

UNHEARD VOICES: EXPLORING PARTICIPATORY ACTION RESEARCH
AND PROFESSIONAL IDENTITY IN EMERGING OCCUPATIONAL
THERAPY PRACTICE WITH MEN TRANSITIONING TO THE
COMMUNITY POST-INCARCERATION

By

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TITLE: Unheard voices: Exploring participatory action research and professional identity in emerging occupational therapy practice with men transitioning to the community post-incarceration

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Lay Abstract

This master's thesis focuses on role-emerging occupational therapy (OT) practice with men with a criminal record. As a registered occupational therapist working with co-researchers with lived experience of incarceration, we completed a research project using photography to create and share narratives about community reintegration. The men generated a research question, collected data (photographs), completed data analysis as a group, disseminated knowledge and contributed to the publishing process as co-authors. A shared metaphor increased understanding about socio-political factors that impact community integration for men with a criminal record. Because emerging settings have been primarily explored as an educational tool for OT students, the role of evidence-based practice, advocacy and the potential of emerging OT practice with criminalized men adds a critical narrative from the perspective of a registered occupational therapist. Autoethnography is used as a method of research and professional development. Therefore, this thesis adds to the limited information about emerging OT practice with men transitioning to the community post-incarceration, tensions in emerging practice, community integration from the perspective of men with lived experience of incarceration and provides preliminary insights into the concepts of anti-oppressive OT practice.

Abstract

There is a call for occupational therapists to extend their practice from correctional institutions to community settings with people who have been incarcerated; an emerging area of occupational therapy (OT) practice. However, with no published studies from the perspective of therapists in emerging settings, understanding the nature of emerging OT practice with people who have been incarcerated becomes problematic. Limited information about community integration makes it difficult to fill practice gaps and adhere to principles of evidence-based practice (EBP). Simultaneously, men with a criminal record experience stigma and exclusion from participation in everyday life extending well-beyond the completion of their sentence. Often denied a voice by people who control the media, correctional policies or political discussion about crime in the community, overcoming stereotypes of deviant, violent or aggressive criminals is difficult. The results of a participatory action research (PAR) project completed by men with a criminal record and a critical, first-person account about emerging OT practice from the perspective of a registered occupational therapist are presented.

Through Photovoice, co-researchers collected and analyzed photographs during group sessions that were audio recorded, transcribed, analyzed and summarized by the primary author. Summaries contributed to critical dialogue

with the co-researchers throughout the collection, analysis and, writing stages. ‘The cards you are dealt’ emerged as a metaphor depicting everyday life as a strategic game played with cards specific to a person’s social location. Co-researchers shared their individual and collective narratives through various knowledge dissemination methods. Documenting narratives from the perspective of men with a criminal record counteracts status quo understandings of community re-entry, creating space for marginalized populations to share stories that might otherwise be lost.

Autoethnography, a post-modern, interpretive approach to research explores the meaning of emerging OT practice with criminalized men. Data were collected through reflective journaling and clinical process notes that upon review, guided systematic reflections required to write and re-write an analytical narrative of key experiences. Role-emerging placements were found to influence the chosen emerging setting. Preliminary insights about the role of evidence-based practice and advocacy work in supporting emerging OT practice is presented. Where occupation-focused research and regulatory body support remains limited, autoethnography contributes to professional development and the identification of knowledge gaps.

Together, this thesis contributes to knowledge about: (1) emerging OT practice with men transitioning to the community post-incarceration; (2) daily life/community integration from the perspective of criminalized men in the

community; (3) tensions in emerging OT practice; and (4) insights about the nature of anti-oppressive OT practice.

Acknowledgements

This acknowledgement section is dedicated to those who, without their presence, this thesis would not have been possible. I would like to extend a sincere thank you to Dr. Lori Letts, my supervisor for her patience, wisdom, ability to help me keep my goals manageable and unbelievably quick turn around times for proof-reading. Feedback and expertise from my supervisory committee, Dr. Moss Norman, Dr. Rebecca Gewurtz and Lorie Shimmell contributed to various components of this work to help me pull together components of masculinity, poverty and emerging occupational therapy practice respectively. Together, my committee created space for me to explore my own interests, pushing my development through thoughtful questions and discussions. A thank you to the external examiner at my defense, Lynn Cockburn who volunteered their time, knowledge and expertise to increasing the quality of this work.

Key learning about the principles, ethics and moral philosophies of community-based research (CBR) are credited to the teachings of Dr. Saara Greene and the multiple guests in her classroom. Their passion for critical approaches to the practices and processes of CBR was infectious and propelled me to engage in anti-oppressive research methodologies.

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Finally, and without delay, this work would not have been possible with the contributions, hard work and dedication from the co-researchers. I am honoured to have gained their respect and remain privileged to have had the opportunity to complete community projects with such honest and talented colleagues.

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Acronyms and Abbreviations

with their appropriate definitions; must be numbered in lower case Roman numerals

- i. ACOTUP Association of Canadian Occupational Therapy University Programs
- ii. AE Autoethnography
- iii. AOTA American Occupational Therapy Association
- iv. CAOT Canadian Association of Occupational Therapists
- v. CBR Community-Based Research
- vi. CIHI Canadian Institute for Health Information
- vii. COTO College of Occupational Therapists of Ontario
- viii. CSC Correctional Services of Canada
- ix. EBP Evidence-based practice
- x. JHS John Howard Society
- xi. LGBTQ+ Lesbian, Gay, Bi-Sexual, Trans, Queer + communities
- xii. LHIN Local Health Integration Network
- xiii. MCSCS Ministry of Community Safety and Correctional Services
- xiv. OHIP Ontario Health Insurance Plan
- xv. OSOT Ontario Society of Occupational Therapists
- xvi. OT Occupational Therapy

- xvii. PAR Participatory action research
- xviii. SHOWED Seen, Happening, Our life, Why, Educate others, Do about it
- xix. VOICE Voicing Our Independent and Collective Experience

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Declaration of Academic Achievement

As a Master's student, Stephanie Zubriski received guidance and ongoing feedback from the supervisory committee to conduct a participatory action research project as the Primary Student Investigator and to draft and complete all content of this thesis. Contributors to chapters two and three are listed as co-authors. Co-authors for chapter two include the members of my supervisory committee in addition to the four core co-researchers from the Photovoice project. The co-researchers were consulted regularly during the writing process for input that helped shape the evolution of drafts in addition to feedback from the supervisory committee. Co-authors from the third chapter include the supervisory committee. Their role was critical in helping the primary author reflect critically on the content, probing what was included in the paper and why to help with reaching quality criteria. This thesis is in partial fulfillment of the requirements for the degree Master of Science, Rehabilitation Science.

Chapter 1: Introduction

Reflexive Orientation

When I started this thesis, I was working as an occupational therapist in Ontario at a transitional housing facility for men transitioning to the community post-incarceration. As a new graduate in an emerging practice setting, I found myself questioning everything I was doing, more than I had done during my academic placements. I was without a mentor and the medical model that guided my fieldwork learning was so much at odds with my new job that I started to question the applicability of any learning that occurred as a student at a hospital to emerging practice contexts. I constantly referred to the Profile of Occupational Therapy in Canada (Canadian Association of Occupational Therapists [CAOT], 2012), Enabling Occupation II (Townsend & Polatajko, 2013) and the College of Occupational Therapists of Ontario's (COTO) seemingly endless guidelines and position statements to situate what I was doing within frameworks that had also guided my education. While at times tedious, I would encourage all professionals to intimately know these guidelines that they have pledged to follow. What troubles me is that when I was a student in a hospital, I wasn't propelled to teem through these documents with the same fervour. Did I know them better just because I happened to be in a hospital setting? Absolutely not. Were there structures in place to make me feel like I did? Absolutely.

My ability to implement evidence-based practice at the transitional housing facility was limited by the sparse, almost non-existent research evidence available to apply to the context in which I was working. I found myself wondering how men with a criminal record would define and conceptualize their own pathways into the community and was struggling to understand how to work with men institutionalized from experiences of incarceration. While I could connect the men with photo identification clinics, family doctors, substance use programs, food banks, employment services, social assistance, housing programs and other services in the community, encouragement to engage in social or leisure activities outside of the social circles that contributed to their incarceration was rarely taken up. The ‘tough-guy’ attitudes that I observed during groups held hidden caring messages, and limited sharing from the men during group meals was not reflected in individual sessions in which the men articulated their desires to have meaningful romantic relationships; experienced painful feelings when rejected by friends, family and community members; struggles with substance use without knowing what to do about it; and desires to climb out of poverty. These same meals provided space for camaraderie and social interaction that, at times, were filled with stories of what it’s like on ‘the inside’, glorifications of a past party lifestyle or criminal involvement and discussions about legal loopholes, while comic relief and gestures of empathy for men going through hard times were predominant at other meals.

As a type of research that necessitates critical dialogue about daily experiences, needs and desires for change (Wang & Burris, 1997), I saw Photovoice (PV) as an opportunity to create space for these men to connect in different ways while also focusing on potential directions for change in the future. In addition, PV brought with it the opportunity for the men to share their stories with academic and non-academic audiences in ways that push against the grain of positivist research methods, valuing different ways of knowing and giving legitimacy to their stories. In addition, writing about my experience facilitating this PV project could help work through some of the tensions I was feeling while also contributing to existing research evidence about emerging occupational therapy (OT) practice.

My desire to share my experience in an emerging area of OT practice facilitating an emancipatory group led me to autoethnography, an “autobiographical genre of writing and research that displays multiple layers of consciousness, connecting the personal to the cultural” (Ellis & Bochner, 2003, p. 209). This style of writing would permit me to focus on my story in relation to the men with whom I was working as a way to show the impact that the group had instead of only telling about it.

The remainder of this chapter presents background information to set the stage for the thesis work to follow. The context of OT practice in Canada in general and in emerging settings is briefly summarized prior to applying

evidence-based practice (EBP) to these contexts. An introduction to correctional facilities in Canada and the role of OT within them rationalizes why participatory action research is a good fit. The reasons for choosing autoethnography, a method of qualitative inquiry, to explore my own role as an occupational therapist in an emerging setting are outlined. This chapter concludes with a review of guiding theories and a summary of the purpose, research questions and an outline of this Master's thesis.

Background Information

Occupational Therapy

General practice context. OT is considered “as both an art and a science that has a focus of enabling engagement in occupation in order to promote health and well-being” (Townsend & Polatajko, 2012 as cited in CAOT, 2012, p. 1). Equal access to meaningful occupations, “groups of activities and tasks of everyday life, named, organized and given value and meaning by individuals and a culture” (Law, Steinwender, & Leclair, 1998, p. 83) are considered a human right. Therefore, the reality that some groups of people have unequal access becomes a domain of concern for occupational therapists (Whiteford & Wright-St. Clair, 2005).

In Ontario, the majority (80.6%) of occupational therapists are employed in publicly funded settings such as hospitals, rehabilitation facilities, residential care homes or schools; the remainder of the workforce is self-employed or

working in privately funded settings such as the insurance sector (10.6%), government, academia, manufacturing or an *unspecified* area (8.8%) (Canadian Institute for Health Information [CIHI], 2015; Government of Canada, 2017). Currently, OT services are not covered by the Ontario Health Insurance Plan (OHIP) if offered outside of a hospital or community healthcare services managed by Local Health Integration Networks (LHINs) (CIHI, 2011; Ontario Society of Occupational Therapists [OSOT], 2017; Rexe, Lammi, & von Zweck, 2013). The ability for occupational therapists to branch out from these publicly funded practice settings is further limited by a lack of research, practice guides, regulatory body support services and educational models intended for use outside of established healthcare institutions. In fact, policies, guidelines and position statements for practicing occupational therapists published by regulatory bodies and professional associations remain limited to outlining supervisory requirements for students completing role-emerging placements (CAOT & Association of Canadian Occupational Therapy University Programs [ACOTUP], 2012; College of Occupational Therapists of Ontario [COTO], 2011) or exclude references to emerging settings altogether (CAOT, 2012; 2015; OSOT, 2013; 2018)

In response to changing practice contexts and difficulty finding placements, the presence of role-emerging placements as a pedagogical tool in OT education is increasing (Clarke, 2012; Cooper & Raine, 2009; Holmes & Scaffa,

2009a; 2009b). Despite a number of authors having recognized the benefits of providing OT services in emerging community settings (Doll, 2010; Kronenberg, Algado, & Polland, 2005; Lauckner, Krupa, & Paterson, 2011; Lauckner, Pentland, & Paterson, 2006; Leclair, 2010; Marshall & Rosenberg, 2014; McColl, 1997; Roy et al., 2017; Thew, Edwards, Baptiste, & Molineux, 2011; Whiteford & Wright-St Clair, 2005), accompanying literature and practice guidelines applicable for occupational therapists practicing in emerging settings are respectively limited or non-existent (Backman, 2005; CAOT, 2012; Ilott, 2004; Wilcock, 2001) leaving occupational therapists questioning if what they are doing can be considered best practice and limiting their ability to work with marginalized populations.

Emerging practice context. Emerging OT practice is easier to define in the context of fieldwork education because it is an actively sought and created opportunity by academic educators to support a student occupational therapist working in a setting where there is no on-site occupational therapist (Shimmell & Dix, 2014; Thew et al., 2011). From a pedagogical standpoint, qualitative research and expert opinion suggest that such placements contribute to a student's learning and professional identity, while advocating for the profession of OT (Bonello, 2001; Clarke, de Visser, Martin, & Sadlo 2016; Cooper and Raine, 2009; Fortune, Farnworth, & McKinstry, 2006; Friedland, Polatajko, & Gage, 2001). Although examples of occupational therapists working in emerging contexts exist (Thew et

al., 2011), corresponding survey data regarding populations served, guiding theories, models of practice and sources of funding is largely absent (CIHI, 2011), leading to ambiguity about the context of emerging OT practice in Canada.

A limited number of studies have been completed with occupational therapists in the USA working in emerging settings in an attempt to understand the nature, challenges and rewards of emerging OT practice (Holmes & Scaffa, 2009a) and key competencies required to work in emerging areas (Holmes & Scaffa, 2009b).

Nature of emerging practice. In 2009a, Holmes and Scaffa developed a survey with open and closed-ended questions that was administered to 700 American occupational therapists to answer the question: “what is the nature of emerging practice today and what are its challenges and rewards?” (p. 191). Five occupational therapists with expertise in emerging practice provided feedback on the form and content of the survey. Additional questions for participants who identified as working in an emerging setting were included with a total of 57 respondents who identified as such. The authors reported a low response rate (24.9%) that they considered adequate for analysis and reporting purposes (n=174). The approach to analysis was not outlined. In addition to demographics, results were presented quantitatively under two main themes.

The first theme was ‘the nature of emerging practice’, had 167 valid responses and included: potential settings, populations served, what the clinician

would do (services) and the rationale for emerging practice. While nine percent of respondents labeled emerging practice as re-emerging practice, settings where occupational therapists were “returning to [their] roots” (Holmes & Scaffa, 2009a, p. 195), some respondents felt a shift to re/emerging practice was premature given their current uncertainty about the role of occupational therapists in mainstream healthcare and potential losses that may incur if straying from the medical model. A common thread however, was that respondents felt there was a need for research evidence to support emerging practice settings in addition to OT values, models and theories. The second theme, ‘anticipated rewards and challenges’, had 163 valid responses and included rewards for the profession, clients and practitioners, while challenges were only thought to apply to the profession and practitioners. More specifically, respondents felt that benefits included an increased understanding and value for the profession among the public, increased access to services to underserved or neglected populations, space created local change, and non-monetary benefits associated with meaningful engagement in communities. Challenges included: lack of funding and personal financial concerns, little support from regulatory bodies and professional isolation, lack of published research, confusion about scope of practice and the time and effort required to develop their roles. While this study draws attention to what emerging practice, challenges and rewards in the USA might be, with a lack of information about the analysis process and the majority of participants working in established

areas of practice (67.3%), it is unclear to what extent this work contributes to other opinion pieces about emerging practice. For example, some of the perceived benefits and challenges were conflicting (a benefit of increased understanding of the profession among the public contradicts the lack of support from regulatory and funding bodies) suggesting a limited understanding about how barriers to emerging practice are encountered and overcome.

