governmental or tribal boarding schools. There was also significant ethnic/racial discrimination experienced by him and other members of his family. Protective factors for Mark include his AI/AN spirituality and his program experiences while incarcerated, resulting in him obtaining certificates for work in the community.

All of Mark’s family members racially identify as Native American and are members of their tribe. Mark is currently unemployed. He has been incarcerated 3 times in the past. He was

raised by both parents until the age of 10, when his mother left. His parents attended a Catholic Church school on their reservation and all of his grandparents were in boarding school, although he did not have any information on their experiences. His step-grandfather was in the military but he was unsure of the branch. His main religion is “Native spiritual” but religion was not a large part of his upbringing. While incarcerated, he attended pipe ceremonies and weekly sweat lodge. His older sister was placed in foster care due to behavioral issues and was adopted by his aunt due to his mother giving birth at a young age. Mark was unsure if this was a mainstream adoption or worked out traditionally through the family. Mark’s older sister also had legal problems. No one in his family was a victim of homicide and no one had attempted or completed suicide. He and his siblings were witnesses to domestic violence while growing up. Mark said his mother would drink alcohol and “attack dad, which is why we left.” When asked about physical assaults, he stated he has been assaulted by family members of the victim in his case. “Reservation life is tough. There are a lot of physical altercations.” Mark and his older brother have experienced racial/ethnic discrimination, especially when they would go to the town nearest their reservation. He characterized his standard of living growing up as bad times, especially when his parents broke up, due to the financial strain. He was having difficulty with finances at the time of the project due to his incarceration. Mark does not have any children and has never been married.

Mark did not know a lot about his AI/AN heritage for generations prior to his grandparents. He stated, “We’ve been to a few wars. I learned some stuff in school but also talked to elders.” He also talks to his uncle about the origin of his people. He attends church and drum ceremonies. Mark was aware of traditional male/female roles in his community. “The man

does what he's supposed to do. Men fished and hunted. Women gathered. Men also needed to protect women and children during war.”

Mark had family support from his father while incarcerated. Because he was incarcerated at the federal level, he was moved out of state and was housed across the country from his family. This resulted in difficulty due to lack of visits and higher costs for phone calls. His father also passed away while he was incarcerated. Mark has a strong work ethic, cultivated by his father at an early age. He has struggled with finding employment due to being incarcerated for a long period of time. Mark feels that things move too fast and he cannot keep up with technology. He attended school while incarcerated and believes he is ready for employment. He discussed the lack of clothing as a difficulty in finding stable employment.

The CHQ also asked participants about their personal medical history as well as that of their immediate family, including parents, grandparents and other significant relatives to discern for medical issues commonly viewed to be correlated with systemic historical oppression. The results are listed below in Table 3. Intestinal disorder, kidney disease and tuberculosis were removed from the table as no participants reported a personal or family history of those particular disorders.

Table 3. Medical History

| Condition | Self | Mother | Father | Maternal Grandmother | Maternal Grandfather | Paternal Grandmother | Paternal Grandfather | Other Sig. Relationship |
|-------------------------------------|------|--------|--------|----------------------|----------------------|----------------------|----------------------|-------------------------|
| Alcohol Abuse | 9 | 5 | 5 | 2 | 3 | 2 | 3 | 5 |
| Anxiety | 5 | 4 | 2 | 1 | 1 | 1 | 1 | 2 |
| Asthma | 5 | 1 | 1 | 1 | 1 | 1 | 1 | 2 |
| Cancer (type) | 0 | 3 | 1 | 0 | 1 | 0 | 0 | 1 |
| Heart Disease | 1 | 2 | 3 | 1 | 1 | 1 | 1 | 1 |
| Depression | 2 | 5 | 1 | 2 | 1 | 1 | 1 | 2 |
| Diabetes | 1 | 3 | 3 | 5 | 2 | 2 | 1 | 3 |
| Drug Abuse | 5 | 2 | 3 | 1 | 1 | 1 | 2 | 5 |
| HIV/AIDS | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 1 |
| Hypertension | 2 | 1 | 2 | 3 | 2 | 1 | 1 | 1 |
| Liver Disease | 0 | 1 | 0 | 0 | 0 | 0 | 0 | 1 |
| Posttraumatic Stress Disorder | 2 | 1 | 1 | 0 | 0 | 0 | 0 | 1 |
| Psychological or Emotional Problems | 4 | 6 | 3 | 2 | 1 | 1 | 1 | 3 |
| Pulmonary Disease | 0 | 0 | 1 | 0 | 0 | 0 | 0 | 0 |
| Serious Accident | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 |
| Serious Injury | 3 | 1 | 0 | 0 | 0 | 0 | 0 | 0 |
| Sleep Disturbance | 3 | 2 | 1 | 0 | 0 | 0 | 0 | 0 |

As a note, a cross case/cross themes analysis was completed and there did not seem to be a connection between knowing family history or family traditions generations back and doing better or worse in certain areas of life.

Domains, Themes, Categories, and Subcategories.

Data specific to incarceration and reentry were categorized by first abstracting the two large deductive domains, (a) supports and (b) challenges. Data were then rendered to six themes

identified deductively in the study's conceptualization: (a) pre-incarceration life supports, (b) pre-incarceration life challenges, (c) during incarceration supports, (d) during incarceration challenges, (e) post-incarceration supports, and (f) post-incarceration challenges. Themes were further rendered to categories and subcategories utilizing a deductive and inductive analysis process. The inductive findings are reported below along with deductive, but noted accordingly. Table 4 displays the domains, themes, categories, and relevant subcategories, indicating whether general (applying to all cases), typical (applying to 5 to 11 cases), or nontypical (applying to <5 cases; adapted from the recommended standards of Miles & Huberman, 1994, and Hill, Thompson, & Williams, 1997). All data that applied to less than five cases are included, consistent with Deloria's (1999) AI information-gathering practices and ECM methodology. A summary of the domains, themes, categories, and subcategories follows.

Table 4. Domains, Themes, Categories and Subcategories.

| Domain | Theme | Category | Subcategory | N | Classification |
|----------|-------------------------------|------------------------|----------------|----|----------------|
| Supports | Pre-Incarceration Supports | Employment | | 10 | Typical |
| | | Relationships | | 6 | Typical |
| | | | Being a parent | 3 | Nontypical |
| | | Housing | | 4 | Nontypical |
| | | Spirituality | | 2 | Nontypical |
| | | Sobriety | | 2 | Nontypical |
| | | Transportation | | 2 | Nontypical |
| | | None | | 2 | Nontypical |
| | During Incarceration Supports | Positive Coping Skills | | 7 | Typical |
| | | Employment | | 6 | Typical |
| | | Interpersonal Skills | | 5 | Typical |
| | | Family Support | | 6 | Typical |

Table 4.

| Domain | Theme | Category | Subcategory | N | Classification |
|-------------------|---------------------------------|------------------------------|----------------------------|----|----------------|
| | | | Calls | 5 | Typical |
| | | | Visits | 3 | Nontypical |
| | | Education | | 10 | Typical |
| | | | diploma while incarcerated | 2 | Nontypical |
| | | Treatment | | 3 | Nontypical |
| | | Religion/Spirituality | | 4 | Nontypical |
| | | Financial | | 4 | Nontypical |
| | | | Per Capita Payments | 1 | Nontypical |
| | Post Incarceration Supports | Community Support | | 10 | Typical |
| | | | Tribal Support | 1 | Nontypical |
| | | Non-Recidivism | | 5 | Typical |
| | | Employment | | 3 | Nontypical |
| | | Education | | 2 | Nontypical |
| | | Sobriety | | 4 | Nontypical |
| | | Positive Coping | | 2 | Nontypical |
| | | Health Insurance | | 1 | Nontypical |
| | | Family Support | | 11 | Typical |
| | | | Adjustment | 6 | Typical |
| | | | Housing | 7 | Typical |
| | | Transportation | | 2 | Nontypical |
| Challenges | | | | | |
| | Pre-Incarceration Challenges | Lack of Employment | | 6 | Typical |
| | | Negative Relationship Issues | | 8 | Typical |
| | | | interpersonal conflict | 5 | Typical |
| | | | child support | 3 | Nontypical |
| | | Housing Stability | | 5 | Typical |
| | | | unsafe environment | 3 | Nontypical |
| | | | bounced around | 1 | Nontypical |
| | | Lack of Transportation | | 2 | Nontypical |
| | | Lack of Education | | 5 | Typical |
| | | Violence | | 2 | Nontypical |
| | | None | | 1 | Nontypical |
| | During Incarceration Challenges | Difficulty Adjusting | | 12 | General |

Table 4.

| Domain | Theme | Category | Subcategory | N | Classification |
|--------|-------------------------------|------------------------------|---------------------------------|----|----------------|
| | | | Time in Segregation | 2 | Nontypical |
| | | | Institutionalization | 1 | Nontypical |
| | | Lack of Family Support | | 6 | Typical |
| | | | miss children | 3 | Nontypical |
| | | | Distance | 3 | Nontypical |
| | | Lack of programming | | 4 | Nontypical |
| | | Cultural Isolation | | 2 | Nontypical |
| | | Interpersonal Conflict | | 2 | Nontypical |
| | | Racial Passing | | 2 | Nontypical |
| | | Legal Problems | | 1 | Nontypical |
| | Post Incarceration Challenges | Employment | | 10 | Typical |
| | | | Felony on Record | 4 | Nontypical |
| | | | Clothing | 1 | Nontypical |
| | | | Lack of skills | 2 | Nontypical |
| | | | Lack of proper documentation | 4 | Nontypical |
| | | Negative Relationship Issues | | 7 | Typical |
| | | Rules of Release | | 7 | Typical |
| | | | Sobriety | 5 | Typical |
| | | | Child Support | 4 | Nontypical |
| | | Adjustment to Community | | 9 | Typical |
| | | | Neighborhood | 5 | Nontypical |
| | | | Interactions with Tribal Police | 4 | Nontypical |
| | | | Housing | 4 | Nontypical |
| | | | Spirituality | 1 | Nontypical |
| | | Interracial Conflict | | 2 | Nontypical |
| | | Transportation | | 5 | Nontypical |
| | | Lack of Tribal Support | | 11 | Typical |
| | | | Reservation Distance | 9 | Typical |
| | | | No resources | 8 | Typical |
| | | | Barriers | 3 | Nontypical |

Supports

The supports domain was defined as encompassing the primary factors that sustained the participants throughout their lives, pre-, during, and post-incarceration. All 12 participants reported data in this domain.

Pre-Incarceration Supports. The pre-incarceration supports theme was defined as including the primary factors correlated with the participants' perceptions that their lives were going well, before they were involved with the criminal justice system. Participants reported the following support categories in their lives before incarceration: (a) employment, (b) relationships (subcategory-being a parent), (c) housing, (d) spirituality, (e) sobriety, (f) transportation, and (g) none. All 12 participants reported data in this theme.

Employment. The first category of employment was defined as the condition of having regular, paid work prior to incarceration. Ten participants reported adequate employment before their incarceration. This was the most commonly cited category under the pre-incarceration supports theme. Participants reported having adequate employment allowed them to provide for their families, which was their main concern at the time. Doug stated, "I had work and I was going to work. I was making \$26 an hour." He has an adequate job until his incarceration. Another participant, Robert reported, "I was working. That was one thing I was doing, I was working at a steady place. No trouble with the cops." Robert was doing well before incarceration but discussed how alcohol and drugs contributed to his criminality.

Relationships. The relationships category was defined as participant's supportive connections with family and friends, as well as their children before their incarceration. This category was reported by 6 participants. Logan stated, "I was happily married at the time and he (son) was born before my incarceration." Logan was married for three years before his

incarceration. This category contained one subcategory, *being a parent*. Being a parent was defined as participants' being an integral part of their child and/or children's lives. Three participants reported that being a parent was a support before incarceration. Sarah reported, "I was working, I was going to school and I was being a parent. I was able to see my baby whenever I wanted and for as long as I wanted." Sarah discussed that being away from her son and not being able to hold him while incarcerated was one of her biggest struggles.

Housing. The housing category was defined as having a safe and stable living environment before incarceration. Four participants reported having a positive living environment, which helped them stay on a good path. "I had a place to live; I had a place to stay." Brandon stated, "That was the house we all grew up in. Our father passed away in 2012, and lucky I was home for that but that house my dad basically built. We lived there since 1960; my two little brothers were born out of that house." Brandon bought his family home before incarceration. Now, he and his brother live in the home.

Spirituality. The spirituality category was defined as a meaning-making worldview in the participant's lives before incarceration. Two participants, Kevin and Logan, discussed their spirituality as a strength in their lives. Kevin reported that going to sweat lodges and spending time with family was a support for him. "I was going to sweat lodges and I did a lot of stuff with different family members, my cousins. It's like when you start practicing what you're used to doing, and then you have a good life." Kevin is working on spending more time with his family and getting in touch with his spirituality.

Sobriety. Sobriety was defined as the perception of having a healthy relationship with alcohol and/or drug use/nonuse. Two participants reported sobriety as a strength prior to their first incarceration. Kevin stated he used alcohol occasionally but things got out of hand when he

started using drugs along with alcohol. “I always drank on and off but never got into trouble. But this last time, I think it was 2000, I was partying and doing cocaine and everything. I wasn’t doing enough things spiritually.”

Transportation. This category was defined as having adequate transportation to go to work, whether it was one’s own vehicle or using public transportation. Two participants, Logan and Robert, stated that having reliable transportation allowed them to continue with their employment. Logan stated, “I had a house, a car, and a job. I was financially stable and was happily married at the time.”

None. Two participants, Zachary and Sue, reported no supports before incarceration. Zachary stated, “Nothing. No, back then I was always drunk or high.” Sue reported, “I guess nothing at the time. Otherwise I wouldn’t have got into that trouble.”

During Incarceration Supports. The during incarceration supports theme was defined as the primary factors that helped the participant cope while incarcerated. Participants reported the following support categories in their lives during incarceration: (a) positive coping skills, (b) employment, (c) interpersonal skills, (d) family support (subcategory- calls, visits), (e) education (subcategory- diploma while incarcerated), (f) treatment, (g) religion/spirituality, and (h) financial (subcategory- per capita payments). All 12 participants reported data in this theme.