Key competencies. In another study, Holmes and Scaffa (2009b) formed a panel of 23 American occupational therapists practicing in emerging settings or roles to determine: (1) what competencies are required for emerging practice and (2) what strategies can support current and future practitioners to develop the required competencies. Some participants identified more than one job title however, the majority identified as faculty in post-secondary education (11) or as owning a private business (7) with the remaining eight as staff (5), supervisors (2) or case managers (1). The panel completed three rounds of online or paper survey questionnaires that, in line with the Delphi method, became more specific as the researchers synthesized and ranked panel responses based on qualitative and quantitative analyses of survey results. Initially, 104 competencies and 55 recommended strategies were identified in round one and were narrowed to 55 competencies and 36 strategies by round three. Competencies were arranged according to the American Occupational Therapy Association's (AOTA) five categories for continued competence (knowledge, critical reasoning, interpersonal

abilities, performance skills, ethical reasoning) (AOTA, 2010) with the addition of a ‘traits, qualities and characteristics’ category. Although the Delphi method allowed for ongoing member checking of synthesized results, the declining response rate from 95.8% in the first round to 65.2% in the third may have decreased the reliability, validity and generalizability of the results. Competency development strategies fell into the following four categories: OT education, professional development opportunities, general professional issues and professional organizations. While this study provides a large number of potential competencies and strategies that could inform educational and professional development initiatives, whether these results apply to marginalized populations or a Canadian context is not clear. For example, the majority of respondents worked in private businesses or post-secondary education suggesting limited direct service provision to marginalized populations among the panel members. However, this work draws attention to the need for a number of different stakeholders to be involved in identifying and defining key competencies and creating programs to help practitioners develop them. Finally, a specific role for individual occupational therapists was not identified, potentially portraying clinicians as recipients of education and training created by stakeholders that may or may not have consulted them.

Together, these two studies show that American occupational therapists have a broad understanding of the challenges, the benefits and the nature of

emerging practice while also recognizing a need for multiple stakeholders to collaborate in order that the profession expand into emerging settings. Discussions about whether “emerging practice” should be considered new or a resurgence of the profession’s philosophical roots of occupation-focused practice draws attention to the restrictions placed on what occupational therapists can do when working in settings that follow a medical model (Kielhofner, 2004 as cited in Thew et al., 2011). In addition, a need for further research and more information about emerging practice with marginalized populations remains while the differences between American and Canadian practice contexts may decrease the transferability of results from American studies. For example, working with people who have been incarcerated was not included in either article yet has been identified as a target population for occupational therapists in Canada.

In Canada, the field of community development provides some examples of occupational therapists working in mainstream settings that have managed to build on what they do in a way that *enhances* their role, through social interventions (Lauckner et al., 2007; 2011). However, the variety of different settings outlined in studies of occupational therapists in emerging settings coupled with a lack of research outlining the reasons why an individual might choose to practice in an emerging setting creates further ambiguity about the definition and meaning of emerging OT practice in Canada.

For the purposes of this Master’s thesis, emerging OT practice is defined as areas of practice in which a registered occupational therapist is working and is practicing within the scope of OT as defined by local legislation, guidelines and theories; is practicing outside of an established healthcare institution; receives compensation from a source outside of the healthcare branch of the government; and is working in an area in which there may not be a large body of evidence supporting the role of OT, although there may be a call for such research.

Role of Evidence-Based Practice

Evidence-based practice (EBP) is an approach to healthcare delivery that incorporates clinician expertise, client needs and the best available research evidence to answer clinical questions regarding individual therapy, diagnosis, prognosis or aetiology/risk factors (Greenhalgh, Howick, & Maskrey, 2014). Systematic reviews, large-scale randomized controlled trials and other positivist research methods are placed at the top of the hierarchy as the *best* available evidence when examining effectiveness of interventions (The Centre for Clinical Effectiveness, 2009; McMaster University, 2017). Positivist research methods guided by the medical model produce interventions that treat client issues as “disease-like and caused by underlying biomedical and psychic conditions” that can be cured through doses (not unlike medication) of the right intervention (Miller & Strong, 2008, p. 610). Medically-informed approaches to therapy assume that environments can be controlled, people will follow what is prescribed

in therapy and that everyone with a specific condition is vested in outcomes targeted in the study. The existence of an evidence hierarchy creates dichotomies in terms of the types of research methodologies and approaches that are valued, contributing to fewer studies to guide practitioners whose questions may be best answered by research methods currently located at the bottom of the hierarchy. Therefore, as a client-centered profession expected to implement EBP, being guided by research that is positioned high on a positivist hierarchy may not be the most appropriate to answer the types of clinical questions pertinent to occupational therapists in emerging practice settings (Backman, 2005; Ilott, 2004; Kronenberg et al., 2005; Raegon, Bellin, & Boniface 2010; Whiteford & Wright-St Clair, 2005). In fact, the uncertainty of how EBP and current practice guidelines should be applied to emerging practice settings has been recognized (Clarke, 2012; Cooper & Raine, 2009; Holmes & Scaffa, 2009a; 2009b; Overton, Clark, & Thomas, 2009) leaving occupational therapists to develop guides for the evidence-based practice process applicable to their own profession (CAOT, 2009; OTSeeker, n.d.). Evidence-based OT focuses less on medical outcomes by taking a client-centered approach to enable “occupation based on client information and a critical review of relevant research, expert consensus and past experience” (CAOT, 2009, p. 3). This definition of evidence-based practice focuses more on engagement in tasks and activities that have meaning and value in everyday life. Therefore, research methods that involve community members in the

transformation of community issues into research questions may be of great value for occupational therapists in emerging practice areas with marginalized communities.

Correctional Facilities

A historical breakdown and extensive application of current practices of Canada's correctional system is beyond the scope of this chapter however, a presentation of key differences between federal and provincial systems provides rationale for the rest of this thesis. The length of time to which a person is sentenced determines whether they are incarcerated in a federal or a provincial facility. Individuals sentenced to 2 years plus a day serve time at the federal level and people sentenced to 2 years less a day serve their sentence provincially. Regardless of where someone serves his or her sentence, it is likely that time is spent remanded in custody: time spent behind bars after an arrest but prior to a trial. Charges have been laid but no final verdict has been determined by the courts.

Remand. More than half (60%) of adults held in correctional facilities in Canada are remanded at any given time, a number that has increased over the past decade despite declining rates of people charged being convicted (Statistics Canada, 2017). This trend suggests that despite an overall decline in people receiving a sentence, the absolute number of people detained remains similar due to rising numbers of remanded individuals. The length of time someone spends in

remand and whether he or she will have access to programs remains unpredictable (Department of Justice Canada, n.d.; Vivar, 2014), a practice that directly contradicts the government’s pledge to support community reintegration from the moment of contact with the criminal justice system to release (Sapers et al., 2017). The length of time spent in remand varies by province – from 4 to 29 days (reported medians) (Statistics Canada, 2017), long enough to miss a rent payment, lose out on income from work absences or be fired altogether after a prolonged period of no contact with an employer. Whether a person is returning to the community after being released from remand or from a sentence served, individuals are impacted by the lack of community programs, impacts which are amplified by unstable job markets, limited availability of affordable housing and long-term stigma that accompanies involvement with the criminal justice system (Bliss, 2015; Hass & Saxon, 2012; John Howard Society, O’Grady, & LaFleur, 2016). The commonly held perception that people are “innocent until proven guilty” is challenged in a system that locks people behind bars prior to having a fair trial (McKittrick, Barager, Rodrigues, & Henwood, 2017).

Models demonstrating pathways through Canada’s criminal justice system exist for federal and provincial systems (Correctional Services Canada [CSC], 2008; Criminal Procedure, n.d.; Manitoba Justice, n.d.) however, the criminal justice system in Canada is not easy to understand. To get a full picture of how it functions, multiple sources of information such as national and provincial

ombudsman reports, community advisory board reports, Statistics Canada and information from community organizations like the John Howard Society need to be cross-referenced making learning about the criminal justice system difficult. In addition, ethics applications to the Correctional Service of Canada (CSC) or Ontario's Ministry of Community Safety and Correctional Services (MCSCS) to conduct research binds internal and external investigators to privacy agreements allowing CSC and the MCSCS complete control over the type of knowledge that is produced or shared publicly (CSC, 2017; MCSCS, 2013) reducing opportunities to include varying points of view about Canadian correctional institutions. While a number of Canadian researchers have completed research with people who have lived experience of incarceration (Comack, 2008; Ricciardelli, 201; Weinrath, 2016), first-person accounts from the same individuals are not common and remain excluded from government sources. Due to variances between the judicial processes explained to the public and the lived experience of those who have spoken out (Bliss, 2015; McKittick et al., 2017; Vivar, 2014), including the voices of people directly impacted by these systems remains crucial to understand how the system impacts people's lives and informs directions for reform.

Masculinities. Environments characterized by aggression, violent assertiveness and performative displays of power are well documented in correctional institutions that follow a North American model (Cayley, 1998;

Dreisinger, 2016; Evans and Wallace, 2007; Lutze & Belle, 2005; Ricciardelli, 2011). When understanding penal institutions as gendered spaces, men who are incarcerated are required to take-up violence and aggression as a means for survival, tools to establish oneself among a hierarchy of masculinities in a space where competition to establish manhood is fierce (Bandyopadhyay, 2006; de Viggiani, 2012). Evans and Wallace (2008) analyzed prisoner narratives within a London prison and found that the ability to adopt a masculine identity where violence and aggression were not idealized was influenced by the presence of a loving and caring father figure during childhood. While potential influences of role models with a gender identity other than male was not discussed in this study, it did highlight how men growing up in societies that discourage the display of emotions, caring attitudes or non-violent methods of conflict resolution may be at an increased risk of incarceration (McFarlane, 2013; Newton, 1994). Men returning to the community post-incarceration often find themselves returning to environments where toxic displays of masculinity such as violence, gang activity or crime are common methods to establish social power, conditions that maintain toxic masculinities produced or enhanced by correctional systems (Lutze & Bell, 2005; McFarlane, 2013). This cycle challenges the ability for correctional facilities to prepare convicted men to live as law-abiding citizens and neglects the complex relationships between a person's social location and their experience of incarceration.

Occupational therapy in correctional facilities. The majority of research regarding OT and corrections and/or criminal justice focuses on the role of OT within federal prisons and forensic units (Baker & McKay, 2001; Chacksfield, 1997; Crist et al., 2005; Eggers, Munoz, Sciulli, & Crist, 2006; Molineaux & Whiteford, 1999; Whiteford, 1997) with limited research regarding the impacts of OT services currently being delivered to inmates, in what stage of the criminal justice system would OT have the most impact, or how OT might fit within provincial jails. Funding constraints for services outside of established institutions and a lack of evidence regarding the OT role in the community with people who have been incarcerated limits the ability for OTs to expand their practices from institutional settings (DeVos, Hauser, Kitchen, & Ring, 2013). With a call for OT research and practice to extend beyond correctional institutions into the community (Dieleman & Steggles, 2013), understanding the context of correctional facilities in Canada is important to identifying places where occupational therapists can make a difference.

Community-Based Research

Community-based research (CBR) is not a specific methodology but rather a set of guiding principles that outlines an overall way to conduct research involving participants at all stages of the research process and legitimizing different ways of knowing (Arieli, Friedman, & Agbaria, 2009; Etmanski, Hall, & Dawson., 2014; Israel, Schulz, Parker, & Becker, 1998; Snarch, 2004). The ability

for participants to define, create and complete research projects that are inherently meaningful and contribute to their quality of life is similar to the mandate of OT, a client-centered profession that enables people to engage in meaningful tasks and activities in their day-to-day lives (CAOT, 2012; Townsend & Polatajko; 2013). As a tool designed to empower marginalized populations, CBR has the potential to promote social change, impact the lives of participants more immediately than realist research, and restructure power relations inherent in the local versus expert knowledge binary (Arieli et al., 2009; Etmanski et al., 2014; Snarch, 2004). Implementing CBR principles supports the development of trust and long-term relationships, two elements that men with a criminal record have difficulty developing with historically authoritative service providers (Snarch, 2004). Reciprocal learning, critical inquiry and flexibility inherent in a CBR approach allow for diversity of methods that range from art-based to large-scale quantitative studies so that researchers and participants have the ability to choose the methods that best suit the research question (Canadian HIV women’s sexual and reproductive health cohort study, 2013; Gastaldo, Magalhães, Carrasco, & Davy, 2012).

Participatory Action Research. Participatory action research (PAR) is a type of research that falls under the CBR umbrella (Etmanski et al., 2014) and is a “a process of systematically examining issues from the perspectives and lived experiences of community members who are most affected by the issues under

examination” (Kronenberg et al., 2005, p. 442). As an approach to PAR, PV uses photography as a way for participants (aka: co-researchers) to share their messages through visual images. Equipping people with cameras provides them with tools to identify, document and share their points of view in ways that may lead to local social change (Catalani & Minkler, 2010; Hergenrather, Rhodes, Cown, Bardhoshi, & Pula, 2009; Wang & Burris, 1997). Documenting community phenomena from the vantage point of people who are typically being studied provides a different perspective of community strengths and issues that may not be accessible by a traditional researcher alone (Wang & Burris, 1997). Because PV archives knowledge that lies outside of the status quo, the process is inherently political and may present risks to men with a criminal record who are already under surveillance (Catalani & Minkler, 2010; Harley, 2012; Jarldorn, 2016; Wang & Burris, 1997). However, the opportunity for politically disenfranchised people to act as catalysts in enacting local social change becomes accessible with PV and minimizing risks through the application of CBR principles, ethics and critical dialogue are essential parts of the process (Etmanski et al., 2014; Jarldorn, 2016).

Autoethnography

Autoethnography (AE) requires the writer to engage in a writing process that shifts back and forth between the examination of one’s own standpoints and the broader socio-political context (Ellis & Bochner, 2003; Méndez, 2013) using

one's own experience to make familiar a specific culture to insiders and outsiders of that culture (Ellis, Adams, & Bochner, 2011). As a qualitative, post-modern approach, AE challenges claims of objectivity made in empirical research creating space for different ways of knowing while also bringing into question the researcher's own privileged position in society (Denshire, 2013; Wall, 2008). Because AE encourages reflexivity regarding relationships, power relations and learned ways of doing or being; the method has been used as a pedagogical tool for healthcare providers to help them develop and understand their personal and professional identities (Denshire, 2014; Hoppes, Hamilton, & Robertson, 2007; Neville-Jan, 2003). Therefore, an AE about the development of my own professional identity as an OT in an emerging practice setting will contribute to gaps in the literature about what it means to be an occupational therapist in an emerging practice setting.