Positive coping skills. Positive coping skills were defined as ways to deal with the stressors of incarceration in a healthy or positive way. Participants reported a number of positive coping skills that managed their time while incarcerated, including reading, sports, sleep, and music. Brandon reported, “I thank God I knew how to read. I never read in my life ‘til I got in jail. That’s when I started reading the books that I read so I was very fortunate that my parents took the time to send me to a decent school so I learned how to read and everything. In jail you

just have to have faith and be polite. Using stuff I learned when I was young helped me get to that.”

Employment. This category was defined as having a job while incarcerated. Six participants reported gaining employment while incarcerated as a support, not only to help pass the time but to make money. Robert stated, “They found me work in there. It took about a month, a month to get a job in there. I made a quarter an hour but whatever. It was something and helped the time go by faster...because you’re stuck in that cell and you’re just nothing.” Mark discussed how completing an apprenticeship while incarcerated gave him marketable skills for post-release employment.

Interpersonal Skills. This category was defined as the ability to get along with others. Four participants were able to identify their interpersonal skills as supports during incarceration. Brandon stated, “I can sell a dead man a pair of shoes, put it that way. Being able to put myself, either lower myself to their level or raise myself to their level to see eye to eye with them, and communicate with these characters helped me immensely. I was not disliked by people.” Zachary reported, “Some of the people that society would think would be the worst people in the world were some of the greatest people in the world. I’ve met great people up there. There’s people that I met that I still talk to today. I always made the best of life when I was in”

Family support. This category was defined as having the active care and concern from family in the community while incarcerated. Six participants reported that support of their family helped them get through their incarceration period. Sarah reported the main support while incarcerated was family. “My family, having that family support.” Although she was not close enough for a visit at first, they moved closer so they could visit her. Two subcategories emerged from the data: *calls* and *visits*. The calls subcategory was defined as being able to speak with

your family support by telephone while incarcerated and was endorsed by five participants. One thing to keep in mind is inmates can call family but family does not have the ability to call them back.” Joseph stated, “I call my mother. Other than that, I really don’t try to bother my family like that when I’m incarcerated. My brother has a life sentence for homicide so I would rather they visit him.” Participants reported it was more common to receive family support by telephone as opposed to in person visits. The visits subcategory was defined as having one’s family come to the correctional facility to spend time. Sarah stated, “It started like I didn’t get visits, but when they started moving closer to the facility, that’s when I started getting visits. It was smoother because you had that support not only on the phone, but actually being able to be face to face with your family too.” Another participant, Kevin, stated, “The kids came to see me, but how many times can they do that? It’s getting old, you know? I didn’t really see a lot of them, but they came once in a while.”

Education. The education category was defined as formal education received while incarcerated and was the most common category in the during incarceration supports theme. Ten participants reported involvement in the education system while incarcerated. Mark stated, “When I was in (state), I took everything you could take that I could think of. I took cabinetry making class. I took the baker’s apprenticeship. I actually couldn’t finish because I got transferred before I got to my test. I took book studies, I did book studies. I have a lot of certificates for like anger management courses that help you get ready for pre-release type things, like how to change your attitude and how to look at everything in a more positive situation. I took everything they had to...to pass the time.” One subcategory emerged from the data: *diploma while incarcerated*. This was defined as receiving a high school equivalency diploma while incarcerated and was endorsed by Zachary and Sue. Zachary stated, “First time I

went I got my GED right away.” Because of him obtaining his GED, he is looking at certificate programs at local community colleges.

Treatment. Treatment was defined as services received during incarceration related to mental health, such as anger management, substance abuse, or criminal thinking. Three participants reported receiving treatment while incarcerated, including alcohol and other drug abuse, anger management, and/or mental health treatment. Mark reported, “I volunteered for drug treatment again, a different one. I did it because I was told it was court ordered.” Sarah stated, “I didn’t have to [do program] but I did. Like, they have these classes to take, stuff I participated in some of the classes. Because I never been in no- it was like one class was about abusive relationships. I never been in an abusive relationship. I just signed up for the class.”

Religion/spirituality. The religion/spirituality category was defined as involvement in religious or spiritual services while incarcerated. Involvement with religion/spirituality while incarcerated helped four participants cope and was considered a support while incarcerated. This was defined as attending services, if available, Bible studies or keeping up with religion and/or spirituality on your own. Brandon stated, “My faith, that I have a strong faith in God, at least I believe I do, that helped me. I went to church and did Bible studies. When you’re in jail, you’ve gotta survive. I was just lucky that I was a likeable person and I feel I got God protecting me.” Logan stated, “I usually got a job working with the chapels in all the institutions I was at doing Native American stuff.” One participant, Mark, talked about his experience at a federal facility; “They actually offered a pipe ceremony for Natives.”

Financial. The financial category was defined as having monetary support while incarcerated was endorsed by four participants. Robert reported, “Because my checks were still coming in and I told them, well they probably did find out. But they were still sending me

checks, and that's how money was coming in. It was better than having \$3 per day." A subcategory emerged, *per capita payments*, which was defined as receiving continued per capita payments while incarcerated. Per capita is defined as money distributed to tribal members, although most tribes do not have the means to distribute per capita funds. Per capita funds did not come up in previous literature since there scant literature on this population and reentry, and per capita funds are specific to AI/AN persons. This subcategory emerged during inductive analysis, as it was not discussed in previous literature. Joseph stated, "I could just rely on per cap to get through my time and make it as comfortable as possible. I keep fresh shoes, new jogging suits, and things like that. But it be all from Native Americans because it's per cap outlines."

Post-Incarceration Supports. The post-incarceration supports theme was defined as the primary factors that have been going well in the life of the participant, since release from incarceration. Participants reported the following supports in their lives after incarceration: (a) community support (subcategory-tribal support), (b) non-recidivism, (c) employment, (d) education, (e) sobriety, (f) positive coping, (g) health insurance, (h) family support (subcategories-adjustment and housing), and (i) transportation. All 12 participants reported data in this theme.

Community Support. The community support category was defined as support from the community after release from incarceration. Ten participants reported receiving support from their community, mostly in the form of community agencies, including the partner agency. Doug stated, "I got help with hygiene stuff, Christmas stuff, Thanksgiving stuff, like pretty much holidays and things like hygiene, shampoo, conditioner, shaving razors and stuff like that." Logan stated, "I'm not the kind of person that asks for help if I know where to go, then I'll go but I don't go like searching for help like that. If I'm going to need something done, I'm going to

go out and do it myself.” One subcategory, *tribal support*, emerged. Tribal support was defined as receiving support from the tribe after release from incarceration. Sarah reported tribal support in regards to re-entry after incarceration. “My tribe did help me. They tried to help me find a job. My mom knew about the program and pushed me to come over and apply.” Sarah was the only participant that report tribal support.

Non-Recidivism. This category was defined as staying out of jail or prison after the participant’s last release. Five participants reported that not returning to incarceration was considered a strength after incarceration and they have been able to follow the rules of their release. It is important to understand that even though few participants reported this category, it does not mean that they have not been successful in remaining out of jail or prison. James reported, “Staying out for one. This is the longest I have ever been out since I was 15.”

Employment. This category was defined as finding gainful employment after release and three participants have been able to secure employment post-incarceration. Although they have been able to secure employment, they each reported they would like more secure or stable employment. Joseph reported, “I’m at the workforce but I’m pretty straight as far as my going to stuff like that. I might get a home improvement job that might pay two or three thousand dollars a month. It’s a matter of how fast you going to get it done. It’s about paying the bills. I can get a job. It’s no problem.” Sue felt that moving to a bigger city offered her more employment opportunities compared to the reservation. She stated, “I think it was more positive just because it's a bigger city and there's like thousands of people up here that have crimes way worse than me. A lot of the employers are used to seeing criminal backgrounds on a lot of their employees so it wasn't as a shock to...If they were to look up my record.”

Education. This subcategory was defined as participation in educational services, which facilitate learning, while incarcerated. These services could include, but are not limited to, classes to help with obtaining a GED or college courses. Sue and Zachary reported the education and/or programming they participated in while incarcerated has helped them when released. Sue stated, “I took my placement tests and all that. I tested out of that, I just never did the test. Then the second time I went in and got it all done within a month. ”

Sobriety. Sobriety was defined as abstaining from drugs and/or alcohol since release from incarceration. Living a sober lifestyle for participants has been a strength post-release. Zachary stated, “I’ve been pretty much sober the whole time.” Brandon reported, “I didn’t pick up where I left off because I was clean. That little extra money getting high every day, doing somebody a favor wasn’t there anymore, but then I didn’t have the thirst for the drug anymore either; it just wasn’t there. I didn’t even start taking pain medicine until I broke my leg.”

Positive coping. The positive coping category was defined as ways to deal with the stressors of reentry in a healthy or positive way. Utilizing positive coping, such as skills learned while incarcerated, has helped Logan and Robert in their reentry. Logan reported, “I stayed focused doing volunteer work in there. I’m bored out here. I got to have something to do; otherwise I’m going to start drinking and using again. [She] told me to start doing volunteer work, so I did some volunteer work. That’s how I got into personal care work. I was doing volunteer work through the church. That gradually expanded into me getting clients that I work for now.”

Health insurance. The health insurance category was defined as obtaining insurance coverage to pay for medical expenses, including medication. One participant, Brandon, discussed receiving healthcare through the government has helped take the pressure off costs for his

medication. “I am thankful that I got insurance now. I’m considered an elder, and I got Medicaid. This is my first month with a provider and I don’t have to shell out \$100 to get my meds.”

Family support. Family support during the re-entry process was a strength endorsed by eleven participants. The family support category was defined as support from family after returning to the community. Logan reported, “My sisters and brothers are a lot more supportive than they have been in the past. They’re always checking on my welfare and finding out what I’m doing.” This has helped him stay on a more positive path. Two subcategories, *adjustment* and *housing* emerged. Adjustment referred to family support when adjusting to the community after incarceration, including family encouraging participants to engage in activities outside the home. Sarah stated, “Even though I came home, she [mom] helped me with my son and stuff. She would try to get me to get out and participate in family stuff and everything. She would try to get me to do things. Like my brothers and sisters, they tried doing stuff. Like they’d come over because I wouldn’t want to go where they was at or whatever. So they would try to come and talk and stuff.” Housing referred to family offering a stable living environment when the participant was released. Sarah was able to stay with family after release from incarceration. “My mom got a place and she let me stay with her.” This has helped Sarah with childcare as well, since her mom can watch her son while she is at work or school.

Transportation. The transportation category was defined as having adequate transportation, either with their own vehicle or using public transportation, which has Logan and Sue with their re-entry after incarceration. Sue stated, “At least [community agency] helps with bus tickets and stuff you know, places you need to go.” Sue discussed how using the public transportation system is how she gets around the city.

Challenges

The challenges domain was defined as the primary factors that were barriers or difficulties for the participants throughout the life, pre-, during, and post-incarceration. The challenges could come from the outside as well as difficulties in the participant's life. All twelve participants reported data in this domain.

Pre-incarceration Challenges. The pre-incarceration challenges theme was defined as the primary factors that were a detriment in the life of the participant, before they were involved with the criminal justice system. Participants reported the following challenge categories in their lives before incarceration: (a) alcohol and/or other drug abuse, (b) lack of employment, (c) negative relationship issues (subcategories- interpersonal conflict, child support), (d) housing stability (subcategories- unsafe environment, bounced around), (e) lack of transportation, (f) lack of education, (g) violence and (g) none. All 12 participants reported data in this theme.

Alcohol and Other Drug Abuse (AODA). Alcohol and/or drug abuse was defined as using drugs and/or alcohol recurrently with negative consequences. Seven participants reported that their alcohol and/or drug use contributed significantly to their involvement with the criminal justice system. Katie stated, "I met people up there that drink and then I wasn't looking for a job, just kept on drinking. Then I really drank a lot when the kid's dad passed away." Brandon stated;

"I quit drinking several times in my life. First time I quit was way back in 1980 when I quit cigarettes. Cigarettes I never went back to. Alcohol, I went back in 1982, a little bit in 1989 and 1990, then I quit again. Then in April or May 1991, I started, I went full blown with the drinking and everything else. I use the shittiest reason, blame her. I'll fucking drink if you want to drink, well that was just a cover up to do what I wanted to do all along. You gotta get real with it; can't get help til you get real."

Lack of Employment. The lack of employment category was defined as the absence of paid work or adequate employment before incarceration. Participants reported that lack of employment caused problems because of the lack of financial support. If you are not working, you are not receiving paycheck and cannot pay the bills. James stated, “After being in jail a few times it’s hard to find a job.” Brandon reported, “You’ve got to have money every day for fuel and all that. My work stood for itself; if I didn’t do good work people wouldn’t call me. I was cheap, so that kept me busy, but sometimes that’s not the best cause then you never get any decent money for what you do. I wouldn’t mind getting a normal job where I got a normal paycheck, but it never seemed to go that way so I just stayed working for myself.”

Negative Relationship Issues. This category was defined as issues in primary relationships before incarceration. Katie stated, “We left for domestic violence. I had a restraining order on their dad. He found us up there.” Because of her difficulties in her relationship with her children’s father, she has moved around a lot, resulting in a chaotic home environment for the children. She does not have custody of any of her children at this time. Two subcategories emerged from the data: *interpersonal conflict* and *child support*. Interpersonal conflict was defined as challenges to successful relationships, such as domestic violence. Zachary stated, “It was a very abusive relationship between the both of us which is really strange because we used to beat the piss out of each other because she [children’s mother] was the only person that ever happened with. I had a theory in life. If you’re man enough to stand up and hit me in the eye, I’m going to hit you back in the eye. You can’t just do something stupid like that for no reason.” Child support referred to owing ordered child support. Many participants reported that not paying child support resulted in felony charges. Brandon stated, “I think it’s terrible they have the right to threaten your livelihood, and they charge you with a class act

felony now...job now with a felony on you. Doesn't matter what is the felony, they don't ask what class, just a felony, so right away the flags are up."

Housing Stability. The housing stability category was defined as a lack of a stable living environment in which the housing was affordable and/or the person was not at risk of losing their housing. Five participants reported that lack of a stable living environment contributed to their involvement in the criminal justice system. Katie stated, "When I left the boy's dad, we lived down here but we left for domestic violence. Then we moved up to (reservation) with my sister. He found us up there. Then we moved again." Two subcategories emerged, *unsafe environment* and *bounced around*. Unsafe environment referred to living in unsafe neighborhoods, where criminal activity was rampant. Three participants reported living in an unsafe neighborhood. Brandon stated he wanted to work as a food delivery driver in his neighborhood, but he was worried about being shot. Joseph discussed his unsafe neighborhood, being stripped and robbed of everything at the age of 13. He stated;

"I went the rails, I shot three people. I was 16 years old. That was just the way of life, because I got robbed when I was 13 years old. It was ten below zero, they stripped me butt naked in an alley and beat me up. And that was the day I was like, this is never happening again, so I always kept a firearm on me. It's just a way of life. You don't keep letting this happen to you, you're going to stand up and do something about it. You can't call the police; by the time the police get there, you're lying in the middle of the street dead somewhere. It's different where I'm at. The (neighborhood) area, they say it's the most high crime area in the city. That's where I grew up."

Bounced around was defined as having to move around a lot during childhood. Sue stated, "I was bounced around from my mom to different family members while my brothers and

sisters got to stay with their dad, and then would be able to see my mom too. I've always been bounced around from different family members. I've always been the one that had to go on my own, pretty much."

Lack of Transportation. Lack of transportation was defined as inadequate transportation, either with their own vehicle or public transportation. Two participants reported lack of transportation as a challenge before incarceration. Katie stated, "I didn't have no license so police pulled me over and took my car. I gave up looking for a job and I just started drinking."

Lack of Education. The lack of education category was defined as not graduating from high school or obtaining a high school equivalency diploma. Five participants reported that they did not graduate from high school. This resulted in difficulty finding employment. Brandon reported, "I never really had much use for the knowledge of school. That doesn't really help me. That doesn't help me doing what I'm doing other than doing good for me."

Violence. This category was defined as violence in the household but was not categorized as domestic violence due to the participant's discussing it as a way to cope with their way of living, not just inside but outside the home. It was identified as a challenge for two participants, Doug and Brandon. Doug stated, "I was living with my baby momma's family and said I'll pay rent. I was taking care of my daughter and then [her father] gets in my face on Christmas Eve, because me and her were arguing right before dinner and it kind of got really prejudiced against her and calling her a bunch of names. He jumped in my face and I kind of beat him up. I just got kicked out of their house."

None. This category was defined as having no challenges in life before incarceration. Sarah reported that nothing was bad before incarceration. She was living successfully in their

environment. “Everything seemed like it was going good for me. There were no things that was holding me back.”

During Incarceration Challenges. The incarceration challenges theme was defined as the primary factors that were difficult for participants while incarcerated. Participants reported the following challenge categories during incarceration: (a) difficulty adjusting (subcategories- time in segregation, institutionalization), (b) lack of family support (subcategories-miss children, distance), (c) lack of programming, (d) cultural isolation, (e) interpersonal conflict, (f) racial passing and (g) legal problems. All 12 participants reported data in this theme.

Difficulty adjusting. The category of difficulty adjusting was defined as struggling to adapt to incarceration. All 12 participants reported that they initially had a difficult time adjusting to incarceration. Sarah stated, “Everything was horrible. I’m trying to call home and I couldn’t get through. I thought they forgot about me. I cried most of the time in jail.” Robert reported, “Just when you first get in. When you first get in because you have nothing. You don’t want to ask nobody; otherwise you end up owing when you do get it. It’s kind of hard getting stuff when you don’t have money and stuff either.” Two subcategories emerged from the data: *time in segregation* and *institutionalization*. Time in segregation referred to participants who were housed in a special housing unit for a variety of reasons, including disciplinary or vulnerable population status. When housed in segregation, people are typically housed alone or with one other person, with limited access to resources outside their cells, including limited access to the showers and recreation time. This subcategory emerged inductively during analysis. Although there is emerging literature on the experiences of inmates and time in segregation, it is still a relatively new field studied. Furthermore, the experience of segregation while incarcerated and effects after release is not studied in any capacity. Doug stated, “People who are put in the

hole can't talk, they don't have blankets, they don't have pillows, they are strapped to their mattress at night. When they wake up, they give them the mattress; you know what I'm saying? If you get food, you get nutriloaf, and that's not great." James reported, "I did a lot of hole time you know, it gets to you after a while. I would get such bad anxiety after I was released from being in jail in the hole. It's hard to go places and stuff." Institutionalization, another subcategory that emerged inductively, was defined as deficits in social or life skills, which may develop after a long period of incarceration. Institutionalization is not a topic currently treated in reentry literature. Brandon discussed his experiences with institutionalization and how it could have an effect on a person being released from incarceration. He stated;

"You're in jail, everything is taken care of for you; shower, hot water, you're fed. Slip a couple of packets of sugar and put them on your food cause they don't use any seasonings. You can get through with that. It sounds odd to say but it's not a bad lifestyle. When you have nothing else going for you that's how guys get, they call that institutionalized. That's how they get institutionalized; they get used to everything's taken care of, they got a routine and they follow it. That's why prisons become so comfortable to the people who've been in there for such a long time, it's just so easy. Everything is there."

Lack of family support. This category was defined as lack of social support from family while incarcerated. Six participants had a difficult time during incarceration due to lack of family support and connection. Zachary stated, "I had to survive on my own. I didn't have family or friends supporting me while I was there." Two subcategories emerged: *missing children* and *distance*. The missing children subcategory was defined as missing their children while incarcerated and being concerned their children would forget who they were due to incarceration.

This was endorsed by three participants. James reported, “I won’t give up until we have him back. It’s just hard. We want reunification so bad they do bring up adoption to others and we say no. It’s just so stressful but we are figuring it out.” Three reported lack of family support due to distance. Distance was defined as being incarcerated at a facility that was far from family. Their family did not have the resources to visit at a facility that was far from home. Robert stated, “I was just writing letters and talking on the phone. Nobody had a way to get up here. They could’ve took a bus or something if they wanted to sit on it for a couple hours.”

Lack of programming. The lack of programming category was defined as a lack of educational activities, mental health services and/or recreation while incarcerated. Four participants reported the facilities they were housed in lacked programming, such as psychology services, education, or recreation, which made their time difficult. “They didn’t have no counseling groups or nothing like that.” Katie reported, “They stopped because somebody else messed up because she was supposed to be going to AODA classes, she messed up, and she came back drunk or whatever. Everyone lost out because of one person.”

Cultural Isolation. Cultural isolation was defined as being one of a few AI/AN persons in a facility and feeling isolated as a result. The subcategory of cultural isolation emerged inductively from the data, as it is not seen in current literature. Two participants, Kevin and Mark, reported feeling alone in their experiences due to being one of only a few AI/AN persons at their facility. Kevin stated, “There’s me and there’s one other Native there. That was it, me and him.” Mark reported, “There wasn’t much Natives, like four or five there. They actually had more like fifteen that were actually Mexicans and they ran the sweat lodge ceremony in the Mexican style, speaking Spanish and everything. I didn’t participate in...there were only a couple of Natives that were there.”

Interpersonal conflict. This category was defined as difficulty getting along with other inmates and staff, and was endorsed as a challenge by Joseph and Doug. In response to discussions about during incarceration challenges, Joseph discussed playing a lot of basketball, resulting in conflict with other inmates. He replied, “People that’s jealous. I’m old now, too, and I’m still beating people half my age and things like that.” Doug discussed his conflict with staff at the facility. “When I first got put on maximum custody like the guards, I got a couple of them fired because they took my mail and ripped it up right in front of me at the door. Then I never received paperwork for my daughter being locked up. That actually kind of screwed me over now because I got this contempt of court from not showing up to court.”

Racial Passing. Racial passing was defined as when a person classified as a member of one racial or ethnic group is accepted as a member of a different racial or ethnic group. This subcategory emerged from the data inductively, as it is not found in the current reentry literature for any racial and/or ethnic group. Two participants, Doug and Mark, discussed the implication that incarceration was easier for them because they passed as another ethnicity. Although they both reported it as easier for them while incarcerated, it could cause a person to lose their sense of identity. Doug reported,

“A lot of people took my Native name for being Puerto Rican because of my [hair color] as well but usually when you go in there, they’re like race you understand. They just automatically put White/Caucasian. So they didn’t like, they didn’t have Alaskan Native, you know what I’m saying? A lot of jail systems, they don’t even ask that kind of stuff no more. They just look at you and you know, base it off whatever. They’ll ask you if, if they don’t know, if they can’t assume something then they’ll ask you. One of my guys was labeled Hispanic and he’s half and half. He’s half white and half black. They will

probably throw him under the Hispanics area. That's another thing I don't like, they categorize people a lot in there too."

Legal Problems. This category was defined as difficulty with the legal system while incarcerated. One participant, Logan, reported difficulty with taking care of legal issues while incarcerated, especially a lack of access to legal resources. "Just the legal problems that I had with the State, trying to get issues resolved. My records were constantly being messed with, and information was being put in my records that shouldn't have been there. I had a hard time getting stuff taken care of legally while I was in there."

Post-Incarceration Challenges. The post-incarceration challenges theme was defined as the primary factors that have been difficult in the life of the participant since release from incarceration. Participants reported the following challenge categories in their lives after incarceration: (a) employment (subcategories- felony on record, clothing, lack of skills, lack of proper documentation), (b) negative relationship issues, (c) rules of release (subcategories- sobriety and child support), (d) adjustment to community (subcategories- neighborhood, interactions with tribal police, housing, spirituality), (e) interracial conflict, (f) transportation, and (g) lack of tribal support (subcategories- reservation distance, no resources, barriers). All 12 participants reported data in this theme.

Employment. The lack of employment category was defined as the absence of paid work or adequate employment after release from incarceration. Ten participants reported difficulty finding stable employment after incarceration. Zachary stated, "Finding jobs. Trying to find a job. She's been busting her butt trying to help me and [community agency] do a lot for me. Another participant, Sue, stated, "Just finding work. They say equal opportunity employer but they're full of it. Especially like my background and just because I'm young." Subcategories

included: *felony on record, lack of skills, lack of proper documentation, and clothing*. Felony on record was defined as having a crime on their record after incarceration. A felony is a more serious crime than a misdemeanor and is usually punishable by imprisonment. Four participants reported that having a felony on their record made it difficult to find employment. Brandon stated, “It’s just a shame that the employers out there for one, there aren’t many and for two, they don’t want criminals. No matter how much you dress a person up, they’re still a criminal and that’s all they look at and that’s if you’re an employer like I am. I pray that I get blessed to get big enough to have a payroll cause then I can look beyond that point.” The lack of skills subcategory was defined as a deficiency or absence of a skill needed for employment. Lack of skills related to technology was reported by two participants, Brandon and Katie. Katie stated, “They [community agency] are pretty good about helping and if they can’t help you here, they kind of push you to different resources in the community. Otherwise I could have someone Google it for me. I’m not a computer person.” Another participant, Brandon, stated, “That’s why the computer, I could learn to pay simple bills with it. She helps me pay certain bills I have. I would like to learn on my own time, not feel pressured for time.” The lack of proper documentation subcategory was defined as not having the appropriate documentation to obtain employment, such as a driver’s license, social security card, resume, etc. Four participants discussed their need to obtain paperwork as a barrier to finding gainful employment. Katie stated, “Trying to get all my paperwork together. I was in the process of doing everything; now I have to start all over...my nephews threw all my stuff out. Somebody took my driver’s license.” Clothing was defined as not having the clothing necessary to meet the dress code at certain workplaces. One participant, James, reported that he did not have a lot of resources when released, including suitable clothing for job interviews.

“They called me up and told me to come in for an interview, but the thing was, I’m fresh out. I didn’t have, clothing-wise, to get the job. As for my work experience and things, they were interested to call me in when I didn’t even apply for them. That’s why I had a chance at the job, but the main part about it was looking, I wasn’t in a suit, you know what I mean? The professional clothing part is where it hurt me not to get the job. They didn’t call me back. That’s the part that came up. She didn’t say it right out, but she pretty much asked me if I knew if that’s how it was going to be, clothing-wise.”

Negative Relationship Issues. This category was defined as issues in primary relationships after incarceration. Seven participants reported difficulty with relationships, including romantic and family, after release. Brandon reported, “I had a place to stay. I found out my brother’s punk girlfriend tried to talk my brother into blocking me from coming home. She asked why I couldn’t find a halfway house instead of going there. That didn’t go over well, it still doesn’t and all of a sudden I lost my room. They gave my room to her and that pisses me off too.”

Rules of release. The rules of release category was defined as following the rules of parole or probation after release. All participants were subject to specific rules related to their release, including probation or parole and seven participants reported this as a challenge. Brandon stated, “Is it true that probation’s set for people to fail, cause they make it really hard. I’d like to see some of them do that, jump through all them hoops and see if they can make it. The average person on the street, I know they’d get violations.” Subcategories that emerged from the data included: *sobriety* and *child support*. Sobriety was defined as abstaining from drugs and/or alcohol after release. Sobriety is a common rule for people on probation and many probation officers require urinalysis. Five participants discussed challenges related to their

sobriety. Joseph stated, “I end up doing the drug program. I just felt it was a bunch of bullshit. They tell you it’s behavior, change your behavior, change your way of thinking. I was telling my counselor up there, I can walk to the corner store and by the time I get to the corner, there’s 10 people that have something I want to smoke some weed, there’s about 20 people that got alcohol. I ain’t grow up in Mayberry.” Four participants discussed difficulties surrounding child support, including finding the means to pay. Without adequate employment, it is difficult, if not impossible, to pay. Failure to pay results in breaking of rules for probation and could lead to incarceration. James reported, “Just finding a job, doing all my applications, just trying to find jobs and thinking about child support. I could work 40 hours at a job and still need to pay child support. It stresses me out.” Another participant, Zachary, discussed an upcoming court date related to child support. “They want money. They want money or jail time, always. I have been trying to use the resources I can come up with. My PO sees that. It’s just next week when I go to court, hopefully the judge and DA see that.”