Understanding how the researcher is connected to what is studied and vice versa provides an opportunity to explore reciprocal interactions that shape the identities of people involved in the research, while also extending understanding beyond the data themselves to acknowledge social and political factors that influence the experience (Adams, Holman-Jones, & Ellis, 2015; Bochner & Ellis, 2016). As a result, understanding how working in an emerging setting versus an established institution impacted my practice and therefore my professional

identity can provide insights into facilitators and barriers to occupational therapists expanding the profession into new and emerging settings.

Why autoethnography? AE capitalizes on the interpretive nature of stories as a way for authors to understand and share their world where “stories themselves are analytic ... [and] address the questions: ‘what is going on here and what does it mean?’” (Ellis, 2004, p. 184). Analysis focuses on the flow of a story, moral messages, the standpoint of the storyteller, what is achieved by the story, in addition to filling a research gap, such as inviting institutional or social change (Bochner & Ellis, 2016). AE in general is evaluated based on its contribution to knowledge, its ability to value and make known the personal and experiential components of a story, the use of the narrative to bring social taboos, power relations and oppressed experiences to the fore, and the evidence of an ethical approach that includes safeguarding the identity of participants while engaging the readers through accessible and meaningful text (Adams et al., 2015). By convention, AE avoids self-indulgence, blaming and shaming, heroics, victimizing self or other, self-righteousness and disengagement of the author from what they are representing (Adams et al., 2015).

In addition to these evaluation criteria, writing as a method of inquiry is a reflective process requiring continuous movement between data collection (field notes, journal logs, memories, etcetera) and analysis (meaning-making through story-telling). The ability for a work to (1) provide a substantive contribution to

understanding social life; (2) have aesthetic merit through creative processes, (3) show reflexivity through transparency of subjectivity; and (4) impact readers both emotionally and intellectually, positions the AE as a selection of memories and experiences to represent a particular standpoint (Richardson, 2000). AE, therefore, has the potential to illuminate the political nature of emerging OT practice while also acknowledging the need for social change to enable occupational engagement for people with a criminal record in an ethically responsible way.

Guiding Theories

Paulo Freire's *Pedagogy of the Oppressed* (1996) emphasizes the role of critical dialogue in the pursuit of social change while the intersections of Archive theory (Merewether, 2007) and Everyday Life theory (Highmore, 2002) illuminate how the organization and documentation of daily life serves to legitimize certain stories and ways of being over others.

Freire (1996) describes a reciprocal process between the oppressed and the oppressors (often those in power) in the pursuit for liberation and is the theoretical underpinning for PV (Wang & Burris, 1997). Freire's (1996) work outlines how "critical and liberating dialogue, which presupposes action, must be carried on with the oppressed at whatever the stage of their struggle for liberation" (p. 47). Therefore, even though action is required by people experiencing oppression, without critical dialogue involving the oppressors, meaningful action from both sides required for liberation is not possible. Establishing collaborative

partnerships becomes a necessity so that people experiencing oppression are given opportunities to speak for themselves and situations where “monologue, slogans and communiqués” (p. 47) replace reflective participation, leading to the oppressed being treated as “objects which must be saved” (p. 47) are avoided. Therefore, action is two-fold, requiring oppressors to join forces with the oppressed while respecting their own position of privilege and power. Therefore, partnerships are complex and require the navigation of “conscientização” (p. 49), a process of raising one’s own consciousness about their social location achieved through critical reflection and dialogue while maintaining momentum required for action. The Pedagogy of the Oppressed (Freire, 1996) helps understand the attitudes required to work alongside people with a criminal record, draws attention to the often untapped agency of people experiencing oppression and, the systemic structures that sustain relations of power, privilege and, inhibit liberation.

Everyday life is conceptualized as a daily experience that ambivalently fluctuates between senses of pleasure, value, delight, safety, bewilderment and oppression, boredom and monotonous routines that stifle creativity (Highmore, 2002). While the everyday is easily taken for granted, filled with routines and expectations (e.g. another day, another dollar), each day is not the same, thereby forming a dynamic space where we experience our existence (Highmore, 2002). Perceiving daily life as mundane can protect it from scrutiny, leaving the larger

socio-political forces that shape our day-to-day lives unquestioned, protected and in perpetual motion (Felski, 1999). By calling attention to daily life, it becomes more than a mere generality composed of bodily functions, and provides a window into varying levels of social realities and the forces that create them (Lefebvre, 2006). The dynamic, contextual and particularity of the day-to-day make the recording of *all* daily events an impossibility, therefore privileging certain social standpoints that have increased access to ways of storing, organizing and legitimizing their own realities of everyday life.

An archive is an event, a process and a way to produce, reproduce and confirm knowledge (Comay, 2002; Merewether, 2007). A political tool of self-reference, the archive provides a repository where, once things are documented, they become ‘facts’, truths that can be impossible to protest (Lalu, 2008). However, the rise of community museums, the internet and technology in general, has increased the ability for people outside of positions of power to create their own publicly accessible archives that challenge the status quo (Ghosh, 2006; Lalu, 2008; Residential School Research, Archive and Visitor Centre & The Shingwauk Project, 2008; Stoler, 2006). However, the ability for said archives to be taken-up as legitimate alternatives to established structures remains a barrier to challenging ‘expert’ narratives found in, for example, criminal records. Nonetheless, the documentation of counter-narratives to dominant ways of knowing may serve as a

catalyst to larger discussions while creating space for marginalized populations to share their stories that might otherwise be lost.

The intersections of Archive and Everyday Life Theory explain how systems of power that value the daily lives of some people above others are produced and maintained. As a method that requires photographing everyday life with the intent of engaging in critical dialogue about invisible structures that shape a person's experiences (Wang & Burris, 1997), PV calls attention to daily life as perceived by men with a criminal record. By understanding gender as a social construct envisioned and created through daily experiences (Connell, 1995; 2004; Connell & Messerschmidt, 2005), men who participate in the PV project are documenting experiences of community re-entry from the perspective of someone exposed to toxic masculinities while incarcerated that may have impacted the development of their own gender identities. By taking a post-modern approach, the work in this Master's thesis is from a viewpoint that social reality is dynamic and dependent on culture, values, beliefs and sociopolitical contexts (Moosa-Mitha, 2005). As a result, the ways that hierarchical archives of evidence-based practice govern and impact the everyday life are explored along with the identity of an OT in an emerging practice setting.

Chapter Summary

Emerging practice settings where OTs work with marginalized populations (e.g. men with a criminal record) have limited supporting research evidence. In

addition, the absence of first-hand accounts of emerging practice by occupational therapists means that practice guidelines and policies are created without considering how these may be applied to such settings. Therefore, facilitating PAR in such practice settings can promote social and occupational justice while contribute to existing gaps in the literature (Kronenberg et al., 2005; Whiteford & Wright-St Clair, 2005). The uniting theme of this thesis focuses on how anti-oppressive and post-modern approaches to OT research and practice can challenge dominant approaches (such as EBP), authentically value the voices of people who are oppressed, complement existing theories and approaches to practice and critically examine the role of occupational therapists in emerging settings. The following research questions and objectives guide the rest of this work:

Table 1.1 Research questions and objectives of this thesis

	Manuscript 1	Manuscript 2
Research Question	How do men with a criminal record define and conceptualize community integration?	What does it mean to practice as an occupational therapist in an emerging, community setting?
Objective 1	The construction of a shared critical consciousness about the concept of community integration among the participants	To critically reflect on the conduct of a PV group, a participatory action research (PAR) method, as a way of doing OT in the community.
Objective 2	Discussions about social location and other factors that contribute to the men’s understanding of community integration	To write an autoethnography that depicts the experience of an occupational therapist facilitating a PV group from her own standpoint using social constructionism.
Objective 3	Understanding how	--

	participants’ performance and constructions of masculinity shape their understandings of community integration	
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Thesis Outline

This thesis is composed of four chapters; the introduction, two manuscripts each with their own chapter and a final chapter designed to discuss concepts emerging from the PV project in a role-emerging setting (including the autoethnography), and to consider next steps.

Chapter 1 provides an overview and background information for this thesis. Theoretical frameworks, my own reflexive orientation, purpose, guiding research questions and rationale for the thesis are presented.

Chapter 2 presents a manuscript outlining the background information, purpose, methods, key findings and conclusions to a PV project co-facilitated with men with a criminal record. Narratives of how the men construct their day-to-day experiences informs discussion of key learning points, the role of social location, the participants’ constructions of masculinity and ethical and methodological tensions that impacted group process and outcomes.

Chapter 3 presents an autoethnography written in the first person. Critical reflections and rich descriptions of interactions between myself and the men throughout the PV project illuminate the benefits and challenges within an emerging practice context. Sharing alternative ways of “doing OT” challenges

dominant discourse about OT practice, while responding to a call for research that examines complexities and potential need for new competencies for occupational therapists in emerging practice settings.

Chapter 4 links the first three chapters through a discussion of key findings, outcomes and issues not presented in either manuscript. Relationships between the PV project and the autoethnography will be discussed within the context of emerging practice contexts and graduate work. This chapter concludes with final remarks and take-home messages that emphasize the impact of this work and potential next steps in research and practice.

MSc Thesis – Stephanie Zubriski; McMaster University – Rehabilitation Science

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Title: The Cards You Are Dealt: Defining Community Integration Post-Incarceration Through Photovoice

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**Chapter 2: The cards you are dealt: Defining community integration post-incarceration
through Photovoice**

Abstract

Men with a criminal record experience stigma and exclusion from participation in everyday life that extends beyond the completion of their sentence. Denied a voice, overcoming stereotypes of deviant, violent, or aggressive criminals is difficult. The results of a Participatory action research (PAR) project completed by men with a criminal record are presented. Through Photovoice, co-researchers collected and analyzed photographs during group sessions that were audio recorded, transcribed, analyzed and summarized by the primary author. Summaries contributed to critical dialogue with the co-researchers throughout the collection, analysis and, writing stages. ‘The cards you are dealt’ emerged as a metaphor depicting everyday life as a strategic game played with cards specific to a person’s social location. Co-researchers shared their individual and collective narratives through various knowledge dissemination methods. Documenting counter-narratives to status quo understandings of community re-entry creates space for marginalized populations to share stories that might otherwise be lost.

Key Words: criminalized men, participatory action research, social justice, occupational therapy, qualitative

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“Some people do crime on purpose to get caught to go to jail because ... I know guys that have done that, they –and maybe at the time it didn’t make sense that it would affect their life later, but at the time [what they did] made sense then”

Introduction

Actions intended to be a solution to an unprecedented situation can result in a criminal record, a black mark that grants society permission to label, discriminate and de-value people who have been through the criminal justice system. No matter what the reasons are for ‘doing’ crime, contributing social conditions hold little weight in the quest for a second chance. Sentiments like: ‘They had their chance. They made their choice. The damage is done.’ are prevalent. The purpose of this paper is to present the results of a Participatory Action Research (PAR) project completed by men with a criminal record. The narratives of their day-to-day lives and the transitions required for community re-entry bring attention to daily challenges resulting from larger social structures and the inherent strengths on which these men draw on to overcome them.

Reintegration, the process of returning to the community post-incarceration has been defined by Canada’s Federal Government as “all activity and programming [from conviction to release] conducted to prepare an offender to return safely to the community and live as a law-abiding citizen” (Thurber 1998, p. 14). Federal documents about reintegration best practices list community programs that target substance use, housing, employment and social factors such as family support as necessary for reintegration (Correctional Service of Canada [CSC] Review Panel 2007; Office of the Correctional Investigator 2014). However, with little to no financial support from governments being allocated to community programs, (John Howard Society [JHS] 2006; Sapers et al. 2017) community organizations and practitioners are encouraged to “build on

programmatic initiatives undertaken to date” (Griffiths et al. 2007, p. 1) without a framework for accountability or quality control. Despite sparse job markets, stigma against ‘criminals’ and the damaging effects of institutionalization (Hallett 2012), people returning to the community who cannot find employment, housing or reconnect with family are labelled as having “failed, upon their release, to integrate into the community as law-abiding citizens” (Griffiths et al. 2007, p. 2). Attitudes that shift responsibility to community programs and the individuals who have offended erases or obscures the reality that crime is often used as a survival tool, without questioning the effectiveness of existing systems and services to counteract recidivism (Bliss 2015; Davis et al. 2012). As a predominant variable to measure ‘successful’ community re-entry, recidivism informs offender programs that revolve around managing risks of re-offending, controlling the ‘offender’ and ignoring the heterogeneity that is community re-entry (Johns 2015; Visher and Travis 2003). For example, the challenges facing people transitioning to the community are numerous and variable yet programs fail to recognize and build on people’s strengths, making mass referrals to generic services when creating re-entry plans (Dupont 2008; JHS 2009; 2016). Additionally, the voices and perspectives of people with lived experience of the criminal justice system are not included in documents that guide Canadian corrections (CSC 2017; CSC Review Panel 2007; Office of the Correctional Investigator 2014; Sapers et al. 2017) further sidelining their needs, strengths and experiences in a paternalistic approach to ‘offender rehabilitation’.

Mainstream narratives, such as political platforms with a ‘tough on crime’ agenda, that portray men with a criminal record as deviant, dangerous, or manipulative may feed into beliefs that without surveillance or institutional programs, they are doomed to re-offend (Sapers et al. 2017). As a result, social conditions that contribute to crime (e.g. unemployment rates, unaffordable housing, substance abuse) persist, correctional institutions are positioned as

necessary tools in a war against crime while the reality that they “fail to deter wrongdoers and often make their inmates more desperate and dangerous than they were when committed” falls to the background (Cayley 1998, p. 30).

Environments characterized by aggression, violence and performative displays of power are well documented in correctional institutions that follow a North American model (Bandyopadhyay 2006; Cayley 1998; Comack 2008; Curtis 2014; Dreisinger 2016; Evans and Wallace 2007; McFarlane 2013; Ricciardelli 2014; Vivar 2014). These environments leave marginal space for men living inside correctional facilities to maintain a connection to who they are, what is important to them and relationships that can help them with their journeys upon release (Lutze and Bell 2005; Newton 1994). Arbitrary access to resources, being labeled as a lesser ‘Other’, being ridiculed for wanting to maintain contact with social support networks and being spoken to with disrespect contribute to the dehumanization of incarcerated men (Curtis 2014). Without access to opportunities that promote self-growth, penal sentences become time dedicated to developing an identity centered around the use of violence and aggression, fueled by a desire to oppose authority and establish oneself in a hierarchy of masculinities (Comack 2008; de Viggiani 2012; Evans and Wallace 2007; Lutze and Bell 2005; Newton 1994; Ricciardelli 2014). However, strategies to dominate and exert control over others, learned while incarcerated, may not be helpful in the transition to the community.

Implementing research methods that give men with a criminal record control over how their messages are communicated means they can contest mainstream understandings of the criminal justice system, crime, community re-entry and violent masculinities. This paper presents the findings from a PAR project exploring how men with a criminal record define and conceptualize community integration. This work was guided by three main objectives: (1) to

construct a shared critical consciousness about the concept of community integration; (2) to engage in critical discussions about how social location and other factors contribute to community integration; and (3) to consider how the men’s performance and constructions of masculinity contribute to community integration.

Theoretical Framework

Paulo Freire’s *Pedagogy of the Oppressed* (1996) emphasizes the role of critical dialogue in the pursuit of social change: a collaborative and reciprocal process between the oppressed (men with a criminal record) and the oppressors (often those in power, including service providers). Counter-narratives to mainstream understandings about daily life with a criminal record can increase awareness of oppressive factors and contribute to a desire for social change among the oppressed and the oppressors. Emancipatory action informs a pedagogy that values justice and equality while pushing back against established methods of control.