Adjustment to community. The category of adjustment to community was defined as struggling to adapt to your community after release from incarceration. Nine participants reported difficulty with adjusting to their community after incarceration, regardless of their length of stay. Mark stated, “I just feel out of touch. Everything is so fast now. Everybody is on a computer. Everybody is on their phone. Ain’t nobody social anymore unless it’s on a computer and texting. Nobody really wants to sit down and have a conversation anymore.” Four subcategories emerged: *neighborhood, interactions with tribal police, housing and spirituality.* Neighborhood was defined as returning to the same neighborhood and circumstances the person left, including concerns about safety and sobriety. James stated, “I know who is out there doing what, where we live at it’s not a great neighborhood and I don’t always associated with good

people so that's probably the hardest part." The interactions with tribal police subcategory was defined as difficulty with police on the reservation after returning after incarceration or trouble with the law and was a subcategory endorsed by four participants. This subcategory emerged during inductive analysis. This was a new subcategory that had never emerged in reentry studies. Mark reported, "The reason I believe I had a lot of problems with the police up there is because my first case, the victim was actually the son of a police, his dad was a sheriff. He was a higher up police officer and I know that's where a lot of my troubles come from. I know for sure I had a target." Logan discussed his interactions with tribal police. "I feel like that's scared me away from there because last time I was up there we got pulled over by the police up there. They ran a background check on me and this cop mentioned "you got a warrant on you." I took care of all this stuff but I didn't have any proof that I took care of it. They had to use that as they're using it now to keep stopping me, pulling me over, detaining me, taking time out of my day to deal with an issue that should have been resolved years ago." Housing was defined as inadequate or unsafe housing when released and was reported by four participants. Kevin stated, "There was yelling and the police got called. I broke some windows at the house a couple of times. The last time she got hurt but it wasn't me. I got charged but they were dropped after three days. I'm trying to stay away from her. If she quit drinking completely, I probably would try to make something work for my daughter." Another participant, Brandon, stated, "Some of these neighborhoods they get shot; I don't want to get shot." The subcategory of spirituality was defined as having a spiritual connection in the participant's lives after release from incarceration. One participant, Kevin, discussed his difficulty with finding his spirituality and concerns about how it fit into his life. "Everybody expects you to be like a, you're a peace society. It's different for us. I'm sure it's probably pretty easy on the reservation, but everybody doesn't live on the reservation."

Interracial Conflict. The category of interracial conflict was defined as conflict between different races or ethnic groups. Two participants, Doug and Kevin, discussed interracial conflict in their neighborhood or workplace, which resulted in challenges after release from incarceration. Doug stated, “My PO (probation officer) put me in a TLP (transitional living placement) and I’m not racist or anything but I really did not like the black people around there. I got jumped a couple of times on the bus, waiting for the bus to go to work. I got jumped too many times and I’m like dude, I’m trying to go to work, I’m trying to do all of this other stuff, you might as well lock me up because I’m not going back there.” Another participant, Kevin, stated, “It’s like when you get to a job and people, they treat you different, like the joking and stuff like that. There’s a lot of that. A lot of people have to deal with that, but for us, it’s a little different, cause we’re used to it.”

Transportation. This category was defined as not having adequate transportation to go to work; whether it was one’s own vehicle or using public transportation. Inadequate transportation was a concern for five participants, including having transportation to work and/or utilizing public transportation. Joseph stated, “I got pulled over on the way over here. Got pulled over, my plate’s suspended.”

Lack of tribal support. This category was defined as not receiving tribal support after incarceration. Lack of tribal support after incarceration was endorsed by eleven participants. Out of twelve participants, only one person reported support from their tribe. Brandon stated, “Basically, I got shit on, and that’s people that live in (reservation) get shit on all the time. If you don’t live up there you have to fight for every scrap you get.” Three subcategories included: *reservation distance, no resources, and barriers.* The reservation distance subcategory was defined as not living on the reservation and being too far to obtain resources on a regular basis.

Nine participants reported they did not get support from their tribe due to distance to the reservation. Many stated they would get resources if they were on the reservation but other challenges, including lack of opportunities, not wanting to leave their children, and concerns about being recognized, resulted in them not wanting to return to their reservation. Kevin reported, “You have to be up there for them to help. They’ll help you go up there but I can’t really leave my daughter. There’s jobs I could take, like work for cash, but I got to have more structure in my life.” The no resources subcategory was defined as tribes lacking the resources to help their members with reentry. Eight participants also reported their tribes had a lack of resources to offer. Logan reported, “I feel a little resentment towards my tribe about them not helping me with that because I feel that it’s their obligation to do that. That should come first because, to me, that’s why a lot of the problems they have up on the rez is because there isn’t enough resources for men.” The barriers subcategory was defined as circumstances preventing the person from obtaining support from their tribe after reentry. Three participants felt they needed to “jump through hoops” to even think about obtaining resources. Katie reported, “I went to my tribe before and they really didn’t help, so, ain’t no sense in trying again. They’re getting stingier and stingier. It’s more difficult to get any type of resources out of them. They make you jump through all kinds of hoops and it’s just like a never ending battle so I don’t even bother.”

CHAPTER V: DISCUSSION AND CONCLUSION

At the behest of the partner agency, the primary aim of this project was to explore the impact of incarceration on recently released AI/AN individuals in an urban area, regarding pre-, during, and post-incarceration factors. A secondary aim was to explore the complex cultural, economic, and societal issues at play that may act to facilitate or constrain reentry for AI/AN populations. Both aims were examined within Danieli's (1998) model (Trauma and Continuity of Self: A Multidimensional, Multidisciplinary Integrative (TCMI) Framework).

Participants presented with significant health and social disparities, consistent with the published literature focused on AI/AN groups and HT. Although there is scant publication focused on the AI/AN experience of incarceration and reentry, the data reflected many similarities with the published literature regarding non-AI/AN groups. The results were thus in line with the reentry issues discussed in the literature review; however, the findings included more collectivist, as opposed to individually focused, viewpoints, as well as some remarkable inductive findings. While not unexpected, the bulk of the extant literature on reintegration focuses on the effect of incarceration and reentry on the individual. This project's findings; however, also significantly detail how participants' incarceration affected their family systems and communities, as well as how individual participants felt they were viewed by their community and tribe.

In alignment with the ECM, a primary issue called to attention by these findings is the utility of TCMI framework to address data at the collectivist level, in understanding incarceration for AI/AN persons. In light of the TCMI framework, the findings of this project necessitate the question: Is incarceration a symptom of HT, a rupture, both, or neither? As presently conceptualized, the HT perspective views incarceration of the AI/AN individual as potentially

both and/or an individual symptom and/or a potential rupture as trauma. Incarceration might also present as an outcropping of oppression, racism, poverty, etc. and/or, incarceration could be seen as a rupture in the individual's life. Further, in the case of tribally-oriented populations, incarceration could result in a rupture of the family and community systems, creating an intergenerational-feedback loop at one or more generational levels. The concepts of Soul Wound and HT accommodate the both and/or perspective that is more congruent with the traditional AI/AN worldview, as noted by Duran and Duran (1995). The option of incarceration potentially being neither is premised upon Gone's (2008; 2009) suggestion that to conceptualize any of the proposed "symptoms" of HT as de facto *traumatic* (as opposed to merely *stressful* for many) is in and of itself a manifestation of internalized oppression and a victimizing perspective of AI/AN persons. Some participants shared their experiences related to incarceration as just "doing their time" and did not share stories of traumatization from incarceration—and frankly may have experienced traumatic events in their pre-incarceration lives which placed them at risk for incarceration, as deeply demonstrated in the Results section.

Given the findings, via Danieli's framework, incarceration could also be viewed as a symptom of HT suffered by other generations in the family or the community as a whole. The framework conceptualizes trauma as a rupture, resulting in negative coping in parents, grandparents and other generations, that is passed down to offspring. As a result, negative behaviors emerge, which could lead to incarceration. These behaviors could be a result of upbringing or alcohol and/or drug use and abuse. A number of participants reported a history of AODA, resulting in continued incarceration. AODA struggles are conceptualized as a symptom within the HT theoretical perspective. Incarceration could be a symptom of the HT passed

intergenerationally, due to negative behaviors that occurred as a result of the trauma experienced either directly or indirectly.

A number of the participants assert that incarceration may also cause a disruption in the community system, which could be seen as a rupture. The *interactions with tribal police* subcategory emerged as an inductive finding. While it is not an uncommon experience for those who have been incarcerated to later be paid close attention to by law enforcement, this finding was not anticipated and may present a particularly challenging barrier to AI/AN persons attempting to return to their tribal communities. Most participants reported that returning to their tribal communities was difficult and also shared how they felt targeted by tribal police after returning to their reservation after incarceration, and in fact perceived their communities in general, to be aware of their goings-on. This may also be a factor in some choosing to relocate to a non-tribal setting, such as the urban area where this project was conducted. Being in a larger city reportedly not only offered more opportunities, it also provided a setting for some where they were just one of a larger number of those with criminal backgrounds. Sue's story serves as an example of this, in that she felt such relocation also provided a setting where having a criminal background was not as great a barrier to employability. The agency's new Director also found the data on interactions with tribal police to be a noteworthy result to which the agency would attend in the future.

The aforementioned findings seem to support the assertion already made in the literature (Rouse Arndt, 2004), that the TCM framework may not well explain constructs as experienced by AI/AN groups. The TCM does not well accommodate conceptualizing incarceration via an AI/AN traditional/cultural worldview as potentially both and/or/neither regarding the HT theoretical perspective. Incarceration could be neither the rupture nor a symptom of HT. It could

simply be a stressful experience for participants, not necessarily traumatic. This idea is in line with Gone's (2008) mainstream trauma perspective; which views imposing the "trauma" mantle as pathologizing, a perpetuation of HT and revictimizing. Danieli's framework is individually-focused and conceptualizes an individual's identity to be comprised of interactions between multiple spheres. The individual focus of the model is not congruent with the experiences of the AI/AN participants' reports in this project, as well as with an AI/AN traditional worldview, nor AI/AN cultural perspectives, which are more collectivist in nature

Intergenerational Issues

The findings supported the premise that participants experienced intergenerational disruption, both manifested via biopsychosocial disparities and the disruption of the transmission of enculturation experiences. Participants were able to share very little about grandparents and further generations. Most participants stated, "I don't know" when asked for information related to their family history. The fact that many could share health issues within the family was intriguing. Is this an artifact of the extreme disparity within AI/AN communities? Is it that participants had little to share about enculturation issues, but could talk about their family history of cancer, diabetes, etc. for some reason? Additionally, of the few participants who reported a first degree family member being in the military, most were unsure of the branch. This is nearly a shocking occurrence, given the extreme overrepresentation of AI/AN persons in all branches of the military. This finding seems to strongly support a case for existing disruption in a family.

Interestingly, this was also the case for participant's reports of family members who attended boarding schools, but lacked knowledge of which boarding school their family members attended. As essential to the TCMI framework, Danieli (1998) discusses the conspiracy of silence as a mechanism of coping with HT. In the case of the AI/AN boarding school era, the

time period is also nearly missing within the national conscience as well. Thus, the conspiracy of silence occurs when highly stressful or traumatic information is not shared with future generations to avoid the transmission of that negative affect. This then causes its own rupture in the family and community systems, and indeed in the U.S. has also occurred at the national level.

Participants also shared their family history of incarceration, which could cause a rupture in the family and community systems, as well as a trauma response. As a reminder, ten of twelve participants reported a sibling with serious legal problems, including incarceration; and one participant reported a sibling who is incarcerated for a life sentence. Five participants also reported their father had serious legal problems, including incarceration. This speaks to the remarkable stressors this sample has endured, especially related to family disruption. It also seems to call into question intergenerational patterns, or intergenerational transmission of institutionalization via incarceration for many in this sample.

Individual Level

Although the majority of the participants shared remarkable stressors and a history of trauma and violence, they presented as optimistic about their futures. The resiliency in the sample was extraordinary and speaks to the resiliency of the AI/AN population as well, tending to foible the victim-oriented literature. Given that support from a variety of sources, including family and community, was a key factor in feeling successful after release, participants focused unexpectedly on the need for community programs to be more proactive in promoting their services. There are many services in the particular community that was the focus of this project, but much of the information related to community resources has seemingly historically been shared via word of mouth (Milwaukee Public Museum, n.d.). This is congruent with statements made by the new agency Director, in which she asserted that word of mouth is a more common

and successful way to communicate in the AI/AN communities. Typically, hearing from a friend or family member about a program encourages participation as opposed to reading a flier on a wall. The “vouch” of the family member or friend goes a long way according to anecdotal information from the agency, which differs from the findings in the sample.

Another finding regarding participants’ individual fortitude related to the presence of remarkable stressors experienced by the sample—those that elevated to an intense magnitude of stress that is commonly viewed by psychology as traumatic; however, are not seen as so by the person experiencing them (Rouse Arndt et al.,2013). Many participants reported significant stressors, which could be considered an artifact of colonization and oppression according to the HT paradigm. AI/AN communities suffer from some of the highest rates of lifetime stress and traumatic events, including child abuse and neglect, violence, poor health, and negative stereotypes (Evans-Campbell, 2008). The violence extends into the community as well (e.g., Joseph reported a brother with a life sentence for homicide, and that while he was incarcerated, his family took turns visiting him or his brother, with the participant indicating he preferred that his family visit his brother, since his sentence was much more significant). The presence of a higher rate of remarkable stressors (e.g., rape, homicide, suicide, grossly impairing morbidity) is not something yet mentioned for the incarceration literature for AI/AN groups, though it does appear briefly in the health-related literature (Rouse Arndt et al., 2013). Most notably, the loss of one of the community consultants due to early death is a sad example of the rate at which individuals and communities face such remarkable stressors. Not only did the project staff need to adjust for the loss, but scores of those in the AI/AN urban were rocked by the death, and continue to struggle to find another spiritual leader. The gap left by his passing is formidable. Similarly, a number of participants shared they had a first degree relative die while they were

incarcerated. Given the high mortality rates among AI/AN groups, this is likely a fairly common experience among those incarcerated. Their grief may also be amplified by not being able to attend or honor any traditional ceremonies for their loved one. Such experiences call into question the prevalence of complicated and/or traumatic grief among AI/AN persons who are incarcerated as well.

Violence. Research has shown that HT can result in high rates of violence in families and communities. AI/AN communities suffer from some of the highest interpersonal violence rates in the U.S. Violence exposure can also predict future violent behaviors in youth, which places them at greater risk of injury and mortality (Covin, 2012). Violence is seen as a vehicle of colonization and HT, and was significant in a number of participants' lives prior to incarceration. Participants frequently discussed feeling unsafe in their current neighborhoods, due to high rates of violence. In a cruel demonstration of this reality, after data collection was closed, one participant became the victim of a homicide in his neighborhood. Again, this speaks to the remarkable stressors endured by the sample as well as the population overall. The data from this project raise the awareness of the extreme need for safer neighborhoods and housing opportunities.

One subcategory that emerged inductively and has not been treated in reentry literature is the amount of time spent in segregation. Persons in segregation are typically alone in their cells for twenty-three hours per day. They are supposed to be offered an hour of recreation time per day, but it is at the discretion of correctional staff. Incarceration itself can be construed as a violent and traumatic experience for many. Being segregated can cause undue psychological distress (Pizarro, Stenius & Pratt, 2006). Although there is no literature on the effects of segregation on AI/AN persons who are incarcerated, there has been more general research, which shows that significant time in segregation has negative, debilitating psychological effects.

Segregation has always been used in the U.S. criminal justice system; it has been used at an increasing rate for the last 20 years; and for longer periods of time. It was also a common practice at boarding schools. Deprived of normal human interaction, many segregated prisoners reportedly suffer from mental health problems including anxiety, panic, insomnia, paranoia, aggression and depression (Haney, 2003). Segregation was also a routine punishment utilized in boarding schools. Combine these negative effects with the high rates of mental health issues in the AI/AN population, and this can result in significant negative results. Segregation is diametrically opposed to how AI/AN persons are isolated in ceremonies, wherein they are prepared first, and protected throughout. It is also important to consider time in segregation when returning to the community after incarceration. Spending a significant time alone could cause difficulties when returning, as a person may have to get used to being around a large group of people; such as was the case with James, who discussed spending a lot of time in segregation and as a result, having to isolate himself when he returned to live with his family.

Similarly, institutionalization was also a subcategory that emerged inductively from the data and is not addressed in the existing reentry literature. Institutionalization has been experienced by AI/AN groups for hundreds of years, and in various forms beyond contemporary incarceration. Every participant discussed having a hard time adjusting to incarceration when they first arrived. Adjustment to incarceration comes in various forms. Most facilities use routine (feeding, laundry, visits, schedules) as a way to help with the adjustment to incarceration. Institutionalization occurs in the criminal justice system when a person establishes incarceration as their regular way of living their life, just like it occurred in boarding schools. They become so immersed in the system and their routine that it's difficult or impossible to live their life any other way. While incarcerated, most everything is taken care of for the individual. The longer

one is in the system, the harder it may be to adjust back to the outside world when released (Jung, 2011). For some people, it feels easier to stay in and have things taken care of, or remain predictable, then to be released back into a situation where you may be tempted to use drugs/alcohol, have to find a job so you can pay for housing, children, transportation, etc.

Institutionalization is a very important topic to consider in relationship to AI/AN groups, given the historical forms it has taken; boarding schools, reservations, HT and its effects, etc. As mentioned previously, there is no literature on the experience of institutionalization with AI/AN persons and incarceration, although there is more literature emerging with African American men's experiences specifically. This topic could open the door to future research with institutionalization and reentry after incarceration. The issue also intersects with the feedback given by the new agency Director that she feared that some of the clientele may have developed an institutionalized perspective of seeking caretaking by the agency, rather than looking to care for oneself.

More subtle forms of violence appeared in the data with this sample; racial passing and cultural isolation were also data that emerged and are not presently found in the incarceration literature. Although two participants, Doug and Mark, discussed racial passing during their incarceration experience, Doug looked at it as a strength. He felt that "passing" as Hispanic allowed him to connect with the Hispanic population in his housing unit. As an AI/AN person, he was isolated due to being the only AI/AN person in his housing unit. Many facilities are racially divided and being able to connect to a group with more members allows you a "safety net." In Doug's case and in many facilities nationally, staff do not ask about race/ethnicity, or tribal affiliation (Grobsmith, 1994). In fact, many AI/AN persons may never be identified racially, but recorded as "other" race—thus virtually guaranteeing they will not receive culturally

congruent services, spiritual care, or reintegration programming. This could result in a lost sense of self. The participants were ascribed a race/ethnicity often based upon how they were perceived by staff. This racial passing provides another way of feeling culturally isolated. As a result, participant's had difficulty due to a loss of culture while incarcerated. Kevin and Mark discussed how they were only one of a few AI/AN persons, resulting in difficulty coping while incarcerated. This could be considered a symptom of HT, in that there is a prevention of cultural and/or spiritual practices because your culture is not recognized and you're just another "white" or "Hispanic" guy. The current manifestations of this prevention of cultural practices are fear of the legal system, fear of loss of culture and difficulty with assimilating into the community after incarceration.

Education. The low educational attainment of the sample was consistent with the literature on incarceration and reentry. The CSG Justice Center reported that 37% of current inmates had less than a high school diploma. According to a study by the Alliance for Excellent Education (2013), low educational attainment is related to higher rates of arrests and incarceration. Dropping out of school does not result in a life of crime but high school drop outs are more likely to be arrested or incarcerated. There is no surprise that inequity plays a role, as the most overrepresented populations in the criminal justice system (AI/AN males, African American males, Latinos), are disproportionately represented in the U.S.'s most troubled and low performing high schools (The Alliance, 2013).

Employment. With regards to employment, this was a struggle for all participants and is consistent with the literature on reentry after incarceration. Employment was a huge barrier with this sample, which could be due to my unique sampling frame; although, as the literature suggests, employment is a main issue of reentry across communities. Although workplaces are

presented as Equal Opportunity Employers, some may see a felony conviction on an application and disregard the applicant, regardless of what the conviction was for. What stood out with this sample was many participants had employment history in labor intensive jobs. Working in labor intensive jobs could be beneficial for younger participants but could pose a significant challenge as the population ages. There are few jobs or resources available for aging population, especially in the age of technology.

Rouse Arndt and Davis (2011) discussed vocation and career as adaptive coping with the aftermath of colonization. What if a person cannot find adequate employment? Employment can be a sense of pride for some. Other times, it can be utilized as a way of coping with HT. Danieli (1998) explored job choices and found that some are transmitted intergenerationally, as in a person may follow in the footsteps of a relative or namesake.

Community Level

There was a lack of tribal support across the board, with eleven of twelve participants reporting lack of support and resources from their tribe after incarceration. Sarah was the only participant that reported tribal support, although she received a lot of support from her family, so did not ask for a lot from her tribe. This was significant, as the assumption was that AI/AN persons would receive some sort of support from their tribe, even if off tribal lands. If the jails or prisons are not asking about their tribal affiliation, then inmates cannot be connected to tribal supports for reentry. The project focused on the experience of reentry in an urban setting so no participants lived on their reservations. This seemed to play a part in receiving resources and support from tribe. There seemed to be ways to gain tribal support without living on the reservation but seems like there are a lot of steps that need to be taken Kevin discussed how he could not live on his reservation because he did not want to leave his daughter. Some tribes have

satellite offices in the area but there was no way to obtain resources at the satellite offices. There was a high need for resources with the sample but little to no resources for tribal support. For the resources that are available in the community for AI/AN persons, there can be a long wait for services. In fact, one of the inclusion factors of this project was to be receiving services from the partner agency, or on the waitlist to obtain services.

One significant finding when it came to tribal support was lack of transportation to the reservation, so participants cannot access resources such as medical, dental and vision care. A 2013 unpublished consultation project revealed AI/AN persons in the community would like to organize van pools to reservations on a rotating schedule so people could get help with these resources from their tribe (Hunt, Quant & Wohlers, 2013). The problem with having to travel to tribal lands is you may have to take time off work, if employed, as many healthcare offices are only open on the weekdays. As of now, without adequate transportation, you're at the whim of family or friends to get to the reservation. Even so, if you got up there on the weekend, there is no guarantee offices would be open to obtain resources. Transportation is a problem for many when releasing from incarceration, but it is typically transportation to the workplace, appointments, etc. In a large, urban area, public transportation is the solution for many with transportation issues. Even so, public transportation can only take a person so far.

The lack of tribal support and involvement caused some participants to resent their tribe. Some participants discussed they no longer fit into the tribe, no one cared for them, their needs, etc. There was a loss of sense of identity with their AI/AN traditions. Others felt that tribal members looked at them differently because of their criminal history. Logan did not like to return to the reservation because he felt the police always mistook him for his brother, resulting

in difficulties such as being pulled over and questioned. Some participants reported feeling embarrassed to return to the reservation, resulting in a lack of services.

The findings in this project are consistent with much of the literature on incarceration and reentry but add to it by researching a population that is not represented in the literature. Although much of the findings were congruent with past studies, the results included more experiences which seemed collectivist as opposed to individually focused, due to the samples focus not only on their individual experiences, but the effects on their families and communities. Findings also indicated unique experiences in the rate and intensity at which the participants experienced remarkable stressors and barriers to reintegration. The project may open up the door for more reentry research with diverse populations, since most populations must assume their reentry experiences will be congruent with more commonly researched populations.

Recommendations

Based upon the findings of this project, the following recommendations are humbly offered:

- Continue to deliver best practices in reintegration services: Many of the data support the premise that AI/AN individual's experience the same challenges as other groups in reintegration; though often to a greater degree of disparity. It will be critical to continue to provide employment opportunities, monetary resources to pay for trainings and supplies, resume building services, access to transportation and a safe, community gathering place. These are just some of the many services offered by the partner agency and reported by participants. The agency new agency Director commented on the agency being seen as a community gathering place. Her concern was that the agency may

provide such a protecting and welcoming environment that people might have little incentive to leave! This could affect future job success.

- Professional clothing: The provision of professional clothing or vouchers to obtain appropriate clothing for interviews would be beneficial for participants looking to be hired in fields where business appropriate clothing is required. It would be helpful to look into partnering with Goodwill, St. Vincent, or any other thrift stores in the community to obtain donations of business appropriate clothing. If a person has not worked in the business world previously, they may not know what clothing is appropriate. If incarcerated, especially for a long period of time, all clothing is provided for the person and they may not know what is in the world anymore. Starting a new job is stressful and standing out because of clothing can cause undue stress and embarrassment. Also, looking at the employment history of many participants, most worked in labor intensive jobs where they probably wore a uniform or clothing that was not office appropriate.
- AODA treatment: A number of participants reported a history of AODA, which significantly impacted their ability to thrive in their communities. For many, their AODA issues ultimately ended with incarceration. It would be beneficial to connect participants to community resources, including treatment groups, to facilitate a sober lifestyle. Many participants reported a lack of programming related to AODA concerns while incarcerated. Although offering AODA services is not a goal of the partner agency, AODA issues can be a detriment to securing and keeping adequate employment.
- Computer skills training: Offer training classes to develop more technologically advanced skills, especially computer skills. Starting with the basics and learning skills necessary to find a job in an office, call center, etc. could be beneficial to participants. As discussed

previously, the participants are aging and many may not have the ability to work in labor intensive fields for much longer. Providing training for technology related fields or employment in which computer skills are necessary would open up doors for many participants. Even if the community site was unable to provide the training, providing money or some resources would be beneficial. It would also be beneficial if the facilities where persons are incarcerated could offer more skills based trainings pre-release.

- Reservation transportation: Arranging transportation to the reservation would be another recommendation for the partner agency. Most of the tribal lands are a drive from the city. Since most participants reported they could only obtain resources on their tribal lands, offering a shuttle or van pool service could benefit. Another option would be to talk to satellite offices or other community agencies to offer more support and resources for off-reservation persons.
- Support groups: Based on the results of the project, participants were more successful with family and/or community support. It may be beneficial to offer more programming for people without a support network. Offering support groups could benefit a large number of people in the community, not just in this current sample. It would not have to focus on incarceration necessarily but could also focus on the bigger picture, such as life stressors, employment, etc. Goal setting groups could also help others with accountability. The agency Director reported that support groups are poorly attended but they are continuing to offer them in hopes of boosting enrollment, especially with a new GED initiative they are planning.
- Pre-release programming: Although this would not be a recommendation for the partner agency necessarily, it would be helpful if agencies would offer more pre-release

programming that transfers well into real world scenarios. Many participants discussed the lack of resources in the facilities in which they were housed and none of the sample participated in any reentry or pre-release programming. Reentry programming that also does check-ins after release may benefit the population, hold people accountable and help people stay on the right track. A smoother reentry process would benefit many and could result in a lower recidivism rate. The agency Director is working with the Wisconsin Department of Corrections to brainstorm opportunities for the agency to get involved with clients before they are released.

- Utilization of monetary resources: One participant suggested tribes use per capita payments (for those tribes that have such systems) to open workforce centers for trainings and certifications. Although this is not specific to the partner agency, it could be a recommendation passed to tribal offices. Another participant suggested that tribes with per capita payments should use that money and invest it into the tribe as opposed to handing out the money to participants. He had concerns that per capita payments were used to obtain alcohol, drugs, go gambling, and other negative coping strategies instead of helping the person with positive and healthy coping skills. If the tribe used the money to build up resources, could help more people in a positive way. The per capita payments could be used to start an employability program that also helps with securing loans for a vehicle, work to loan programs, or help with obtaining safe housing. This was suggested by one participant as a way to obtain a low to no interest loans with affordable payments to help participants get back on track.

Limitations and Future Research

Theories are still developing in the area of intergenerational HT. It is a relatively new field of study. As research emerges, it could change how HT is viewed. Even since the project started two years ago, new data have emerged. Kirmayer et al. (2014) posited that HT is being viewed as pathology or an excuse for negative behaviors by the population. Their research offers a more holistic understanding of the effects of colonization, including better understanding of persistence or resiliency factors of the community (Kirmayer, Gone, & Moses 2014). Still, there is no discounting the fact that hundreds of years of oppression, colonization and disparate treatment in the U.S. and criminal justice system have serious implications for AI/AN persons. Until there are major systemic changes made, there will continue to be disproportionate representation of AI/AN persons in the criminal justice system.

Specific to the project, one of the limitations comes in the area of recruitment. Future research should include a wider sample regionally and tribally. Although the literature supports that employment is a main barrier to successful reentry after incarceration, working with other agencies may provide different results. The project also only obtained data from persons that actively seek out community resources. There are many people that are reentering after incarceration who do not seek out resources, as exemplified by one participant who discussed how he normally does not reach out for resources but had a relationship with the community agency due to attending their high school in the past. It is likely this sample is missing individuals who do not feel comfortable reaching out or are embarrassed by their situation. The project may have had more results if recruitment occurred with a wider net within the community. The new agency Director suggested that word of mouth is a fairly common way to

advertise in AI/AN country. Utilizing this approach could help for future projects in gaining participants.