The theoretical intersections of Archive theory (Merewether 2007) and Everyday Life theory (Highmore 2002) illuminates how the organization and documentation of daily life serves to legitimize certain stories and ways of being over others. Archives are commonly understood as representations of history, told through collections of events, facts, memories, artifacts, documents, etcetera (Comay 2002; Ghosh 2006). Publicly accessible records such as those found in museums, galleries, libraries and other government buildings are monitored and curated by officials with the authority to do so (Stoler 2006). As a result, a number of marginalized voices in Canada are excluded from historical accounts, a fact demonstrated by the lack of representation of Indigenous stories from documented versions of residential schools (Residential School Research, Archive and Visitor Centre and The Shingwauk Project 2008). Similarly, lack of input from people who have been through the criminal justice system, excludes

lived experiences that help understand reasons for crime. Decision-making processes informing policies that impact the day-to-day lives of the masses exclude people who exist outside of privileged positions of power, leaving archives void of the voices of whom they are meant to govern (Ghosh 2006; Stoler 2006). Archive theory is one way to understand how oppressed people can make known narratives that push back against the “proverbial grain of globalisation” in a move towards more equitable and just representations of diverse human realities (Lalu 2008, p. 1), bringing the impact of political power structures on marginalized bodies to the fore.

Everyday life is often construed as repetitive and monotonous as represented through colloquialisms like: “the daily grind” or “another day another dollar.” Reducing everyday life to routine, bodily functions and activities required to sustain basic physiological needs, ignores the complex social, cultural, political and personal factors that inform the curation of meaningful daily experiences into narratives about who we are (Felski 1999; Highmore 2002; Lefebvre 2006). Therefore, by attending to the unseen of the day-to-day, a task outlined by Everyday Life theory, the men challenge systems and services to include more than what the elites of society deem as necessary to survive.

Social constructionism emphasizes how daily realities are constructed through social processes as a result of historically and culturally specific power struggles in the community (Seale 2012). In essence, an individual compiles an archive of daily experiences that speaks to who one is and where one stands in the world. Men, in general, have been “targeted as culprits of crime” in society, making it difficult for men who have been through the criminal justice system to escape labels of violent, aggressive, un-trustworthy or incapable during the process of community re-entry (Comack 2008, p. 14). An example rests in the domestic violence literature where risk assessment tools have traditionally been developed and tested only with men,

constructing them as problematic perpetrators of violence (Dutton and Kropp 2000; Hoyle 2007; Rabin et al. 2003; Riggs et al. 2000; Scott et al. 2015; Weisz et al. 2000). Over the past 20 years the assessment of risk for domestic violence has begun to include environmental factors such as poverty, the dynamics of the relationship and characteristics of both partners involved (Daniel and Milligan 2013; O’Campo et al. 2011). By focusing solely on physical violence, other contributing factors leading up to the altercation are ignored and current policies that lead to the immediate and uninvestigated arrest of men involved in domestic abuse situations perpetuate the stereotype of the dangerous and violent male aggressor (DeMaris et al. 2003; Helfrich et al. 2001). Therefore, social constructionism can help understand how the men in this study make sense of their experiences, an important tool when transitioning to the community post-incarceration.

Methodology

Photovoice (PV) provides people typically *researched* with tools to define research questions and to collect and analyze data that explore issues experienced in their day-to-day (Etmanski et al. 2014; Fine and Torre 2006; Grieb et al. 2013; Harley 2012; Jarldorn 2016; Sanon et al. 2014; Wang and Burris 1997; Wang et al. 2000). In addition, because PV prompts reflection, discussion and engagement in opportunities to take action towards local change participatory research may be seen as an approach to community re-entry.

The structure of PV projects vary based on the number of participants, length and frequency of sessions, total number of sessions, discussion aids, purpose or research question, type of analysis and intended outcomes (Catalini & Minkler 2010; Hergenrather et al 2009) while the main goals remain consistent providing individual communities with flexibility to modify projects to meet their needs.

Study Design

This project was approved by the Hamilton Integrated Research Ethics Board. To be eligible, co-researchers had to: identify as male, be between the ages of 18 and 64, have been incarcerated in a jail or prison, be willing to talk about community integration, be living in the city where this study took place, and be able to understand the consent form either in written or verbal format. Recruitment posters were distributed to case managers of Ontario's social assistance program (Ontario Works), food banks, shelters, employment centres, substance use programs and community programs with a mandate to work with men who have criminal records. A total of 8 men were recruited, provided written informed consent and attended the first PV session. The PV project was facilitated by the primary author in her role as the occupational therapist at a transitional housing facility for men with criminal records. Existing therapeutic relationships with the men at the facility may have increased recruitment as the men who took part in the group knew the researcher in her capacity as an occupational therapist. Four session outlines guided ten (10) weekly, two-hour meetings and were modified from a PV guide described elsewhere (Dahan et al. 2007) to include detail about the roles of the facilitator (Cole 2011). Each session outline promoted one of the three goals of PV (Figure 1) using a collaborative group process, an approach that differs from the majority of correctional programs aimed at teaching or intervening (Dupont 2008; Johns 2015; Ricciardelli 2014). According to Catalini & Minkler's (2010) review of peer-reviewed public health literature, "the quality of participation appeared to increase with project duration" (p. 438) as the co-researchers were able to expand beyond data collection. The primary author suggested lengths and frequencies of meetings that she felt would encourage transition through the PV process based on clinical experience regarding group facilitation and working with criminalized men. Because meeting for

10 weeks for 2 hours was not mandatory for participation, all group members provided input regarding the lengths and frequencies of meeting. A core group of 4 co-researchers with higher attendance levels (Table 1) contributed to the final display and the published book (McKittrick et al. 2017).

A hot meal was part of each session, bus tickets for travel to and from the group, and to take photographs during the week, were provided. Sessions were audio recorded and transcribed by the primary author. A student occupational therapist in a volunteer role co-facilitated the sessions with the primary author and engaged in weekly debriefs about group process. Funding to run the group was secured from the Hamilton Community Foundation by the primary author. Funding for knowledge dissemination efforts was secured collaboratively by the group as outlined below in Phase 3.

In recognition of the hierarchical nature of archives, including the men in the writing and publishing processes of this paper acknowledges them as co-authors, an additional level of legitimacy that materializes as a result of their academic contributions about different ways of knowing about the criminal justice system.

The Men

As people with lived experience of incarceration who also contributed to the data collection, analysis and publication processes, the men assumed a dual role of participant and co-researcher in this PAR project. Information about the men's criminal history such as the type or length of offense, where they served their time or how many times they had been incarcerated was not collected as these measures were not the focus of this study. The intent was to understand the social, political, cultural and institutional forces that shaped their experiences of transitioning to the community. Although criminal history, type and length of offense may have impacted their identities, the men acknowledged how lengths of time served holds less weight in

the community. Regardless of sentence length, all were labelled equally as ‘criminals’, an experience exemplified by the yes/no checkbox for ‘having a criminal record’ found on job or volunteer applications. All men in the group experienced concerns surrounding substance use (past or present) and reported that either a lack of permanent housing, employment, or both were directly related to their experiences of having a criminal record.

Financially, seven of the eight men were receiving social assistance and were unemployed. One was in receipt of Ontario’s Student Assistance Program and currently enrolled in higher education. Four of the co-researchers attended higher education, two had their high school diploma and two completed some high school. Two of the three men with homelessness status were living at the transitional housing facility where sessions occurred however all of the men lived in the same neighbourhood. Seven self-identified as white, one as Aboriginal. One co-researcher was married, one was in a new relationship, 6 were single and all 8 identified as heterosexual.

The Group Phases

The three main goals of PV guided the facilitation of three distinct yet interconnected phases of this project (Figure 1): to enable people’s recording and reflecting on their community’s strengths and concerns; promote engagement in critical dialogue; and involve stakeholders capable of enacting local social change (Wang and Burris 1997).

Phase 1: Enable people’s ability to record and reflect on their community’s strengths and concerns. Discussions about the research process, general introductions, ethics of taking photographs, how to use the camera, and determination of photo assignments developed a shared understanding of the purpose of PV and created a safe environment for critical dialogue. A shift among the co-researchers occurred when one of the men who had experience with PV shared his thought process behind a photograph. His well-articulated

example of the power behind a photograph ignited motivation and enthusiasm while contributing to a collaborative, peer-led pedagogy.

Phase 2: Promote critical dialogue. Efforts to develop a shared critical consciousness about social location, community integration and the role of masculinity continued. The VOICE acronym (Voicing our Independent and Collective Experiences) guided discussion about individual photographs that were collectively curated by the group as they established themes in a shared narrative. Each co-researcher added individual ‘nodes’ depicting his own lived experience. The SHOWED acronym guided the creation of captions by prompting the co-researchers to extend beyond what is seen in the photograph and explain what is really happening in relation to our [the men’s] lives, why things might be a certain way, how the image might educate others and what can I [the men] do about the situation in the photograph? (Dahan et al. 2007). Between sessions, the primary author would summarize her thematic analysis of transcriptions, using the summary to spur questions or reflections that stimulated and/or guided group discussion.

Phase 3: Involvement of stakeholders capable of enacting local social change.

Dissemination strategies were decided by the group and included the creation and presentation of a final display at a community art festival featured in a local newspaper (Pike 2017) and a presentation at a community neighbourhood action planning team meeting. The core group of men co-authored a community grant to fund the publication of a softcover book about their stories. The creation of this book required an additional 10 weekly meetings that took place at a local non-profit (McKittrick et al. 2017). Physical copies were distributed to community partners, local libraries and organizations mandated to support people with a criminal record.

Data Collection and Analysis

Data were collected and analyzed as part of an iterative group process adapted from Jackson's four steps (2008). First, the co-researchers 'prepared (raw) data' by taking photographs and creating captions. Audio recordings of sessions were transcribed by the primary author. Weekly process notes kept by her informed modifications to future sessions. Second, group discussions were facilitated by the primary author using VOICE and SHOWED to elicit context and meaning of photographs so the group could 'group data and identify themes'. The primary author shared summaries, key points and reflections she generated from weekly transcripts. These two steps occurred in tandem over the first 5 sessions. Third, codes and a central metaphor helped to 'make sense of the whole thing' and informed the creation of a concept map by using Velcro to attach photographs, captions and codes to a large piece of felt. The materials used meant the creation of the concept map was dynamic. This process spanned from the 5th to the 8th session. Fourth, 'telling the story' involved the finalization of the display (Figure 2), determining dissemination methods and engaging in a discussion with a local journalist. This process occurred from the 8th to the 10th session. Community presentations, the development of a published book (McKittrick et al. 2017) and a collaborative writing process that informed this manuscript occurred during meetings that extended beyond the 10 group sessions. Using NVivo for Mac 11.4.1, the primary author reviewed raw data using codes generated from the group to generate themes for the first draft of this manuscript. The core group of co-researchers would meet to review drafts and provide the primary author with feedback and/or revisions until a final version was complete.

Results

The central theme: "The Cards You Are Dealt" lies at the core of the display surrounded by speech bubbles (codes) and collectively curated photographs that represent the men's shared

experiences. Longer captions explain the significance of individual stories (nodes) branching from the collective. This structure helped the men navigate tensions that arose around the feasibility of articulating one's individual story amidst the narratives of other group members. The results focus on perspective and oppression, systems as methods of control, feeling taken advantage of, the role of substance use, compassion, hope and change. Individual narratives communicate each co-researcher's view of the criminal justice system as a result of their experience and highlight the admitting and discharge process, an awareness of wasted resources and the role of spirituality, community and hope.

Collective Narratives

The cards you are dealt. The co-researchers described daily life using a metaphor of a card game where “how you play those cards is how your life is dictated: you play the cards the best you can with the hand you got dealt” (Co-researcher). The cards in a person's hand are compared to a person's starting point in life, they set someone up for the types of paths and decisions available to the person for the rest of one's life and often depend “on who you're born to” (Co-researcher). How cards are played depends on factors such as a person's skills, abilities and experience, what one has to lose, the stage of the game, the type of game, who else is at the table, and the information at a person's disposal. The nature and amount of available information and how much power a person has in the game is influenced by one's position (social location). Common examples experienced by the men may include a dealer who is an Ontario Works representative, a police or parole officer, a judge or a politician while a chip leader could be a celebrity, a bank investor or another entity with financial power and influence. Therefore, not all players are privy to all of the information needed to make informed decisions nor are they privileged with the same amount of social influence. Some people are “dealt poor hands and play the best they can with the cards they were dealt” (Co-researcher) which may lead to situations

where a person “has a golden hand, make a bad call and end[s] up losing everything or play[s] a hand where they got nothing but are able to claw their way out of a situation” (Co-researcher). The cards you are dealt acknowledges that everyone has skills and abilities and can “play the game to claw their way out”, however, poor hands can be dealt to anyone and that a person’s ability to play a hand ‘well’, even a ‘good’ hand, is largely influenced by factors outside of one’s control. Therefore, the social distance between the criminalized ‘other’ and non-criminalized members of society is decreased.

Perspective and oppression. Similar to a person’s position in a card game, one’s social location provides different opportunities, privileges and experiences that “shape the way you see the world” (Co-researcher). For example, as one co-researcher described in relation to a picture he had taken of a civilian surrounded by police cars, this is not a matter of officers simply doing their job or upholding the law. He was referring to how the “swift action of the police force works well to hammer down authority” wondering how his life might be if “it were the same for compassion and second chances” (Co-researcher). Being labeled a criminal narrows the type and number of available opportunities, effectively excluding some people from fully participating in society, as another man explained: “our voices get pushed to the side because we’re just criminals. We’re not people to society ... if you’re a criminal then you can’t be successful” (Co-researcher). The co-researcher’s ability to build a resumé through volunteering, access employment outside of manual labour, travel within or outside of Canada or attend certain post-secondary programs was decreased once they were convicted. Incarceration shifted the men’s perspective of society and society’s perspective of them, subjecting them to additional conditions, surveillance and control that non-criminalized members of society are not subject to.

Systems are methods of control. Bureaucracy, institutional practices that stand in the way of empathy and meaningful system changes, was a direct contributor to the lack of freedom and individual choice experienced by the co-researchers. For example, probation and parole conditions limit a person’s mobility or ability to get a job due to weekly reporting requirements and subsequently increase the rate of incarceration (Sapers et al. 2017). Pacman symbols painted on the city’s streets as part of a bicycle route initiative become symbols of conformity in society. People are represented as Pacman, chasing morsels to survive and advance in everyday life while “ghosts represent the institutions that deny advancement and reduce the ability to survive” (Co-researcher). All humans are portrayed as “simple characters in a pre-set maze” (Co-researcher), challenging notions that people without a criminal record make choices outside of social and political influences. The scarcity of resources (“morsels”) calls attention to the challenges that people living outside of a pre-determined maze (status quo life course) are faced with, and how some people may need to play the “card of crime” as a resource for survival. Therefore, while systems are in place to maintain order and control, the co-researchers’ existence on the periphery “may lead to more crime to provide [...] and then you end up back in jail because you did crime for income so it’s kind of a cycle” (Co-researcher).