Another issue that may limit the finds is that of the time frame of the project and the issue of recidivism, which refers to returning to incarceration within three years of initial release. Eleven of twelve participants in this sample had returned to jail or prison after their initial incarceration. Many had difficulty with remembering how many times they were incarcerated, for what reasons, etc. It would be helpful to learn about that experience as it happened, as opposed to asking participants to remember their experiences with reentry. Much of this project required participants to discuss their experiences retrospectively and future research would benefit from contemporaneous examination of reentry, including interviews while participants are incarcerated and preparing for release. Additionally, although the focus of the project was on reentry into an urban setting after release from incarceration, it would be helpful to know what the experience of reentry on reservations is like for the population. That way, a comparison could be made between the urban and tribal experiences. Because of the lack of resources within this population, this would be an area of focus to grow the field. The agency Director also suggested a comparison between urban areas, small towns and reservations in regards to resources as well as police interactions.

Conclusion

The project attempted to answer the request of the partner agency to determine if more services could be offered to help the clients that remained on their caseload for much longer than other clients, and specifically help with clients with a criminal history. There is scant literature and no studies that discuss the reentry of AI/AN persons after incarceration, which the project sought to understand. Although this project had a small, geographically limited sample, it gives a

glimpse into the experience of incarceration and reentry for AI/AN persons. This project may open the door for further research in the field, including but not limited to a tribal, reservation and/or geographic area focus. There is significant diversity in the population and as a result, a lot of areas that could be addressed in future research. The results indicated a need for more supports in the facilities, as well as in the community, which is consistent with past literature in the area of reentry. Although most of the findings are in line with the literature on reentry as related to other populations, there were still significant differences, including the impact of intergenerational HT. Going beyond the individual focus and including the family and community supports is essential. There are also significant systemic changes that need to take place. AI/AN persons continue to be treated much more disparately in the justice system, even in comparison to other racial/ethnic minority populations (Covin, 2012). Until there are major changes made, it will be difficult to change the outcomes for AI/AN populations.

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APPENDIX A

Comprehensive History Questionnaire

You have the opportunity to complete this survey at home. You may choose to complete this independently to minimize the amount of time you spend with the principal investigator to. The questions mirror routine medical questions on family history. Please complete to the best of your knowledge. You do not need to consult any family members or friends when answering these questions. All should be answered based on information you know. Please keep the survey in the envelope provided to maintain confidentiality and return to the principal investigator as soon as you have completed it. Please let the principal investigator know if any questions come up. Monitor the amount of time it takes to complete the survey and report this to the principal investigator when you return your survey.

Current Occupation: _____

Retired _____

Past Occupation(s) _____

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INCARCERATION INFORMATION:

List in chronological order all incarcerations.

Agency Name

City, State, Country

Charge

Sentence

1.

2.

3.

4.

Please complete the following sentences:

1. Being an American Indian/Alaska Native and incarcerated in a jail or prison
2. The problem with reentry after incarceration is
3. My feelings when returning to my community after incarceration include
4. What is least difficult about returning to the community is

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Have you ever served in the military? No Yes (circle- if 'Yes' indicate country, branch, rank, dates of service)

What is the highest level of mainstream education you have attained (degree)?

Are you currently enrolled in school? No Yes (circle- if 'Yes' indicate current school and degree working toward)

FAMILIAL AND SOCIAL HISTORY:

What is the year and place of birth for the following people in your family [indicate cause of death if deceased]:

| | | | |
|--------------------------------|-----------------------------|----------|---|
| Yourself _____ | Sibling(s) [indicate] _____ | deceased | ق |
| Mother _____ | | deceased | ق |
| Father _____ | | deceased | ق |
| Maternal Grandmother _____ | | deceased | ق |
| Maternal Grandfather _____ | | deceased | ق |
| Paternal Grandmother _____ | | deceased | ق |
| Paternal Grandfather _____ | | deceased | ق |
| Other Significant Family _____ | | deceased | ق |

Where did the following people in your family spend most of their childhood years, and by whom were they raised?

| | |
|----------------|-----------------------------|
| Yourself _____ | Sibling(s) [indicate] _____ |
| Mother _____ | |
| Father _____ | |

Maternal Grandmother _____

Maternal Grandfather _____

Paternal Grandmother _____

Paternal Grandfather _____

Other Significant Family _____

Siblings: # of Brothers _____ Brothers' Ages _____ # Deceased/Cause of Death _____

of Sisters _____ Sisters' Ages _____ # Deceased/Cause of Death _____

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What is the highest level of mainstream education achieved by the following people in your family:

Yourself _____ Sibling(s) [indicate] _____

Parents _____

Grandparents _____

Other Significant Family _____

Have any of the following people in your family ever attended a tribal or governmental boarding school? If yes, please specify school name and years attended.

Yourself _____ Sibling(s) [indicate] _____

Parents _____

Grandparents _____

Other Significant Family _____

What is/was the main occupation of the following people in your family?

Yourself _____ Sibling(s) [indicate] _____

Parents _____

Grandparents _____

Other Significant Family _____

Have any of the following people in your family ever served in the military [indicate which branch and years of service]?

Sibling(s) [indicate] _____

Parents _____

Grandparents _____

Other Significant Family _____

What is/was the main religion of the following people in your family? Please indicate whether any practice(d) a traditional American Indian/Alaska Native religion.

Yourself _____ Sibling(s) [indicate] _____

Parents _____

Grandparents _____

Other Significant Family _____

Does/did anyone in your family belong to the Native American Church? No Yes (circle- if 'Yes' indicate who)

Has anyone in your family ever been placed in foster care?

Yourself _____ Sibling(s) [indicate] _____

Parents _____

Grandparents _____

Other Significant Family _____

Has anyone in your family ever been placed for mainstream adoption?

Yourself _____ Sibling(s) [indicate] _____

Parents _____

Grandparents _____

Other Significant Family _____

Have any of the following people in your family had ever had serious legal problems (e.g., criminal conviction)?

Yourself _____ Sibling(s) [indicate] _____

Parents _____

Grandparents _____

Other Significant Family _____

Have any of the following people in your family ever been a victim of a homicide or attempted homicide [please indicate which]?

Yourself _____ Sibling(s) [indicate] _____

Parents _____

Grandparents _____

Other Significant Family _____

Has anyone in your family ever attempted or completed suicide [please indicate completed suicides]?

Yourself _____ Sibling(s) [indicate] _____

Parents _____

Grandparents _____

Other Significant Family _____

Have any of the following people in your family ever been involved in domestic violence [victim, aggressor, or child witness]?

Yourself _____ Sibling(s) [indicate] _____

Parents _____

Grandparents _____

Other Significant Family _____

Have any of the following members of your family ever been physically assaulted as a child or an adult [if so, please indicate whether child or adult]?

Yourself _____ Sibling(s) [indicate] _____

Parents _____

Grandparents _____

Other Significant Family _____

Have any of the following members of your family ever been sexually assaulted as a child or an adult [if so, please indicate whether child or adult]?

Yourself _____ Sibling(s) [indicate] _____

Parents _____

Grandparents _____

Other Significant Family _____

Has anyone in your family ever experienced racial/ethnic discrimination due to his/her American Indian/Alaska Native heritage?

Yourself _____ Sibling(s) [indicate] _____

Parents _____

Grandparents _____

Other Significant Family _____

Has anyone in your family ever been a victim of a crime due to his/her American Indian/AN heritage?

Yourself _____ Sibling(s) [indicate] _____

Parents _____

Grandparents _____

Other Significant Family _____

How would you characterize the standard of living for your family as a child? _____

Your current standard of living? _____

How many pregnancies has each of the following members of your family had?

Yourself (women) _____ Sibling(s) [female] _____

Your Wife (men) _____

Mother _____

Maternal Grandmother _____

Paternal Grandmother _____

Other Significant Family _____

How many live births has each of the following members of your family had?

Yourself (women) _____ Sibling(s) [female] _____

Your Wife (men) _____

Mother _____

Maternal Grandmother _____

Paternal Grandmother _____

Other Significant Family _____

For each of the following people in your family, please list the number of children who did not survive childhood.

Yourself (women) _____ Sibling(s) [female] _____

Your Wife (men) _____

Mother _____

Maternal Grandmother _____

Paternal Grandmother _____

Other Significant Family _____

List the number of marriages or domestic partnerships (specify) for each of the following people in your family.

Yourself _____ Sibling(s) [indicate] _____

Parents _____

Grandparents _____

Other Significant Family _____

List the number of divorces or domestic separations (specify) for each of the following people in your family.

Yourself _____ Sibling(s) [indicate] _____

Parents _____

Grandparents _____

Other Significant Family _____

How many times have the following people in your family been widowed?

Yourself _____ Sibling(s) [indicate] _____

Parents _____

Grandparents _____

Other Significant Family _____

ETHNIC/CULTURAL INFORMATION:

How do the following people in your family racially identify [American Indian/AN, Latino/Hispanic, White non-Latino/Hispanic, African American, Asian]? If Bi or Multi Racial please specify.

Yourself _____ Sibling(s) [indicate] _____

Other Significant Family _____

Please list the tribal affiliation(s) [if any] of the following people in your family.

Yourself _____ Sibling(s) [indicate] _____

Parents _____

Grandparents _____

Other Significant Family _____

Please list the clan/band affiliations [if any] of the following people in your family.

Yourself _____ Sibling(s) [indicate] _____

Parents _____

Grandparents _____

Other Significant Family _____

Are any of the following people in your family members of any American Indian/AN tribal societies or guilds?

Yourself _____ Sibling(s) [indicate] _____

Parents _____

Grandparents _____

Other Significant Family _____

Does anyone in your family hold any office or position of leadership within his or her tribe?

Yes No (circle, if 'Yes' please indicate who and their role) _____

Is anyone in your family a member of a federally recognized tribe?

Yourself _____ Sibling(s) _____

Parents _____

Grandparents _____

Other Significant Family _____

Is anyone in your family a member of a "terminated" tribe? Yes No (circle, if 'Yes' indicate who)

Does anyone in your family speak a traditional American Indian language? Yes No (circle, if 'Yes indicate language)

Do you know anything about your American Indian heritage for generations prior to your grandparents?

Yes No (circle, if 'Yes' please outline briefly below)

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Please talk about the American Indian/AN traditions your family practices [include healing practices]?

Are you familiar with any warrior, or male or female traditional roles for your tribe? Yes No (circle, if 'Yes' outline briefly below)

MEDICAL HISTORY:

Please indicate whether any of the below listed members of your family have suffered from any of the following conditions:

| Condition | Yourself | Mother | Father | Maternal Grandmother | Maternal Grandfather | Paternal Grandmother | Paternal Grandfather | Other Sig. Relat. |
|---|----------|--------|--------|-------------------------|-------------------------|-------------------------|-------------------------|-------------------------|
| Alcohol Abuse | | | | | | | | |
| Anxiety | | | | | | | | |
| Asthma | | | | | | | | |
| Cancer (type) | | | | | | | | |
| Coronary/Heart Disease | | | | | | | | |
| Depression | | | | | | | | |
| Diabetes | | | | | | | | |
| Drug Abuse (including alcohol & nicotine) | | | | | | | | |
| HIV/AIDS | | | | | | | | |
| Hypertension | | | | | | | | |
| Intestinal Disorder | | | | | | | | |
| Kidney Disease | | | | | | | | |

| | | | | | | | | |
|---|--|--|--|--|--|--|--|--|
| Liver Disease | | | | | | | | |
| Posttraumatic Stress Disorder | | | | | | | | |
| Psychological/Emotional Problems | | | | | | | | |
| Pulmonary Disease | | | | | | | | |
| Serious Accident | | | | | | | | |
| Serious Injury | | | | | | | | |
| Sleep Disturbance | | | | | | | | |
| Tuberculosis | | | | | | | | |

APPENDIX B

Interview Protocol

1. What strengths did you have in your life before being incarcerated? During incarceration?
2. What challenges or barriers did you have in your life before being incarcerated? During incarceration?
3. What strengths have you experienced after your release?
4. What do you see are challenges or barriers after your release, if any?
5. What has your experience been like after returning to the community after incarceration? Strengths? Barriers?
6. What role, if any, has your family, community and/or tribe played in your re-entry process?
7. What were some of the resources you have utilized after returning to the community? (specify if any used from jail/prison)

Appendix C

Consent Form

UNIVERSITY OF WISCONSIN – MILWAUKEE

CONSENT TO PARTICIPATE IN RESEARCH

THIS CONSENT FORM HAS BEEN APPROVED BY THE IRB FOR A ONE YEAR PERIOD.

1. General Information

Project title: Exploring Community Reentry with Recently Released American Indian/Alaska Native Persons

Person in Charge of Project (Faculty Investigator):

Leah M. Rouse, Ph.D.
Assistant Professor
Educational Psychology
UW-Milwaukee
Enderis Building, Room 733
414-229-5407
larndt@uwm.edu

Holly Wohlers (Principal Investigator)
Doctoral Candidate
Educational Psychology
UW-Milwaukee
Enderis Building, 7th floor
hwohlers@uwm.edu

2. Project Description

You are being asked to participate in a research project. You do not have to participate if you do not want to.

Project description:

This project hopes to gain more information about the issues that American Indian/Alaska Native (AI/AN) people might face when returning to the community after being in jail or prison. We will ask you for information about your reentry experience after spending six or more months in jail or prison. We hope to learn more about both the troubles and supports you have experienced in this process. This project team includes members from UW-Milwaukee (UWM) and Spotted Eagle Inc. (SEI). As you likely already know, SEI is an agency that assists AI/AN persons as they enter the workforce and access training programs. SEI will be responsible for recruiting participants for this project, and the staff hopes to learn more about what they can do to help in your effort to return to the community. Your help may also support the mission of SEI and in developing programming for others in this process. SEI will present the information lessons learned to other community members and agencies to help them, but your individual identifying information will not be revealed.

3. Project Procedures

What will I be asked to do if I participate in the project?

If you agree to participate, you will be asked to meet with the principal investigator, Ms. Holly Wohlers, to learn more about the project. If you agree to participate, you will be given a survey that can be started at home on your own if you like. If you do choose to start the survey on your own, we will ask you to keep it sealed in an envelope we will provide, so that we can help ensure your confidentiality. We will then schedule an interview time for you if you consent to take part. The interview will be audio recorded and can take place where you feel comfortable, as long as we can ensure your confidentiality. It is expected to last from one hour to four hours, depending upon how much of your story you wish to share. You may also choose to do the interview in more than one sitting and/or setting. You will be asked about personal information as well as information about your family members- including your history of employment, incarceration, abuse, violence, and medical history. As with all parts of this project, you can refuse to answer any of the questions. You will be given breaks during the interview(s) if you need them. You can also stop at any time. You will additionally be asked to answer some questions after the meetings are complete, to help us be sure we have understood your story well.

The interviews will be audio taped and then put into writing to make sure it is correct. We also want to make sure that the information is private. Please let the principal investigator know if you do not want to be audio taped. If you do not, the principal investigator will keep written notes. Those notes will be kept in a locked safe and used by the principal investigator to understand your story. The tapes will remain private and no one will know that it is your interview. Your name and personally identifying information will not be kept on any of these forms.

After the data are collected, transcribed and analyzed, you will be contacted to discuss the results so we can be sure that all the information is correct. You will be given the opportunity to review your data. This is known as member checking, which is a process used in this type of research to help be more accurate. You are not required to do this part of the project if you don't want to, or if you cannot be contacted (e.g., if you move away and SEI staff do not have your contact information). The information from this contact will be taped and transcribed to help the project be sure of accuracy. This meeting will be conducted with you by the principal investigator.

To participate, you must be at least 18 years of age, and identify as enrolled or legal descendant of federally recognized tribe, and you must live in Wisconsin. You need to have been in jail or prison for at least six months in the past. SEI staff will help you determine if you are eligible.

4. Risks and Minimizing Risks

What risks will I face by participating in this project?

Because this topic might be hard to talk about, it is possible that you may experience difficult emotions while being interviewed. You will be asked about your personal history as well as your family history. The researchers and SEI will make sure that we can provide you with a supportive interview process and are prepared to help if you have any concerns. You will be given information about resources in the community for support if needed in the future. You may also ask the project staff to contact support for you.

5. Benefits

Will I receive any benefit from my participation in this project?

You will be participating in a project that may help others in the future. We hope the information gained regarding the AI/AN reentry experiences could help future research and also guide SEI staff in developing programming for their clients. You will be given a gift card of \$15 for each hour you are participating in the project. The limit is \$60, which is equal to four hours of your time. There is a chance the project may go over the four hour limit. The limit on the incentive for participating in this project matches the amount you can receive for your enrichment activity at SEI. You will be given your incentive at the end of each month, after the hours are reported. The activities do not have to occur during the same month. Your name will also be entered into a drawing for a \$50 gift card, to be given out at the end of the project. The SEI Director will manage the process of providing the gift cards.

6. Project Costs and Compensation

Will I be charged anything for participating in this project?

You will not be charged anything for taking part in this project.

Are subjects paid or given anything for being in the project?

SEI currently has a monthly enrichment program in place in which you can complete activities each month to get things such as transportation (gas cards, bus passes) or gift cards to local grocery stores. Your participation in the project can also count as your enrichment activity for the month if you would like. The gift cards will be \$15 for each hour you are participating in the project. The limit is \$60 or four hours. There is a chance that the project will go over the four hour time frame. Your name will also be in a drawing for a \$50 grocery store card, which will be drawn at the end of the project. The principal investigator will report the hours to the Director of SEI, and the SEI Director will be responsible for distributing the gift cards and the grocery store card to the winner of the drawing.

7. Confidentiality

What happens to the information collected?

All information collected about you during the project will be kept confidential to the extent permitted by law. That means no one will know it is your information. We may decide to present what we find to others, or publish the results in journals or at conferences. The results will be discussed with you before they are presented in any form. If the results are to be presented or published, they will be about the group of participants as a whole, and not about you individually. Only the principal investigator and project director will have access to your identity, and all recorded and written information from your interview will be de-identified so no one will know it is you. All information will be kept in a locked cabinet at UWM. Only the principal investigator and project director will have access to this information.

Data from this project will be saved on a password protected computer for seven years as per the recommendations of the American Psychological Association (APA) guidelines, and destroyed thereafter. Audiotaping will be used for the interviews in an effort to gather

information correctly. All audiotapes will have information about you removed when written out so no one will know it is you. The tapes and files will be kept according to APA and University of Wisconsin security and confidentiality mandates. However, the Institutional Review Board at UW-Milwaukee or appropriate federal agencies like the Office for Human Research Protections may confidentially review the records to protect your safety and welfare.

8. Alternatives

Are there alternatives to participating in the project?

There are no known alternatives available to you other than not taking part in this project.

9. Voluntary Participation and Withdrawal

What happens if I decide not to be in this project?

Your participation in this project is entirely voluntary, meaning you may choose to participate or not participate. If you decide to take part, you can change your mind later and stop. You do not have to answer all questions if you do not feel comfortable. You may withdraw at any time during the project, or refuse to answer any question at any time. Your decision will not change any present or future relationships with the University of Wisconsin Milwaukee or with SEI. If you decide that you do not want to participate after you have started the project, only the information gathered up to that point will be used with your consent. You have the option to have your information destroyed if you decide to withdraw, but after you complete the entire project. If you withdraw before completing the project, you will still receive incentives for the time you participated.

10. Questions

Who do I contact for questions about this project?

For more information about the project, the procedures and treatments, or to withdraw from the project, contact:

Leah M. Rouse, Ph.D.
Assistant Professor
Educational Psychology

UW-Milwaukee
Enderis Building, Room 733
414-229-4767
larndt@uwm.edu

Holly Wohlers (Principal Investigator)
Doctoral Candidate
Educational Psychology
UW-Milwaukee
Enderis Building, 7th floor
hwohlers@uwm.edu

Who do I contact for questions about my rights or complaints towards my treatment as a research subject?

The Institutional Review Board may ask your name, but all complaints are kept in confidence.

Institutional Review Board
Human Research Protection Program
Department of University Safety and Assurances
University of Wisconsin – Milwaukee
P.O. Box 413
Milwaukee, WI 53201
(414) 229-3173

11. Signatures

Research Subject's Consent to Participate in Research:

To voluntarily agree to take part in this project, you must sign on the line below. If you choose to take part in this project, you may stop at any time. You are not giving up any of your legal rights by signing this form. Your signature below indicates that you have read or had read to you this entire consent form, including the risks and benefits, and have had all of your questions answered, and that you are 18 years of age or older.

Printed Name of Subject/ Legally Authorized Representative

Signature of Subject/Legally Authorized Representative

Date

Research Subject's Consent to Audio/Video/Photo Recording:

It is okay to audiotape me while I am in this project and use my audiotape data in the research.

Please initial: ___ Yes ___ No

Principal Investigator (or Designee)

I have given this research subject information on the project that is accurate and sufficient for the subject to fully understand the nature, risks and benefits of the project.

Printed Name of Person Obtaining Consent

Project Role

Signature of Person Obtaining Consent

APPENDIX D



Jessica Rice
IRB Administrator
Institutional Review Board
Engelmann 270
P O Box 413
Milwaukee, WI 53201-0413
(414) 229-3182 phone
(414) 229-6729 fax

<http://www.irb.uwm.edu>
rice@uwm.edu

New Study - Notice of IRB Expedited Approval

Date: March 3, 2014

To: Leah Arndt, PhD
Dept: Educational Psychology

Cc: Holly Wohlers

IRB#: 14.173

Title: Exploring Community Reentry with Recently Released American Indian/Alaska Native Persons

After review of your research protocol by the University of Wisconsin – Milwaukee Institutional Review Board, your protocol has been approved as minimal risk Expedited under Categories 6 & 7 as governed by 45 CFR 46.110.

In addition, your protocol has been granted Level 3 confidentiality for Payments to Research Subjects per ASM Policy 2.4.6

This protocol has been approved on March 3, 2014 for one year. IRB approval will expire on March 2, 2015. If you plan to continue any research related activities (e.g., enrollment of subjects, study interventions, data analysis, etc.) past the date of IRB expiration, a continuation for IRB approval must be filed by the submission deadline. If the study is closed or completed before the IRB expiration date, please notify the IRB by completing and submitting the Continuing Review form found on the IRB website.

Any proposed changes to the protocol must be reviewed by the IRB before implementation, unless the change is specifically necessary to eliminate apparent immediate hazards to the subjects. It is the principal investigator's responsibility to adhere to the policies and guidelines set forth by the UWM IRB, maintain proper documentation of study records and promptly report to the IRB any adverse events which require reporting. The principal investigator is also responsible for ensuring that all study staff receive appropriate training in the ethical guidelines of conducting human subjects research.

If you plan to continue any research related activities (e.g., enrollment of subjects, study interventions, data analysis, etc.) past the date of IRB expiration, a continuation for IRB approval must be filed by the submission deadline. If the study is closed or completed before the IRB expiration date, please notify the IRB by completing and submitting the Continuing Review form.

As Principal Investigator, it is your responsibility to adhere to UWM and UW System Policies, and any applicable state and federal laws governing activities which are independent of IRB review/approval (e.g., FERPA, Radiation Safety, UWM Data Security, UW System policy on Prizes, Awards and Gifts, state gambling laws, etc.) When conducting research at institutions outside of UWM, be sure to obtain permission and/or approval as required by their policies.

APPENDIX E



Jessica Rice
IRB Administrator
Institutional Review Board
Engelmann 270
P O Box 413
Milwaukee, WI 53201-0413
(414) 229-3182 phone
(414) 229-6729 fax

Modification/Amendment - IRB Expedited Approval

Date: June 26, 2014

<http://www.irb.uwm.edu>
ricej@uwm.edu

To: Leah Rouse, PhD
Dept. Educational Psychology

CC: Holly Wohlers

IRB#: 14 173

Title: Exploring Community Reentry with Recently Released American Indian/Alaska Native Persons

After review of your research protocol by the University of Wisconsin – Milwaukee Institutional Review Board, your protocol has received modification/amendment approval for:

- Collection of data from CCAP- an online, publically available court system database

IRB approval will expire on March 2, 2015. If you plan to continue any research related activities (e.g., enrollment of subjects, study interventions, data analysis, etc.) past the date of IRB expiration, a Continuation for IRB Approval must be filed by the submission deadline. If the study is closed or completed before the IRB expiration date, please notify the IRB by completing and submitting the Continuing Review form found on the IRB website.

Unless specifically where the change is necessary to eliminate apparent immediate hazards to the subjects any proposed changes to the protocol must be reviewed by the Institutional Review Board before implementation.

Please note that it is the principal investigator's responsibility to adhere to the policies and guidelines set forth by the University of Wisconsin – Milwaukee and its Institutional Review Board. It is the principal investigator's responsibility to maintain proper documentation of its records and promptly report to the Institutional Review Board any adverse events which require reporting.

Contact the IRB office if you have any further questions. Thank you for your cooperation and best wishes for a successful project.

Respectfully,

Jessica Rice
IRB Administrator

APPENDIX F



Melissa Spadanuda
IRB Manager
Institutional Review Board
Engelmann 270
P O Box 413
Milwaukee, WI 53201-0413
(414) 229-3173 phone
(414) 229-6729 fax

Continuing Review - Notice of IRB Expedited Approval

<http://www.nb.uwm.edu>
spadanud@uwm.edu

Date: February 26, 2015

To: Leah Rouse, PhD
Dept: Educational Psychology

Cc: Holly Wohleis

IRB#: 14 173

Title: Exploring Community Reentry with Recently Released American Indian/Alaska Native Persons

After review of your research protocol by the University of Wisconsin -- Milwaukee Institutional Review Board, your protocol has received continuing approval as minimal risk Expedited under category 6 and 7 as governed by 45 CFR 46.110.

This protocol has been approved on February 26, 2015 for one year. IRB approval will expire on February 25, 2016. If you plan to continue any research related activities (e.g., enrollment of subjects, study interventions, data analysis, etc.) past the date of IRB expiration, a Continuation for IRB Approval must be filed by the submission deadline. If the study is closed or completed before the IRB expiration date, please notify the IRB by completing and submitting the Continuing Review form found in IRBManager.

Any proposed changes to the protocol must be reviewed by the IRB before implementation, unless the change is specifically necessary to eliminate apparent immediate hazards to the subjects. The principal investigator is responsible for adhering to the policies and guidelines set forth by the UWM IRB, maintaining proper documentation of study records, and promptly reporting to the IRB any adverse events which require reporting. The Principal Investigator is also responsible for ensuring that all study staff receive appropriate training in the ethical guidelines of conducting human subjects research.

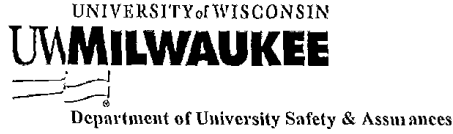
As Principal Investigator, it is also your responsibility to adhere to UWM and UW System Policies, and any applicable state and federal laws governing activities which are independent of IRB review/approval (e.g., FERPA, Radiation Safety, UWM Data Security, UW System policy on Prizes, Awards and Gifts, state gambling laws, etc.). When conducting research at institutions outside of UWM, be sure to obtain permission and/or approval as required by their policies.

Contact the IRB office if you have any further questions. Thank you for your cooperation and best wishes for a successful project.

Respectfully,

Melissa C. Spadanuda
IRB Manager

APPENDIX G



Jessica Rice
IRB Administrator
Institutional Review Board
Engelmann 270
P. O. Box 413
Milwaukee, WI 53201-0413
(414) 229-3182 phone
(414) 229-6729 fax

Modification/Amendment - IRB Expedited Approval

Date April 20, 2015

<http://www.irb.uwm.edu>
ricej@uwm.edu

To Leah Rouse, PhD
Dept. Educational Psychology

CC Holly Wohlers

IRB# 14 173

Title Exploring Community Reentry with Recently Released American Indian/Alaska Native Persons

After review of your research protocol by the University of Wisconsin – Milwaukee Institutional Review Board, your protocol has received modification/amendment approval for:

- Allow agency partner access to deidentified interview transcripts

IRB approval will expire on February 25, 2016. If you plan to continue any research related activities (e.g., enrollment of subjects, study interventions, data analysis, etc.) past the date of IRB expiration, a Continuation for IRB Approval must be filed by the submission deadline. If the study is closed or completed before the IRB expiration date, please notify the IRB by completing and submitting the Continuing Review form found on the IRB website.