The notion of a fair trial in a controlling and dehumanizing criminal justice system was challenged with “the way they [police, lawyers] structure their questioning and the way that the court systems like are into warehousing people once you get that criminal record ...” (Co-researcher). In fact, some of the co-researchers had found themselves “behind bars whether you’re [person arrested] guilty or not guilty [on remand]” (Co-researcher). The experience of being on remand, detention in custody prior to having a fair trial, applies to 60% of the total number of people incarcerated effectively maintaining the population of people incarcerated

despite a decrease in the number of people convicted (Statistics Canada 2017a; 2017b). When people who could be awaiting trial in the community are labelled as dangerous and therefore detained, the need for additional correctional institutions, officers, services, programs (and jobs) become justified.

Taken advantage of. The men felt displaced, enmeshed in systems and services that did not provide “links to resources, [but] just a to-do list of things that keep you from being thrown back inside” (Co-researcher). The men expressed disappointment with programs, organizations or services they have encountered where they “never do what they say they’re going to do. I mean, if these charities are getting all this money, there should be some sort of accountability” (Co-researcher). Another co-researcher felt abandoned stating, “even the shitty programs, if they weren’t there, we’d end up back in jail ...”. The men felt like pawns in a system that existed to benefit others because “if they didn’t keep it [the jail] full, they wouldn’t have a system” pointing out that “people have jobs because people have a criminal record” (Co-researcher). As an industry, jails and prisons have extended beyond their original intention to house people who pose a legitimate danger to society, becoming an automatic tool marketed as essential to risk management (Cayley 1998; Christie 2017). Therefore, correctional systems and services, community initiatives and non-governmental organizations benefit financially by providing services to people with a criminal record while root causes of social inequality remain unexamined.

Substance use. Drugs: legal and illegal substances that alter a person’s psychological state had, at some point, played a role in all of the co-researchers’ lives but were not seen as the root cause of their struggles. Crime and drug use are cards in a person’s hand played in an effort to survive and are not part of a pre-meditated or deviant plan: “they [people with a criminal

record] feel bad about themselves or about what they did or whatever. What people have to do to get high. They're just not in check [are struggling with where they are or who they believe themselves to currently be] with themselves" (Co-researcher). Despite the risks and personal loss of "lives, wives, kids, homes, jobs ..." (Co-researcher), drug use was a tool to escape reality when "some people can't even see past that [what they are losing] and all they see is what they have to live in and that is why they turn to substances, so they can escape the reality of the bullshit. It's the only joy they can get out of life" (Co-researcher).

The co-researchers were aware of how status and money mitigated the stigma of drug use where "you can bend a lot of rules once you have celebrity status and all that crap [...] well how many people do we [co-researchers] lose in rehab and that and nobody gives a f*** and then ...they [celebrities] start a 27 club [tribute to celebrities who died at age 27, mostly due to drug use] so they can get more celebrity status?" (Co-researcher). Therefore, consequences of incarceration or losing friends or family happened without compassion from society. This double standard ignores barriers to community integration, as stated by one co-researcher:

"if you're having a hard time getting a job [because of a criminal record] then it's stressful so you may start to get into a drug habit or alcoholism or you know just to curb the anxiety of it and then that may lead to more crime to provide income [...] so its kind of a cycle."

Substance use was "a different kind of pain" (Co-researcher), one that that provided temporary relief from the inability to overcome the inertia of starting over while simultaneously contributing to it.

Compassion, hope and change. A photo of an anonymous poster in the community that reads: "Lives Lost to Suicide. R.I.P." was a reminder that "some people do care [about human

life]” (Co-researcher). Many of the men in the group have been personally touched by suicide and encouraged increased levels of compassion for people struggling as a way to value human life. These expressions counteracted stereotypes of violent, aggressive and emotionally empty male aggressors and drew attention to the harm that can occur (suicide) when space is not created for men to explore thoughts and emotions. One co-researcher ached to “succeed at something that I want to succeed at, not something that is criminal ... maybe even help somebody do something good in their life [...] something real, pure and honest”. Social enterprises and groups that create safe spaces for men to connect were seen as evidence that they have allies in the fight against oppression. Having access to authentic social opportunities, something more than a ‘service’ or a ‘program’, was imperative for the co-researchers to feel valued and create a sense of belonging.

Nodes of Independence

Each co-researcher grouped his most meaningful photographs in a node branching from a section of the shared narrative that he most identified with, bringing a piece of their individuality to the collective whole.

Admitting and discharge. The intense thoughts and emotions that arise at the start or end of a sentence was a prominent experience for one co-researcher. Feeling as though “the bad mistakes that I make have led to this end of the road, has led to here [incarceration]” (Co-researcher) created mixed feelings of control and losing freedom. At release, the relief that his sentence was complete contradicted the exasperation of having to start with nothing. The contrast of a “pretty” community garden juxtaposed with the “ugly” detention centre is a play on words highlighting the contrast between the thriving life of the garden on the outside with the unnatural ugliness that thwarts human souls on the inside. Despite having “freedom in the ability to take a picture [of the detention centre],” (Co-researcher), memories of the inside were fresh. Thoughts

about “the guys that are on that side [inside] though you know ... that’s their view [the garden], staring for hours” (Co-researcher), and reminded him of the lack of meaningful services at the detention center that left him feeling bitter about his experience living behind bars, unsupported upon his release and ill-equipped for community re-entry.

Spirituality and community. Witnessing community members taking action to provide accessible and affordable food in poor neighbourhoods made this co-researcher feel cared for, respected and understood. A connection to a weekly, faith-based men’s group was a space where men could “hold accountability for one another, support each other and pray for each other” (Co-researcher). Most importantly, the “non-judgemental and violence free” (Co-researcher) atmosphere and access to free food and clothing helped him stretch an already tight budget. Spaces where men can unite in ways that acknowledge and value spirituality and community connectedness without the threat of violence or social hierarchies, was seen as a way he could maintain dignity and create a social support network.

Wasted resources. Three different light sources - lightning, the sun and a parking light lamp, highlights the misguided use of resources that can occur when “mankind is the imbalance that upsets natural order” (Co-researcher). By being lit during daytime hours, the parking lot lamp shifts from a tool to increase community safety to a wasteful use of resources. This shift is similar to Canada’s correctional system, an institution that is meant to protect the public and illuminate a path of community re-entry but fails to deter crime, prepare people for re-entry, provide justice for victims, eradicate social inequalities, and removes all natural processes of restorative justice that may have pre-existed in a community (Cayley 1998).

Hope. Love, compassion, hope and second chances are just as important for community re-entry as access to affordable housing and employment. A smiling puppy becomes “motivation

to stay alive and sober [because] her smile keeps me positive when I'm grumpy or down and out" (Co-researcher). His dog's unwavering loyalty helps him "overcome feeling really down [forcing him] to get out of bed in the morning and socialize with other people" (Co-researcher). Taking care of another living being afforded him a different role in his daily life confirming that even though he "may have a criminal record [he] is still capable of loving and deserves to be loved" (Co-researcher).

Discussion

While the existence of a criminal record impacted these men's experiences, *The Cards You Are Dealt* depicts how 'community integration' is less about program design and more about overcoming inequalities that have surfaced or been reinforced as a result of having a criminal record. The co-researchers define community integration as having "a fair shake" (Co-researcher). Job opportunities, affordable housing and engagement in the community as a way to "just [do] something real, pure and honest" (Co-researcher) will continue to be out of reach until "they [authorities] abolish the criminal record" (Co-researcher) so the life-time punishment of a criminal record is not retained. For example, having difficulty finding paid work as a result of a criminal record that has been closed for 10 years but continues to exist commits people to a life of poverty, stigma and exclusion. A continuum of support was noted as essential to meet the diverse needs associated with the heterogeneous nature of community re-entry. For example, ongoing emotional support specific for previously incarcerated men or immediate housing options or financial support for people who find themselves homeless and without identification upon release were equally important. Conceptually, living in a community with less stigma and discrimination as a result of increased understanding from others about the harms and realities of incarceration was desired.

In violent and aggressive environments, the men required a different set of skills for survival while incarcerated where acts considered heinous crimes by society hold little to no consequences on the inside (e.g. rape, assault). As a tool on the inside, violence helped the men survive their daily lives behind bars, however stereotypes that portray the men as violent, aggressive and deserving of arrest did not corroborate with intense emotions that accompany admission to or release from a correctional facility, a desire for compassion for people struggling with suicide, a yearning to love and be loved, and feelings of connectedness fueled by socially-minded community initiatives. Although the ability for drug use to make social situations worse (e.g. interpersonal arguments, decision making around crime), substances were identified as a way to “numb out” and get through periods of hopelessness, despair and rejection.

The men’s belief in their abilities to enact change on their own behalves strengthened as the group progressed and may signify steps towards overcoming internalized beliefs that their voices hold little weight in society, a belief that may have contributed to a slow start for the group. For example, the men initially insisted that the primary author make connections with stakeholders to promote their messages because they did not trust that they would be taken seriously. In fact, it was not until the group was involved in the publication process that one co-researcher stated: “if I knew how deep this was going, I would have done it differently you know, dug deeper to contribute.” Therefore, PV helped the men feel confident about sharing their stories and concluded by co-presenting a lecture to a class of graduate students about participation in community-based research. Feeling that they are not taken seriously may contribute to difficulties in other areas of the co-researchers’ lives such as not applying for jobs or trying to make new friends, barriers to community re-entry that may lead to a belief that they are better off behind bars.

The process of PV provided opportunities for the men to be engaged, heard and to accomplish something more than just attendance, while counteracting offender rehabilitation programs described as “judicial propaganda” (Co-researcher). Fostering “good chemistry” (Co-researcher) so everyone can contribute was key to the co-researchers’ continued involvement, highlighting how, unless service providers and/or organizations take collaborative approaches to involve the people to whom they are providing services, they are at risk of incurring more harm.

Consumer-led, peer-support initiatives in mental healthcare continue to gain legitimacy, creating paid positions for people with lived experience (Mental Health Commission of Canada 2017; Mental Health Rights Coalition 2016; St George et al. 2017). However, the co-researchers continue to be denied opportunities to contribute to social change as a result of their criminal history. Knowledge that the criminal justice system contributes to recidivism is not new (JHS 2016) and unless individuals with lived experience are consulted, programs and initiatives will continue to lack information about what works.

Limitations

As this work was part of a master’s thesis, efforts were made to recognize the work of the co-researchers however, compensation beyond bus tickets and food was not available. A focus on women, LGBTQ+, Indigenous, black and other (visible) minorities was not a focus of this work and differences in experiences of incarceration are not discussed. Limited time and financial resources meant that recruitment and partnership development with stakeholders to outline potential actions required for the men’s experiences to inform correctional reform and prison abolition was beyond the scope of this study.

Conclusion

Avoiding discussions that focused on the crimes themselves created space for the men to be seen and heard as human beings experiencing ongoing oppression, rather than criminals who, without the intervention, will re-offend. Harnessing hope and championing the co-researchers' strengths led to the creation of tools for public education and self-growth. The role of the primary author was to respect the men's autonomy through shared decision-making as one way to deconstruct hierarchies between the the men and the primary author. Including the voices of the co-researchers highlights the need for systemic change that extends beyond the provision of programs and services to include the complexities, nuances and pleasures of everyday life.

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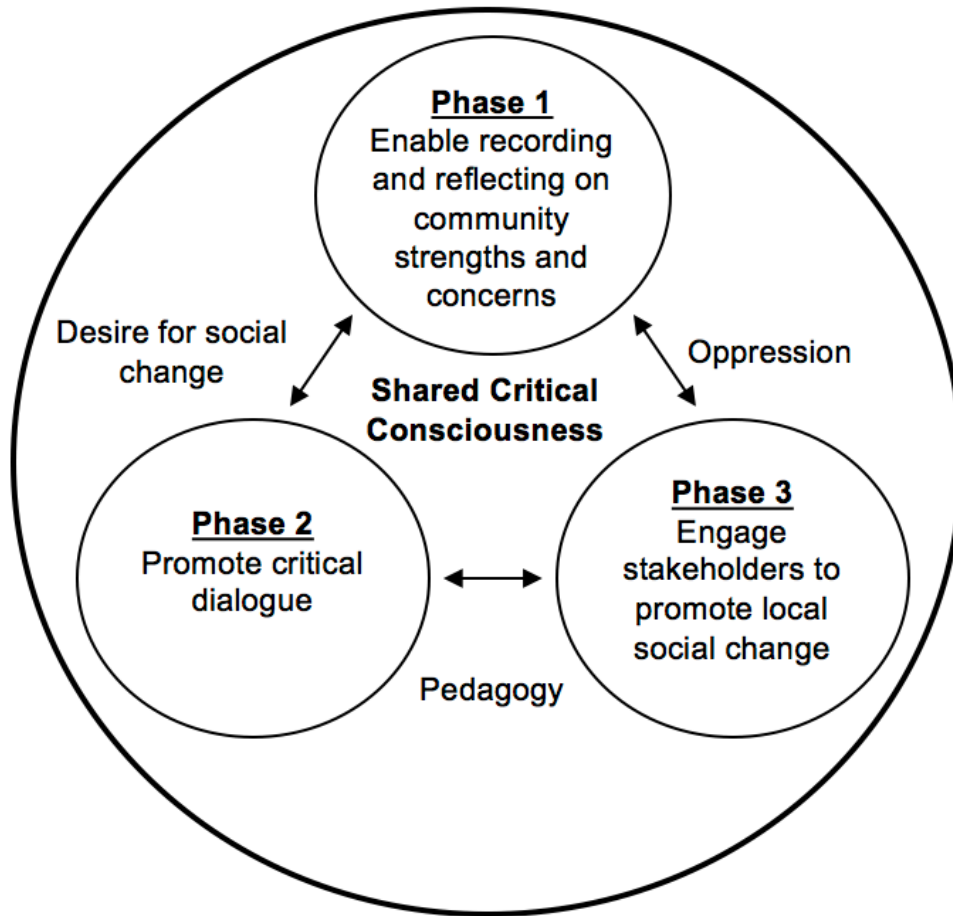
Table 1. Attendance at Photovoice sessions per co-researcher and per session.

WEEK	1	2	3	4	5	6	7	8	9	10	Total
NAME	July 10/17	July 17/17	July 24/17	July 31/17	Aug 7/17	Aug 14/17	Aug 21/17	Aug 28/17	Sept 4/17	Sept 11/17	% per person
AA**	Yes	Yes	--	--	--	--	Yes	--	--	--	30
AA**	Yes	Yes (left early)	--	--	--	--	--	--	--	--	20
AA*	Yes	Yes	Yes	Yes	Yes	--	Yes	Yes	Yes	Yes	90
AA*	Yes	--	Yes	--	Yes	Yes	Yes	Yes	Yes	Yes	80
AA**	Yes	--	Yes	--	Yes	--	Yes	--	--	--	40
AA**	Yes	--	--	--	--	--	--	--	--	--	10
AA*	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	--	Yes	90
AA*	Yes	Yes	Yes	--	Yes	Yes	Yes	--	--	Yes	70
Total % per session	88	66	55	22	55	33	55	33	22	44	

* The core group of researchers that continued to work to publish the book.

** No captions or photos on the physical display and no continued involvement in the published book. Their contributions are mainly verbal during group discussions.

Fig. 1 Three goals of Photovoice that guided group facilitation (Freire 1996; Wang and Burris 1997)



Chapter 3: Professional identity and emerging occupational therapy practice: An autoethnography

Background. Emerging settings have been explored as a pedagogical tool for occupational therapy (OT) students without exploring emerging contexts from the lens of registered therapists.