Unless specifically where the change is necessary to eliminate apparent immediate hazards to the subjects any proposed changes to the protocol must be reviewed by the Institutional Review Board before implementation.

Please note that it is the principal investigator's responsibility to adhere to the policies and guidelines set forth by the University of Wisconsin – Milwaukee and its Institutional Review Board. It is the principal investigator's responsibility to maintain proper documentation of its records and promptly report to the Institutional Review Board any adverse events which require reporting.

Contact the IRB office if you have any further questions. Thank you for your cooperation and best wishes for a successful project.

Respectfully,

Jessica Rice
IRB Administrator

CURRICULUM VITAE

Holly Wohlers

Education

- 2008-present **University of Wisconsin Milwaukee** Milwaukee, WI
- Doctoral Candidate in Counseling Psychology, APA Accredited
 - Dissertation: Exploring Community Reentry with Recently Released from Incarceration American Indian/Alaska Native Persons, December, 2015
 - Earned Master of Science in Educational Psychology 05/10
- 2008 **University of Wisconsin Oshkosh** Oshkosh, WI
- Bachelor of Science in Psychology
- 2004 **University of Wisconsin Fox Valley** Menasha, WI
- Associate of Arts and Science in General Studies

Work Experience

Psychological Associate

September 2015-present **Wisconsin Department of Corrections**

- Services provided at Oshkosh Correctional Institution
- Sex Offender Treatment Provider
- Prepare brief case notes and reports
- Provide recommendations to jail security and medical staff

Qualified Mental Health Professional

August 2013-August 2014 **Advanced Correctional HealthCare**

- Services provided at Fond Du Lac County Jail
- Crisis assessment including assessment of self-harm and/or suicide and potential for violence
- Prepare brief case notes and case conceptualizations
- Provide recommendations to jail security and medical staff

Graduate Project Assistant

July 2013-July 2014 **University of Wisconsin Milwaukee**, Milwaukee, WI

- Provide assistance to students in resolving complaints or difficulties involving University policies, procedures and/or personnel.
- Assist Dean of Students Office to develop publications and plans for outreach
- Participate and Assist with assessment initiatives

Mental Health Coordinator

August 2011-April 2013 **Kenosha County Detention Facilities**, Kenosha, WI

- Schedule clients with mental health providers
- Provide individual psychotherapy
- Crisis assessment including assessment of self-harm and/or suicide and potential for violence
- Prepare brief case notes and case conceptualizations
- Provide recommendations to jail security and medical staff

Student Practicum Coordinator

September 2010-June 2013 **University of Wisconsin Milwaukee**, Milwaukee, WI

- Maintain Ph.D. and Master's student websites
- Facilitate student practicum meetings
- Consult with local agencies, faculty and students
- Maintain practicum paperwork for Ph.D. and Master's students

Sales Administration/Customer Support

January 2004-August 2011 **Alta Resources**, Neenah, WI

- Utilize client software for order entry and order records
- Create spreadsheets and for account managers and clients
- Maintain records accurately
- Consult with customers and clients by email and over the phone
- Work independently from home (08/09-08/11)

Counseling/Advocacy Experience

Doctoral Intern

September 2014-September 2015 **Federal Bureau of Prisons**, Los Angeles, CA

Supervisor: Dr. Rebecca Delgado

- General Population rotation
- Forensics Rotation
- Mental Health Rotation
- Completion September 4, 2015

Doctoral Practicum Student

September 2013-November 2013 **Aurora Psychiatric Hospital**, Milwaukee, WI

Supervisor: Dr. Munther Barakat

- Child and Adolescent Day Treatment Unit
- Administer psychological assessments (including WISC-IV, CPT-II, MACI, MMPI-A)
- Prepare psychological reports

Doctoral Practicum Student

September 2012-May 2013 **Racine Correctional Institution**, Sturtevant, WI

Supervisor: Dr. Keyona Jarrett

- Administer psychological assessments (including WAIS-IV, WRAT, WMS, Rorschach, TAT, CAARS, TOVA, STAXI)
- Prepare psychological reports
- Provide individual psychotherapy, provide case notes

Doctoral Practicum Student

September 2011-May 2012 **Marquette University Counseling Center**, Milwaukee, WI

Supervisor: Dr. Joan Ravanelli-Miller

- Provide individual and group psychotherapy
- Prepare case notes from initial assessment to termination
- Develop case conceptualizations and treatment plans
- Administer BASICS assessments and feedback

Doctoral Practicum Student

September 2010-May 2011 **Kenosha County Detention Facilities**, Kenosha, WI

Supervisor: Dr. Melissa Caldwell

- Provide individual and group psychotherapy
- Crisis assessment including assessment of self-harm and/or suicide and potential for violence
- Prepare brief case notes and case conceptualizations
- Provide recommendations to jail security and medical staff

Master's Practicum Student

September 2009-May 2010 **Spotted Eagle High School**, Milwaukee, WI

Supervisors: Dr. Leah Arndt and Carrie McGhee

- Develop therapeutic alliances with a variety of clients of various backgrounds, ages and issues
- Understand and integrate the APA code of ethics
- Professional identity formation

Certifications/Trainings

2014 **Licensed Professional Counselor**

- State of Wisconsin, granted May 8, 2014
- License Number 5348-125

2012 **Rorschach Training Program-Beginner Level (35 hours)**

- Training program equivalent to one semester of graduate level training in the Rorschach Comprehensive System
- Explain the purpose of a standardized administration procedure and demonstrate proficiency
- Demonstrate skills of scoring, coding, and interpretation of case protocols

2011 **BASICS Brief Alcohol Screen & Intervention in College Students (16 hours)**

- Understand and implement principles of motivational interviewing
- Aimed to ameliorate hazardous and harmful drinking
- Conduct assessment and feedback to students with negative consequences as a result of alcohol consumption

2011 **Community Based Participatory Research for Health and Indigenous Knowledge**

- Week long summer institute held at the University of New Mexico
- Combined the theory and practice of CBPR and indigenous knowledge and methodologies through study of the literature, case studies, presentations by community-academic partners, and self-reflection.

2010 **Professional Counselor Training License**

- State of Wisconsin granted December 23, 2010. No. 1003-226
- 3000 hours towards Professional Counselor Licensure

2010 **Trauma Counseling Certificate of Completion (84 Hours)**

- University of Wisconsin-Milwaukee Fall 2009 and Spring 2010
- Completed coursework that provided an understanding of clients that experience Post Traumatic Stress Disorder (PTSD) and their various reactions.
- Learned diagnosis, assessment instruments, techniques, and interventions used with client that experience acute and chronic trauma.

2009 **Group Facilitator Certificate (12 Hours)**

- Completed a group facilitator training through Aurora Hospitals
- Emphasis on the group process verses content, rounds, trust building and cohesion, targeting feelings and creating a deeper meaning and experience for group member's conflict and group behavioral management, and meaningful endings.

Teaching Experience

2012 **Trauma Counseling I**

- Co-teacher with faculty leader Dr. Leah Arndt and fellow student
- Help to facilitate discussion (class is online) and answer questions

2011 **Multicultural Mental Health Guidelines for Working with First Nations Persons**

- Co-teacher with faculty leader Dr. Leah Arndt and fellow student
- Help to facilitate discussion (class is online) and answer questions
Generate quiz questions based on readings

Research Experience

2013 **Interrupting the Conspiracy of Silence: The Experience of Hmong Women in the United States**

- Assisted with data analysis on the dissertation project for Ia Xiong (main researcher)
- Extracting themes from the interviews, which were conducted by main researcher

2012 Effects of Homophobia on LGBT identified adolescents

- Using the Process of Forgiveness as a Therapeutic Intervention with Gay and Lesbian Adolescents Affected by Homophobia
- Co-facilitator with Mark Charles
- Milwaukee LGBT Resource Center

2009-present Police Suicide Prevention Project

- Member of UWM research team with faculty leader Dr. Leah Arndt
- Ability to demonstrate ethical behavior in research and training (HIPAA training for researchers completed 8/2009)
- Time management skills demonstrated by scheduling team meetings and mandatory trainings
- Qualitative research training completed
- Community Based Participatory Research

2007 Comparison of Rape Myth Acceptance Scores Between Brazilian and United States Students

- This study examined the rape myth acceptance scores of one hundred thirteen Brazilian and United States participants. The purpose was to test whether there was a similarity between the scores based on participant's gender and cultural background.
- UW Oshkosh Department of Psychology study abroad trip to Salvador, Brazil in cooperation with the Cultural Association of Brazil and the United States (ACBEU).

2007 Attitudes Regarding Sexual Assault and Perception of Blame Based on Appearance

- This study examined rape myth acceptance and dress for perception of blame.
- Fifty-six participants were tested using two 2 X 4 (Rape Myth X Dress) completely randomized factorial analyses of variance.

Conference Presentations/Publications

Rouse, L., Frey, R., Lopez, M., Wohlers, H., Xiong, I., Llewellyn, K., Lucci, S., & Wester, S. (2015, March). Law Enforcement Suicide: Discerning Etiology through Psychological Autopsy. *Police Quarterly*, 18(1), 79-108.

Hunt, J., Aloma, A., Lira, E., Wohlers, H., Lopez, M., & Sapp, M. (Fall 2013). Attitudes Towards Patients with a Mental Illness: A Comparative Analysis of Stigma in Counseling

- Students and Nursing Home Care Providers. *The Wisconsin Counseling Journal*, 27, 37-51.
- Wohlers, H., Rouse Arndt, L., Llewellyn, K., Pinero, S., Lopez, M., Frey, R.A., Xiong, I., Hodges, R., & Wester, S. R. (2013, August). *Utilization of Peer Support Services in Law Enforcement Population*. Poster presented at the 121st annual Convention of American Psychological Association, Honolulu, HI.
- Lopez, M., Rouse Arndt, L., Pinero, S., Wohlers, H., Frey, R.A., Llewellyn, K., Xiong, I., Hodges, R., & Wester, S. R. (2013, August). *Alternative Avenues for Help-seeking Utilized in a Law Enforcement Sample*. Poster presented at the 121st annual Convention of American Psychological Association, Honolulu, HI.
- Llewellyn, K., Frey, R.A., Rouse Arndt, L., Pinero, S., Wohlers, H., Lopez, M., Xiong, I., Hodges, R., & Wester, S. R. (2013, August). *Life Review in Law Enforcement Suicide: Proposed Suicide Autopsy Protocol for Law Enforcement*. Poster presented at the 121st annual Convention of American Psychological Association, Honolulu, HI.
- Frey, R.A., Lopez, M., Rouse Arndt, L., Llewellyn, K., Pinero, S., Wohlers, H., Xiong, I., Hodges, R., & Wester, S. R. (2013, August). *Male Gender Role: Reporting Mental Health Concerns in Fellow Law Enforcement Officers*. Poster presented at the 121st annual Convention of American Psychological Association, Honolulu, HI.
- Rouse Arndt, L., Wohlers, H., Lopez, M., Frey, R.A., Llewellyn, K., Pinero, S., Xiong, I., & Wester, S. R. (2013, May). *Addressing suicide in the law enforcement agency: Recommendations for best practices*. Poster presented at the American Psychological Association Work, Stress, and Health 2013 Conference, Los Angeles, CA.
- Hunt, J., Alomá, A., Lira, E., Wohlers, H., Lopez, & M., Sapp, M. (2013, February). *Attitudes towards patients with a mental illness: A comparative analysis of counseling students and nursing home care providers*. Poster presented at the 2013 Wisconsin Psychological Association Annual Conference, Madison, WI.
- Nilsson, J., Wang, L-F., & Wohlers, H. (2012, August). *Globalization counseling psychology: Special task group report from 22 countries*. Symposium presented at the 120th annual Convention of American Psychological Association, Orlando, FL.
- Rouse Arndt, L. M., Wang, Y.F., Dingman, S., Tsunge, M., Wohlers, H. (2012, August). *Disaster Relief: Developing an International Resource for Mental Health Responders*. Symposium presented at the 120th Convention of the American Psychological Association, Orlando, FL.

Xiong, I., Rouse Arndt, L. M., Schmitt, N., & Wohlers, H. (2011, August). *CBPR: The law enforcement agency as community partner in mental health research*. Poster presented at the 119th annual Convention of American Psychological Association, Washington, D.C.

Schmitt, N., Rouse Arndt, L. M., Wohlers, H., & Xiong, I. (2011, August). *Undoing Biases: The qualitative research team as training environment*. Poster presented at the 119th annual Convention of the American Psychological Association, Washington, D.C.

Wohlers, H., Rouse Arndt, L. M., Xiong, I., & Schmitt, N. (2011, August). *Emerging Issues in Law Enforcement Suicide: Caring for Peacetime Warriors*. Poster presented at the 119th annual Convention of American Psychological Association, Washington, D.C.

Freund, D. & Wohlers, H. (2010, August). *Eye Movement Desensitization and Reprocessing with Survivors of Sexual Assault*. Poster presented at the 118th annual Convention of American Psychological Association, San Diego, CA.

Activities and Awards

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| 2013 | The American Psychological Association of Graduate Students (APAGS) Excellence in State Leadership Award |
| 2013 | Milwaukee Area Psychological Association (MAPA) 2013 Doctoral Student Professionalism Award |
| 2012-2013 | WI State Advocacy Coordinator APAGS |
| 2012 | President of the UW-Milwaukee Counseling Psychology Student Association |
| 2012 | National Psychologist Trainee Register scholarship |
| 2012 | Inspire by Example Award Recipient-Volunteer Center of Greater Milwaukee |
| 2011-2012 | Student representative for APAGS and UWM Counseling Psychology program |
| 2010-2012 | Volunteer camp counselor at Camp Onaway through Boy's and Girl's Brigade of the Fox Valley |
| 2010-2011 | Vice-President of the Counseling Psychology Student Association (CPSA) |
| 2009-2013 | Volunteer advocate at Aurora Sinai in the Sexual Assault Treatment Center |
| 2008-2010 | Treasurer of the UW-Milwaukee Counseling Student Organization |

Professional Affiliations

American Psychological Association Graduate Student (APAGS) Member

Member of American Psychological Association (APA) Division 17-Counseling Psychology

Member of APA Division 31- Division of State, Provincial and Territorial Psychological

Member of APA Division 35- Society for the Psychology of Women

Member of APA Division 56- Division of Trauma Psychology