Purpose. To provide a critical, first-person account about emerging OT practice from the perspective of a new graduate practicing in an emerging setting. **Method.** Autoethnography, a post-modern, interpretive approach to research draws on reflections of the primary author to draw meaning from reciprocal interactions between her and the culture of an emerging practice setting. Data collected through reflective journaling and clinical process notes were reviewed and guided systematic reflections required to write and re-write an analytical narrative of key experiences. **Findings.** The primary author's role-emerging placement influenced her chosen work setting while her understanding of evidence-based practice, advocacy and the potential of OT evolved. **Implications.** Where occupation-focused research and regulatory body support remains limited, autoethnography contributes to professional development and the identification of knowledge gaps.

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Introduction

My memory rests on an interaction with a guest speaker in a social sciences course I took about critical approaches to community-based research. He had a history of homelessness and had taken part in a participatory action research (PAR) project where he was trained in conflict management, and was now working as a peer advisor at a community organization. He was

articulate, insightful and chose his words carefully so they had impact. I can't remember the topic of the lecture but I do remember what he said: "something that I have recognized in people with passion is that they will go to the ends of the earth to help people, to change their situation. It's a lot of work and not only do they wear themselves thin but they are always operating underneath a glass ceiling." He was referring to the bureaucracy of systemic structures that many 'workers' find themselves up against. Without being dramatic, his words changed me. They gave me permission to challenge the structures that restricted me from engaging in social and occupational justice work. I could feel a renewed sense of purpose right down to my bones.

When I heard this man speak, I was working as an occupational therapist in an emerging community setting with men transitioning to the community post-incarceration. This was my first job as a registered occupational therapist and the limits that poverty and bureaucratic systems placed on my ability to make change were becoming painfully obvious. I felt surrounded by red tape and unequipped by my education. In addition, the scarcity of research about emerging occupational therapy (OT) practice with men transitioning to the community post-incarceration left my questions unanswered by the literature. Thus, as part of a master's thesis under the guidance of my supervisory committee, this paper contributes to that gap by providing an in-depth, first-person narrative about emerging OT practice with marginalized men.

I begin with a review of the literature and an outline of the methods and theories that helped situate my work. I draw on my experiences from my everyday practice with men transitioning to the community post-incarceration including the facilitation of a PAR project. A layered account of what it means to be an occupational therapist in an emerging setting allows me to extend beyond the data. I conclude with insights about advocacy, social justice and the need for a pedagogical shift to avoid paternalistic service provision.

Literature Review

The majority of research regarding OT and corrections and/or criminal justice focuses on the context within institutional settings such as prisons and forensic units (Baker & McKay, 2001; Chacksfield, 1997; Crist et al., 2005; Eggers, Munoz, Sciulli, & Crist, 2006; Molineaux & Whiteford, 1999; Whiteford, 1997), leading to a call for research and practice that extends beyond institutions to the community (DeVos, Hauser, Kitchen, & Ring, 2012; Dieleman & Steggle, 2013). A literature review by Clarke, de Visser, Martin, & Sadlo (2016) showed that research examining role-emerging OT settings remains “predominantly opinion-based” (p. 17), almost exclusively limited to understanding role-emerging placements as a pedagogical tool for students. A small number of qualitative studies extend beyond placement settings to explore whether placements influenced the career choices of OT students post-graduation (Clarke, Martin, de Visser, & Sadlo, 2015), the nature of emerging OT practice (Holmes & Scaffa, 2009a) and what strategies can help develop key competencies for emerging settings (Holmes & Scaffa, 2009b).

In 2009a, Holmes and Scaffa administered a survey to 700 American occupational therapists to identify themes about the nature, rewards and challenges of emerging OT practice. A total of 167 valid responses were provided with 33% of participants identifying as practicing in an emerging setting. However, the study does not present information about the analysis process and without understanding how data collected from therapists in emerging settings impacted the results it is unclear how this work builds on existing opinions in the literature. Subsequently, a panel of 23 American occupational therapists practicing in emerging settings or roles was formed to determine: (1) what competencies are required for emerging practice; and (2) what strategies can support current and future practitioners to develop them (Holmes &

Scaffa, 2009b). Three rounds of survey questionnaires in accordance with the Delphi method produced 55 competencies that were identified and ordered according to the American Occupational Therapy Association's (AOTA) standards for continuing competence (AOTA, 2010). A total of 36 strategies to support current and future practitioners were presented according to emerging themes. Holmes and Scaffa (2009b) acknowledged that diverse stakeholders should be involved in the identification and development of key competencies and strategies to support emerging OT practice. However, because the majority of respondents worked in private businesses or post-secondary institutions, competencies and strategies identified in this study may not be applicable to marginalized populations such as men with a criminal record. Furthermore, there are likely discrepancies between emerging settings in Canada and America. For example, working with people who have been incarcerated was not included in either article yet has been identified as a target population for occupational therapists in Canada (Canadian Association of Occupational Therapists [CAOT], n.d.; Dieleman & Steggle, 2013).

While several authors have recognized the benefits of providing OT services in emerging community settings (Doll, 2010; Kronenberg, Algado, & Polland, 2005; Lauckner, Krupa, & Paterson, 2011; Lauckner, Pentland, & Paterson, 2006; Leclair, 2010; Marshall & Rosenberg, 2014; McColl, 1997; Thew, Edwards, Baptiste, & Molineux, 2011; Whiteford & Wright-St Clair, 2005), policies, guides and position statements published by regulatory bodies and organizations focus on supervisory requirements for students completing role-emerging placements (College of Occupational Therapists of Ontario [COTO] 2011; CAOT and Association of Canadian Occupational Therapy University Programs Canada [ACOTUP], 2012) or exclude references to role-emerging settings altogether (CAOT, 2015). The paradox that existed between calls for clinicians to extend practice into emerging areas (Cooper & Raine, 2009; Fortune, Farnworth &

McKinstry, 2006) and the lack of institutional support that I experienced, propelled me to critically reflect on my experience and the tensions in my everyday practice. Guided by the research question: ‘what does it mean to practice as an occupational therapist in an emerging, community setting?’ this paper builds on current research, policies and guidelines by providing a first hand, critical account of tensions I experienced working as a new graduate in an emerging community setting with men with criminal records in Ontario, Canada.

Methods

What is Autoethnography?

AE is a post-modern, interpretive approach to research in which “stories themselves are analytical ... [and] address the questions: ‘what is going on here and what does it mean?’” (Ellis, 2004, p. 184). Objectivity from an empirical perspective is not the goal, rather, understanding how the researcher is connected to what is studied provides an opportunity to explore reciprocal interactions that shape the identities of people involved in the research making explicit connections between the researcher’s experience and broader social phenomena (Adams, Holman-Jones, & Ellis, 2015). How much focus is given to the self (auto), the culture (ethno) or the methods (graphy) varies depending on the content and purpose of the story being told and the preferences of the writer (Ellis & Bochner, 2003). As a result, AE created space for me to address gaps in the literature where accounts of the daily experiences of registered occupational therapists practicing outside of established healthcare institutions (aka: emerging practice settings) are lacking (Bossers, Cook, Polatajko, & Laine, 1997; Clarke et al., 2016; Huddleston, 1999; Overton, Clarke, & Thomas, 2009).

Methodological Approaches and Theory

Because strict criteria in qualitative research may restrict creative and “innovative approaches to sense-making and representation” (Ellingson, 2009, p. 7), AE implements a dynamic and multi-dimensional approach where inquiry into a specific phenomenon is fluid, restricted only by written language (Bochner, 2012; Moose-Mitha, 2005). Therefore, evaluative criteria established by Richardson (2000) were applied to: (1) provide a *substantive contribution* to understanding social life that is grounded in theory; (2) *express a reality* of a particular lived experience through “a credible account of a social, cultural, individual or communal sense of the real” (p. 16); (3) demonstrate *aesthetic merit* through creative writing practices, inviting interpretive responses from the readers; (4) show *reflexivity* by acknowledging postmodernism, subjectivity, ethical tensions and, the data gathering and writing processes; and (5) *impact* readers on an emotional or intellectual level generating new questions or motivating new writing, research or actions. In their roles as co-authors, my supervisory committee provided opportunities for critical dialogue about the content and process of my writing, pushing me towards a deeper understanding of my own experience.

Freire (1996) articulates critical dialogue as a reciprocal process between the oppressed and the oppressors (often those in power) as an instrument for social change. As a health care professional, I’m often afforded the status of “expert”, a “knower” with privileged access to critical dialogue about what should or should not be done to help others in my role as a clinician. As an academic I’m afforded opportunities to produce and legitimize knowledge through research and writing, contributing to or potentially shaping discourse on a given topic. Both of these embodiments puts me at risk of neglecting or suppressing the voices of the people that I am trying to help. To overcome inertia to change, I am required to recognize limit-situations,

positions oppressed groups find themselves in where their ability to participate in society are constricted by a set of constraints or barriers, and push against them (Freire, 1996). Drawing on the intersections of Archive theory (Merewether, 2007) and Everyday Life theory (Highmore, 2002), limit-situations arise when documented fragments of everyday life legitimize certain ways of being and doing over others. For example, over-reliance on archives of literature, large collections that have been approved, catalogued, summarized, referenced and used to define problems and solutions to guide me in my role of occupational therapist, point me towards intervention-based treatments and medical research as the default approach to healthcare, research and academic understanding (Hammell, 2011; Reagon, Bellin, & Boniface, 2010). As a result, I am at risk of justifying potentially oppressive actions in the name of evidence informed practice and excluding people from arenas of critical dialogue should I minimize research questions of marginalized groups that may not fit positivist approaches (Backman, 2005; Ilott, 2004). Because men with criminal records are rarely afforded opportunities to produce research in line with the dominant voice of evidence-based medicine, their needs continue to be defined by privileged professionals.

The inclusion of weekly journal entries and process notes from my experience facilitating a PAR project helped me to find my voice, an important component of AE (Ellis, 2004; Wall, 2006). Additional sources of data included transcribed audio recordings of PAR sessions and notes and emails from discussions with colleagues and mentors about methodological tensions. When reviewing sources of data, my reflections were recorded in a table format, systematically linking them to a time point along the research process and the event that triggered the reflection. This table was a collection of key reflections, a starting point to to write (and re-write) an analytic narrative of my experience while remaining open to additional insights, memories and

evolutions of my own understanding of what it means to be an occupational therapist in an emerging area of practice.

Findings

Role-Emerging Placements: A Pre-Cursor to Emerging Practice?

Often designated to fill a gap that other professionals, for various reasons didn't take up, I started each placement as an OT student questioning my role. Where do I fit among this team of healthcare professionals and how can I apply my knowledge to the hospital setting? My inability to extend beyond the requirements placed upon me limited how I was able to practice and I came to realize how the same structures that support my privileged role of 'helper' reinforced a system that requires other people to take the role of someone who needs 'help'. As I re-live the crushing feeling in my chest upon a person's re-admission, the broken sleep due to anxiety about my clinical skills and the meaning behind seemingly endless evenings of after-hours research, I understand my actions as attempts to eradicate feelings of helplessness and not simply studious habits. Because I was convinced that I was inadequate, I focused my energies inward, on tasks that I thought would help me become a more efficient and effective OT, leaving the work of advocating for systemic change on the back burner. Ultimately, I completed my final in-hospital placement feeling burnt out, depressed and, grateful that my time as a student was finite.

Voices warning me that a role-emerging placement would make me less employable by failing to provide me with 'clinical' experience was not enough to overcome my need for something different and I discovered that I enjoyed the elbow room created by practicing at arm's length from established healthcare institutions. Medical records, diagnoses and other information considered part of the medical model that I previously understood as essential to providing responsible, evidence-based OT services were not accessible yet I remained

accountable to professional regulatory bodies, codes of ethics, applicable legislation and expectations from academic institutions. The need to learn about Ontario’s social assistance programs, criminal justice systems, points of access to primary care for people without a family physician or a health card, affordable housing programs, networks of support in the community that targeted social determinants of health and other topics that weren’t even on my radar during hospital placements highlights how easily poverty can be neglected in primary healthcare. My ability to *choose* to learn about or ignore poverty, addiction, homelessness, stigma, discrimination, sexual orientation, disability, race and other components of intersectionality was a stark reminder of my position of privilege and the risk of perpetuating oppression even if unintended. Therefore, this placement influenced the first job that I took as a registered occupational therapist in an emerging setting where I learned that the increased fit of role-emerging placements with occupation-focused practice (Thew et al., 2011), does not instinctively challenge barriers to meaningful engagement in occupation.

The Value of Evidence-Based Practice – As it Stands

EBP, the ability to synthesize critical appraisals of research with my own clinical experience and knowledge from the person with whom I was providing services is a structured process that simultaneously establishes credibility for clinical practice (Higgs & Titchen, 2001; The Center for Clinical Effectiveness, 2009; Upton, Stephens, Williams & Scurlock-Evans, 2014). The philosophy of EBP emerged from Evidence-Based Medicine (EBM), a lens to service delivery that adheres to the medical model of care (Whiteford & Wright-St. Clair, 2005), and continues to be an expectation when delivering OT services (CAOT, 2009; CAOT, 2012; OTSeeker, n.d.; Townsend & Polatajko, 2013; Upton et al., 2014). Recognizing how medically-oriented definitions of EBP may not be a good fit for all occupational therapy contexts, CAOT

(2009) has defined it as a client-centered approach to enable “occupation based on client information and a critical review of relevant research, expert consensus and past experience” (p. 3). Taking a critical look at this definition, however, the occupational therapist is positioned as the *enabler*, the motivating source or the catalyst for someone else to engage in meaningful occupations. Given that for the most part, occupational therapists interact with people after they have endured some kind of life event leading to difficulty in performing daily activities (Denshire, 2006), to consult the evidence and implement an intervention targeted at biological or physical components of the person or their environment to enable occupation makes sense. However, how CAOT’s definition applies to complex social issues and oppression created by social and political factors is not as clear. Second, this definition suggests that sources of evidence that are *accessible* to an occupational therapist are sufficient to guide their actions. Because “client information” is only one of four sources that an occupational therapist is encouraged to consult, action remains largely informed by published studies from a positivist paradigm and may lead to a biased approach to delivering services that perpetuates the absence of marginalized voices. Published research, standardized assessments or outcome measures that could inform my role came at a price that left me questioning the value of EBP in the setting I was working. The pull I felt to minimize my reliance on evidence from research, expert consensus and past experience that could “guide” interventions or clinical action left me questioning my claims that I was an evidence-based clinician but also felt necessary to avoid continued exclusion of the men I was working with.

Tools from my education and in-hospital experiences guided how and what information I gathered to complete reports, contribute to rounds and plan for discharge in specific interprofessional settings. In the community, these conventional approaches rarely gathered

information related to social determinants of health that would “have a significant effect on changing the root causes of the problems experienced by service users [these men]” (Rempel, 2017, p. 2). The EBP skills honed during my education were less valuable for me in this emerging context and I questioned the appropriateness of standardized assessments or prescriptive approaches that may further oppress people by deciding for them what information is important to know. Philosophical foundations of occupational therapy emphasize how the lack of access, to meaningful occupations is a social justice issue (McColl, Law & Steward, 2015; Townsend & Polatajko, 2013) yet, conceptual and practical models applicable to practice often exclude diverse social conditions that impact access (Hammell, 2011; Kiepek & Magalhães, 2011; Kiepek, Phelan, & Magalhães, 2013). Therefore, feeling lost about how to advocate for social change needed to increase opportunities for participation in everyday life for men with a criminal record may be in part due to the limited focus on how to do so in the theoretical and scientific literature underpinning my education and meant to guide clinical action. I found myself using my critical appraisal skills to exclude the majority of sources that I had learned as essential to practice so I could look upstream to understand reasons that participation was restricted for these men and take action that chips away at sources of injustice so they may be reduced.

Discussion

Defining the Context

Everything that occupational therapists do is embedded in interdependent societal and practice contexts that vary depending on a number of components from distinct yet overlapping social, cultural, physical and institutional factors (Townsend & Polatajko, 2013). I have never been incarcerated, received social assistance, needed to schedule my day around food banks or the methadone clinic nor have I been denied employment because of a criminal record. I’m a

formally educated white female who grew up in a family that supported me and my goals and sought access to the men’s space with intentions to ‘make a difference’. However, no matter how I approached my work, I was not the one living in poverty or dealing with the life-long impacts of a criminal record. Therefore, with limited lived experience and no access to third-party collateral information, my actions were informed by stories that the men were willing to share and I was required to consistently prove my intentions through action and build a reputation as a reliable ally. Their world was not one that my privilege would easily provide me access to and so, turning to these men for answers, I asked questions about their day-to-day lives, a pedagogical shift helping me see the same issues as the men, fight the same battles and help their voices be heard.

On the inside. I questioned how the men’s experiences while incarcerated contributed to community re-entry. Stories from “the inside” positioned violence and aggression as tools for conflict resolution, methods of assertion or as an acceptable response to injustice in a system they have learned not to trust. Accounts of violence and aggression from police officers, correctional officers and other (mostly male) authority figures illuminated situations where, depending on a person’s (man’s) social location, violence and aggression were tolerable and accepted. For example, as an authority figure, physical force was considered a necessary and/or acceptable means of control required for risk management or to ensure safety. As a criminal, however, similar uses of physical force were seen as acts of rebellion; something to be feared and thus something that cannot be tolerated in correctional institutions designed to control. Lived experiences of physical and psychological violence and abuse were fundamental to masculinities constructed in correctional institutions and become tools the men use to assert themselves, avoid victimization and gain respect, power and personal safety (Abrams, Anderson-Nathe, & Aguilar,

2008; Comack, 2008; Connell & Messerschmidt, 2005; de Viggiani, 2012; Evans & Wallace, 2007; Lutze & Bell, 2005; McFarlane, 2013; Ricciardelli, 2014). These men were enacting labels of dangerous criminals that contributed to recidivism, isolation and stigma yet, at some point were necessary for their safety and survival. Although yearning to understand the complexities of life with a criminal record, I am fortunate that I have never found myself in a situation where violence, aggression or crime appealed as less onerous or necessary actions.

Insider perspectives from my job revealed insecurities, low self-esteem, feelings of rejection and, mistrust that when access to occupations to develop these things are restricted, frustrations would put the men at risk of relapse (e.g. crime, substance use, violence). I had to shift from prescriptive forms of OT that widened the client-patient divide and actively create opportunities for the men to feel heard, have their input valued and engage in occupations that could help them understand and define themselves differently.

Praxis. Critical dialogue, theorizing or learning is not sufficient for social change (Freire, 1996) which also differs from individual or one-on-one clinical work. I chose to facilitate a Photovoice project as a way to enact concepts I had learned through the reading of Freire's *Pedagogy of the Oppressed* (1996) and courses I took on Archive Theory (Merewether, 2007), Everyday Life theory (Highmore, 2002) and critical approaches to community-based research. My intention was to co-produce a counter-narrative to the status quo outlining actions for social change through Photovoice (Wang & Burris, 1997), one of many participatory approaches to research that I chose allowing me to fulfill a learned need as an evidence-based practitioner to follow a framework supported by evidence. Or maybe choosing Photovoice is less about adhering to evidence-informed practice and more about having a developed, structured approach that provided me with some stability among the shifting complexities of emerging practice. As a

result, I embraced the reality that I don't have all the answers and valued the men as co-researchers who could shape how their stories are told (Trentham & Cockburn, 2005).

Shifting from beliefs that I had to adhere to a research protocol of objectivity to one of subjectivity and collaboration relieved anxieties I had about having to know all of the answers while contributing to a lack of clarity around my role. Was I “an occupational therapist, a researcher or a participant?” As an occupational therapist there were outcome measures, therapeutic value, boundaries, guidelines, legislation and codes of ethics to follow that placed me in a space where I would embody the role of the ‘professional’; an often ill-respected character among people oppressed by authority figures. As a researcher, my approach was informed by expectations of the ethics board, my supervisory committee and how I had previously learned to do research where objectivity is valued. This role reinforced a culture of observation and surveillance; creating social distance between myself and the men and perpetuating dynamics that contributed to them taking up the identity of “the other”. However, to identify as a participant introduced the potential of removing focus from the men's stories by including my own and failed to acknowledge power differentials that may be impossible to completely eradicate. As a participant, the delegation of facilitation and organizing responsibilities may have become less clear. I hadn't realized how much emphasis I placed on labels to define and inform what I did on a day-to-day until the collaborative approaches of Photovoice forced me to examine them. Ultimately, I decided on *co-researcher*. A label that recognized the knowledge and expertise I had while understanding myself and the men as colleagues.

Doing Justice - A Pedagogical Shift

Incorporating anti-oppressive and post-modern theories into my practice helped me think about different ways of doing OT and the utility of EBP and OT models and theories in guiding

advocacy work. Dichotomies of clinician – patient, professional – client, expert – layperson or case manager – service user legitimize and value some ways of being and knowing over others where the former often embodies a position of privilege in relation to the latter. My own position of privilege and the oppressive systems that supported it were not eradicated in an emerging setting however, I was occupying a space where I had more autonomy to question the causes of and take action to reduce social inequities. At arm’s length from established healthcare institutions, I obtained funding from a community foundation to create opportunities for men with a criminal record to engage in critical dialogue about their social location and disseminate knowledge through the creation of a book and public presentations within their community. The book and the presentations felt like a renewed pedagogy where I refrained from the development and delivery of specific curriculum or assignments and the teaching and learning processes were reciprocal. I watched the men gain self-efficacy through their increased participation in the project and in community presentations. Consistent attendance at Photovoice groups coupled with lively discussions around photographs that the men had taken over the week demonstrated how this work held meaning and importance for the co-researchers. However, I still felt as though my efforts were a drop in the bucket and was left without increased knowledge about how I could match the men’s personal gains with systemic level changes to policy. While the individual benefits of this Photovoice group are real, the work did not change their social location or the men’s ability to relieve themselves from experiences of oppression. In fact, despite including the men as co-authors on another publication (Zubriski et al, 2018), this work may will likely have more of an impact on the trajectory of my own career. In addition, the political nature of advocacy work was realized when my renewed understanding of my role and scope of practice did not match those of my employment supervisors, contributing to workplace

conditions that eventually led to my departure. Therefore, despite my best intentions and efforts, I found myself unable to build on the work we had started in ways that could advocate for systemic change.

Conclusion

Internal self-dialogue helped me understand the limits of my knowledge, the realities of my social location and, reflect on my need to relinquish control in order to involve the co-researchers in the creation and dissemination of knowledge. Sharing control increased my flexibility allowing me to recognize that process and structure are not the same as objectivity and rigidity in practice or methodology. When I embraced the co-researcher's stories as more than simply one of four components of the clinical reasoning process, I developed a sense of urgency for authentic partnerships that acknowledge and seek to minimize the social distance between myself and the co-researchers while honouring the strengths of the men. I came to understand that integrating anti-oppressive approaches into my practice was a choice that I had made; one that did not guarantee the eradication of existing oppression or prevent me from perpetuation them. As a result, the hierarchy of EBP emerged as one of many ways of knowing and doing along side the application of models informed by social justice. Future research is needed to understand how occupational therapists can achieve policy change and social justice through advocacy. Finally, co-creating OT theories and models with people experiencing oppression provides tools for anti-oppressive clinical practice and the undertaking of theory-informed research geared towards social change.

Key Messages

- As a research method, autoethnography creates space for clinician reflection, professional development, client-centered practice and scholarly contribution to the literature.
- Current occupational therapy theories and models have limited applicability to inform approaches with marginalized or oppressed populations.
- Anti-oppressive practice is a commitment that is not without risk of further oppression.

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Chapter 4: Conclusion

Introduction

This master's thesis brings the voices of people with lived experience to the fore. Men with criminal records share their perspectives about community integration using participatory action research (PAR) methods, creating a counter-narrative to status-quo understandings of criminalized men. An autoethnographic account from my perspective, an occupational therapist working with the men who completed the PAR project, draws attention to the role of evidence-based practice (EBP) and tensions that surface in emerging community practice settings. The following research gaps provide rationale for this work: (1) limited information about community integration from the perspective of men with a criminal record; (2) no published studies about the nature of emerging occupational therapy (OT) practice from the perspective of an occupational therapist working in an emerging setting; and (3) limited information about occupational therapists working with men in the community who have a criminal record. To address these gaps, two studies (Chapter 2 and 3) employ different methods guided by their own sets of objectives.

The second chapter presents the findings from the PAR project to answer the research question: how do men with criminal records define and conceptualize community integration? The main objectives were to: (1) construct a shared

critical consciousness about the concept of community integration; (2) engage in critical discussions about how social location and other factors contribute to community integration for a group of men with a criminal record; and (3) consider how the men's performance and constructions of masculinity contribute to community integration. Photovoice, a PAR method, was used to guide the group process to meet objectives and create space for the men to share their stories through photographs. Critical discussions about individual and shared experiences contributed to the emergence of a central metaphor for daily life, The Cards You Are Dealt. The cards in a person's hand are compared to a person's starting point in life, they set someone up for the types of paths and decisions available to them for the rest of their lives and often depend "on who you're born to" (Co-researcher). How cards are played depends on factors such as: a person's skills, abilities and experience, what they have to lose, the stage of the game, the type of game, who else is at the table, and the information at a person's disposal. Therefore, the hand that players are dealt, the context around the game and what a person has to lose informs the cards someone chooses to play explaining how life experiences and choices depend on a number of factors outside of a person's control. As a result, the social distance between the criminal 'other' and non-criminalized members of society is decreased and crime is understood as a card that is played in situations where other options are not available.

The third chapter presents an autoethnography (AE), a post-modern, interpretive approach to research where “stories themselves are analytic ... [and] address the questions ‘what is going on here and what does it mean?’” (Ellis, 2004, p. 184). Written from my perspective as a registered occupational therapist working in an emerging setting, AE created space for me to address gaps in the literature where accounts of the day-to-day of occupational therapists outside of established healthcare institutions are lacking. To make known my own subjectivity in relation to men with a criminal record, sources of data included: personal journal entries, process notes from the facilitation of the photovoice project, audio recordings and transcripts of photovoice sessions, notes and emails from discussions with colleagues and superiors about methodological tensions, and systematic reflections on thoughts, feelings and emotions that emerged when reviewing data sources. To establish quality in AE, five evaluative criteria outlined by Richardson (2000) guided how I wrote and what I chose to include. Writing as a method of inquiry therefore included the ability to: (1) provide a *substantive contribution* to understanding social life from a social-scientific perspective that is grounded in theory; (2) *express a reality* of a particular lived experience through “a credible account of a social, cultural, individual or communal sense of the real” (p. 16); (3) demonstrate *aesthetic merit* through creative writing practices that invites interpretive responses from the readers; (4) show *reflexivity* through the acknowledgement of: postmodernism, subjectivity,

data gathering and writing processes and potential ethical tensions; and (5) *impact* readers on an emotional or intellectual level generating new questions or motivating new writing, research or actions (Richardson, 2000). Linking the data to larger sociopolitical structures extended the focus of the AE to the complex relationships between myself (auto) and predominant social and political cultures (ethno) to inform my own layered account (graphy) of what it means to practice in an emerging setting. Key themes included a lack of guidance from regulatory bodies and professional associations, how my role-emerging placement during my student educational preparation was related to my chosen field, tensions between EBP and limited published research that applied to emerging settings, and how a pedagogical shift in OT was necessary for this work.

When considering chapters 2 and 3 in the context of the presented knowledge gaps and the theories and methods used, this thesis contributes to knowledge about: (1) emerging OT practice with men transitioning to the community post-incarceration; (2) daily life/community integration from the perspective of criminalized men in the community; and (3) tensions in emerging OT practice; and (4) insights about the nature of anti-oppressive OT practice. This fourth and final chapter elaborates on the nature of these contributions, implications for stakeholders, the strengths and limitations of this thesis, and suggestions for future research.

Contributions to Knowledge

Emerging Occupational Therapy Practice with Men Transitioning to The Community Post-Incarceration

I started my clinical work with a business card stating that in addition to being an occupational therapist, I provided *reintegration support*, a service that I was not trained in and also seemed ambiguous. What is *reintegration*? How is it defined, measured and confirmed? What is *support*? Are we talking about psychotherapy, advocacy, system navigation, chronic pain management, family reunification? A lot of the men with whom I worked in my role had been living on the periphery of society for a large part of their lives. Homelessness, poverty, addiction, unemployment, social exclusion and limited opportunities for community participation were the norms. Whether they were confined in penal institutions, couch surfing, living in shelters, dependent on food banks and other charitable sources, having access to real opportunities to contribute to society was rare. Volunteering, a way to give back, was valued by almost everyone with whom I provided services, but finding somewhere that did not do criminal record checks as part of the selection process was nearly impossible. After months of searching for community engagement opportunities, I decided that I needed to create space for these men to do things differently, to have a voice. Many did not have much to return to and despite desires for social change, held beliefs that they belonged on the fringes.

Creating space. Photovoice, a type of PAR, provides a powerful documentation tool (a camera) to people who are often excluded from participation in every-day life. Whether it is due to stigma, discrimination, the stress of poverty or not having access to other ways to share a message, photographs tell a story in ways that overcome barriers of speech and language. Photovoice places people who are usually ‘researched’ in control of making decisions about the research question, the data that is collected, what story they want to tell, how, where and with whom (Wang & Burris, 1997). Creating space for authentic engagement, where tokenism is avoided and the knowledge and skills of the co-researchers is valued and taken up can be difficult (Arieli, Friedman & Agbaria, 2009). Therefore, instead of creating session plans for each individual group, I created them for each phase in the Photovoice project outlining key tasks or goals that would mark the completion of a phase. This approach allowed for flexibility in terms of how many sessions were devoted to each phase of the project so that if the co-researchers wanted to spend more time on certain aspects of the project, they could. Conversations were directed by the men and when the group felt that the purposes of each phase were met (data collection, data analysis, identifying stakeholders), we would move along in the Photovoice process.

Group time was dedicated to hearing the men’s stories and developing a shared critical consciousness about sociopolitical structures such as the criminal

justice system, policing, media, affordable housing, social assistance, social norms or other organized systems of rules that impacted their daily lives. As an occupational therapist, I was paid to run the groups and as a master's student, I would complete a thesis from this effort. Therefore, in an effort to recognize the inherent inequity that can emerge when completing research with people in marginalized populations, I would complete the behind the scenes tasks: organize weekly meals, set up the meeting space, print photographs, get supplies to create the final display, connect with community stakeholders for dissemination purposes, and find funding sources to help meet outcomes. Tasks were decided upon by the group and I encouraged and valued various levels of engagement without pushing or expecting action beyond those with which the co-researchers were comfortable, recognizing that showing up on a weekly basis with photographs and stories to share was already a lot. First, by respecting and welcoming different types of engagement, the co-researchers were not held to expectations arbitrarily decided by myself and therefore were not made to feel inadequate by not meeting them. Second, without fear of not being able to meet expectations, the co-researchers were free to participate in ways that met their own needs and not just the needs of 'the project'. Third, by taking responsibility for behind the scenes, I was honouring the community-based research (CBR) principles of implementing a cyclical and iterative process to define problems and learn, facilitating collaborative partnerships, promoting co-learning and capacity

building, and finding a balance between research and action (Israel, Schulz, Parker & Becker, 1998).

Weekly meetings were times during which the men could be heard, a stark contrast to their exclusion from documents informing the criminal justice system. Their input about group process was valued, they created and collected the data and were equal partners in the data analysis and publishing processes. As a result, the men shared details of their experiences of incarceration and community re-entry that they may not have shared in a more paternalistic setting (Co-researcher). Privileged access to the co-researchers' narratives in conjunction with making theoretical and methodological information accessible to them created a reciprocal learning environment that was central to the group: the group itself was a form of pedagogy. As outlined by Freire (1996), education for liberation involves reconciliation between “the poles of the contradiction so that both [teachers and students] are simultaneously teachers and students” (p. 53). In addition to creating narratives that oppose mainstream accounts of men with criminal records, social distance between the occupational therapist and the men within the group were decreased; a starting point for the kind of education for liberation articulated by Freire.

Dissemination. Once the Photovoice group was complete, I continued to meet with a smaller, core group of co-researchers for an additional 10 weeks in free community spaces. Through these meetings, we built on the work from the

Photovoice project and with additional narratives, put their stories together in a publishable format (McKittrick, Barager, Rodrigues, & Henwood, 2017). These meetings were guided by principles of CBR such as involving a long-term process and commitment, emphasizing local relevance of problems, collaboratively disseminating knowledge to all partners involved, and building on the shared values and understandings of men with a criminal record (Israel et al., 1998). As a group, we took a strengths-based approach that harnessed accessible resources such as free community spaces, free media software at the public library, community grants for residents, and the desire for social change as a way to build hope, capacity and disseminate a counter-narrative to the status quo.

Despite the Photovoice group being part of a master's thesis, doing PAR is a way to engage “populations who are restricted from participation in everyday life” in an emancipatory approach to OT practice (Townsend & Whiteford, 2005). Flexibility in a group approach that positions people in marginalized factions as knowers who have control over what they do and how they do it is in line with autonomous, client-driven practice. Therefore, theories and frameworks that are anti-oppressive, guide advocacy efforts and encourage self-growth among participants/co-researchers make space for therapeutic gains that simultaneously challenge the oppressive rhetoric inherent in status-quo attitudes and behaviours (Etmanski, Hall, & Dawson, 2014; Freire, 1996; Kronenberg, 2005; Rempel,

2017). This thesis provides an example of how therapists working in an emerging setting can implement PAR methods.

Daily Life and Community Integration from the Perspective of Criminalized Men in the Community

Perspectives of people with a criminal record exist on the margins. They are not consulted for the development, implementation or evaluation of offender rehabilitation programs or services meant to prepare them for community re-entry. Measures of effectiveness of the criminal justice system are reduced to statistics of recidivism, a concrete approach in an attempt to represent the complexities and heterogeneity of community integration. As co-researchers in a PAR project, a group of men shared first-hand accounts about daily life with criminal records.

Realities of incarceration. The realities of incarceration and the impact that time spent on the inside had on the co-researchers' daily lives in the community emerged through critical group discussion. Their memories of time spent inside correctional institutions remained vivid. Stories of humiliation that challenged their dignity were common including strip searches, physical beatings, authority figures violating confidentiality by contacting their family and friends for information following arrests, having mug-shots taken strategically after 12-48 hours of 'processing' resulting in no sleep, and lawyers coercing them to accept a plea deal prior to a fair trial. These experiences, among others, resulted in a lack of trust of authority figures, people they once thought of as friends or family and

of the system in general. While working through trauma and lack of trust incurred as a result of being incarcerated is important, so are efforts at systemic change, for without it, people will continue to be damaged by existing infrastructure intended to ‘rehabilitate’. Understanding that community integration and recovery from incarceration occur along a continuum, individualized interventions will be required to help some people develop the capacity to engage in the work required for social change while opportunities for broader or systemic action should be within reach.

The co-researchers felt abandoned by the current system, rarely experiencing services that provided what they claimed to provide and often being blamed for their own situations. Additional ‘to-do’ lists that accompany probation or parole such as attending counselling, ceasing substance use, staying out of certain neighbourhoods and reporting weekly to an officer do not provide them with tools or resources to overcome the challenges of substance use or to be able to pay for public transportation required to meet these demands. Finding work as a newly-released person that would allow for weekly time off to report to a probation or parole officer is likely one of the reasons why there is no evidence that probation/parole reduces recidivism (Sapers, 2017). However, stigma and discrimination such as limits on when and where a person can travel, the kind of work they can do, where they can volunteer, what they can study or how someone sees themselves extends well beyond the completion of a sentence or

parole/probation. The reality of incarceration is that a criminal record is a life-time punishment.

The cards you are dealt. The central theme of the co-researchers' final display is a metaphor for the different types of life experiences that people have. Playing cards represent pieces of information dealt by dealers, people who are in positions of power and who enforce the rules of the game. For example, parole officers, correctional officers, judges, lawyers or social assistance workers may deal the cards. Choices are made based on the cards (information) in a person's hand, what they have to lose, their skill and experience, who else is at the table and the stage of the game. There are no guarantees in the game of life and while someone might start out with a golden hand, it does not mean they will not end up at the bottom [of society]. Similarly, someone with a poor hand can play the game or strike some luck that helps them come out better than when they started. As a service provider, the information that I share about community resources or programs may impact how someone judges their situation and therefore the decisions they make. This metaphor positions crime as a card, an option that is played within the context of the game. For example, was crime the last card in a person's hand because they exhausted all other options? Did the individual play the card out of greed or impulse? Was there an alternative path in the game that the player of which he was not aware or that no one told him about?

What is less clear in the metaphor are the discussions that occurred concerning how people with more social and economic resources have privileges that afford them different rules. The image of a casino comes to mind with tables that represent social hierarchies. Buy-ins are different for each table and almost anyone who presents themselves must pay the fee to participate. In life, this fee might be financial but it could also be with whom you are socially connected, whether you have positive references, your reputation, job experience, education or credentials. In a competitive, neo-liberal climate, the hardships a person has endured do not result in a 'buy-in discount' and the reasons behind whether someone can pay the 'fee' rarely matter. Regardless of social conditions or the reasons for crime, men with criminal records are often seen as being responsible for their actions and therefore their situations. How many times does someone lose out on an opportunity (a hand) before they give up hope and play their cards with a different tactic (e.g., crime)? What needs to happen for men with criminal records to have a second chance? Considering how people with a criminal record have paid their dues according to the system that exists, why is it fair to subject them to a life-time of scrutiny and judgment? Constantly having to prove oneself, beg for opportunities and jump through administrative hoops becomes a daily norm that someone at a different table, that is without a criminal record, does not have to think about.

Privilege. Oppression is experienced as a result of complex interactions between hierarchical, interlocking systems that ultimately rely on one another to perpetuate power and privilege of some groups over others (Fellows & Razack, 1998). For example, the co-researchers were clear that they felt excluded and that previous experiences in children's aid, substance use, physical and emotional abuse, poverty, institutionalization, violence and, exclusion from participation in everyday life did not make them feel privileged. However, the reality that the co-researchers did not have to justify their religious beliefs, their sexual orientation or their entitlement to certain benefits (e.g., ability to apply for social assistance) was not clearly articulated. Therefore, while the co-researchers experience oppression as men with a criminal record, they simultaneously benefitted from privileges that accompany the status of a white, heterosexual, Canadian male with Christian beliefs which positions them as potential oppressors. The potential for oppression by the co-researchers was exemplified through group discussions that demonstrated a lack of insight about struggles a Syrian refugee might encounter when coming to Canada and reasons for having financial and housing systems in place for their arrival. Realities of immigration such as having to earn enough money to pay back immigration loans when you do not speak English or your educational degree is not recognized in Canada were omitted from such discussions (Government of Canada, 2018).

This master's research leaves questions about the co-researchers' level of awareness about how their social location provides them privileges or opportunities to dominate others unanswered. Future research may be required to understand how beliefs developed while incarcerated may impact a person's ability to recognize the role they play in the oppression of others. For example, how do systems of trust between inmates within correctional institutions that are based on race (e.g, white supremacy gangs, black gangs, 'mexican mafia', etcetera), contribute to the development of beliefs that categorize others based on external characteristics (e.g., skin colour)? Also, if making assumptions about another person as a result of their race is normalized, does a white male understand their behaviour as oppression? How can men such as the co-researchers in this study work towards their own emancipation while some of their actions contribute to systems of oppression that, because they are interlocked, can not be individually dismantled (Fellows & Razack, 1998)?

Challenging masculinities. Stigma and discrimination label men with criminal records as violent, dangerous or untrustworthy, often claiming that these characteristics are what led to them committing crimes in the first place. However, when crime is viewed as a card in a hand, the belief that male 'criminals' are too aggressive for society becomes challenged. As a card, crime becomes a resource, a piece of information used to survive, the consequences of which then exclude people from mainstream society. In the absence of other

resources such as formal education, employment, social networks or references, doing crime becomes a way to take up the role of bread-winner, establish oneself in a community, build a reputation or a resumé and gain power and status.

Violence becomes a strategy to get a job done in the same way that politics are used by people in power to negotiate their own terms and deals. The men's performances of masculinity while incarcerated may be considered hegemonic, an ideal performance contributing to survival and well-being. However, in the community these same performances may act as a source for oppression and increase the risk of recidivism. As a result, learned or perpetuated masculinities while incarcerated may be understood as toxic and directly counter-acting efforts at community integration.

Hope for something different, a desire for social change, valuing caring for others, connecting with their own spirituality and other community members were all parts of the co-researchers' stories that contradicted behavioural labels of violence and aggression. What was less clear to the co-researchers was how they were supposed to assert themselves and be heard in spite of oppressive systems that label them as people in need of intervention instead of people with something to say. Being caring, compassionate and thoughtful was part of their identities, drawing attention to how anger and frustration by being brushed off or perceived as deviant would be natural responses. Photovoice was, therefore, a platform for the men to learn new skills to be heard and ask for change in ways that they may

not have felt comfortable doing in the past. Sharing their narratives in the community is one way to reduce stigma for men who have been incarcerated and to advocate without the use of violence.

Tensions in Emerging Occupational Therapy Practice

Emerging OT placements for students are seen as an educational tool and a necessary “risk for the development of OT” practice (Cooper & Raine, 2009, p. 1). However, adhering to expectations of evidence-based practice (EBP) was challenged in a field where literature was scarce and support from regulatory bodies and professional associations was limited. I was caught in a space where a call for research and OT practice with people with a criminal record in the community (Dieleman & Steggles, 2013) meant that regulatory bodies also did not have research to draw on and had not yet conceptualized what this emerging setting might look. Applying “best practice” in the way I had learned to do was difficult and the lack of resources made me question my status as an evidence-based practitioner. However, these tensions simultaneously pushed me to learn about and apply other guiding frameworks. A critical social science course examining approaches to community-based research (CBR) provided me with insights on how to offer OT with marginalized populations, and helped me understand how the scarcity of published research can equally be viewed as an opportunity to not just create new knowledge but challenge existing structures that may not have allowed for certain knowledge to be produced. Principles of CBR

helped me understand what emancipatory OT practice might look like and ultimately informed the framework for my master's thesis. CBR principles outlined in Appendix A (Israel et al., 1998) were criteria that helped me make ethical and procedural decisions about the research and my day-to-day practice.

In addition to navigating limited research and regulatory body support, staying true to CBR principles came with its own challenges, and CBR alone is not an elixir to eradicate inequities in research. For example, the principle that *CBR involves a long-term process and commitment* seeks to avoid situations where researchers mine data for their work and then disappear. Ideally, then, relationships with communities must exist prior to research being introduced and persist long after project completion. In the context of a master's thesis, this principle becomes problematic. For one, a master's degree is rarely more than two years, half of which is spent taking courses and developing a proposal. Next, once a degree is complete, the student is not often in a position to continue these working relationships with community groups. For instance, finding paid work to support oneself, needing to re-locate to continue with academia (e.g., a PhD) or being cut off from post-secondary institutional resources makes it difficult to maintain relationships with communities after project completion. Despite helping the co-researchers publish a pdf/book (McKittrick et al., 2017), disseminating the book to key partners, organizing community presentations and lectures to graduate students, and ensuring co-researchers' contributions are recognized

through co-authorship, the question of how *long is long enough* is not one that I can answer. Is a relationship ever over? How can I reconcile the guilt that I have as a result of applying for PhD programs and feeling like I am abandoning the men who already feel abandoned? In addition, being a master's student meant that I had access to limited funding to compensate the co-researchers in a manner that I considered fair (e.g., paid wages).

Another prominent tension was a result of workplace politics in which my beliefs about how to promote opportunities for community integration differed from those of my superiors. Without support from my employer, I recruited volunteers outside of my workplace (e.g., volunteer student occupational therapist) and wrote grants to make the project possible. When the project was finishing, my employer communicated with my academic supervisor and the ethics board stating that I did not have permission to use the data from the Photovoice project and the intellectual property belonged to the organization, despite prior written permission being granted. I draw attention to these aspects of my experience to be honest about the political nature of research engagement. My employer did not seem to appreciate the benefit of creating space for the co-researchers (their “clients”) to have voices and how this research could advance the organization's ability to advocate for further funding. Therefore, by taking up a dual role as a clinician-researcher, I may have inadvertently contributed to

increased tensions at my workplace that terminated the clinical relationships I had with the co-researchers.

Anti-Oppressive Occupational Therapy Practice

Theories grounded in social justice guided my understanding and implementations of current OT theory and models in ways that were anti-oppressive. Paulo Freire's *Pedagogy of the Oppressed* (1996), Archive Theory (Merewether, 2007), Everyday Life theory (Highmore, 2002) and post-modernism (Moose-Mitha, 2005) drew my attention to how everyday actions linked to being an occupational therapist can perpetuate systemic injustices by silencing the voices of people that I intended to 'help'. Over-valuing archives of research evidence can limit how much autonomy an individual has regarding their own therapy, effectively suppressing the voices and knowledge of people who could have otherwise co-created alternative understandings and courses of action to increase their quality of life. Archives of existing evidence that document everyday life of a clinician through a medical, individualistic lens also limit the types of settings in which occupational therapists are publicly funded. For example, funding models that pay for services supported by existing research evidence reduces OT to a finite number of practice contexts, a limited number of 'truths' that are most often found in established institutions of care. Therefore, anti-oppressive OT practice must also include challenging mainstream structures

such as funding models or evidence hierarchies that make it difficult for therapists to work alongside the oppressed and effect change in contexts that vary from traditional medical settings.

Advocacy. Advocacy is a natural part of anti-oppressive practice and requires the service provider to take the side of people experiencing oppression (Rempel, 2017). With the goal of bringing about change, advocacy can be targeted towards individuals, families, groups, communities or societies (Townsend & Polatajko, 2013). The push for change generally means that there are situations where some people are experiencing injustice, inequality and decreased accessibility in comparison to another group. Therefore, advocacy is also political, requiring an ability to construct arguments that *convince* people with increased social mobility, privilege and power to make changes to systems from which they are currently benefitting. This is not a task for the faint of heart and as exemplified through my own experience, it cannot be done by one person. Solidarity among clinicians, regulatory bodies, educational institutions, academics and institutions/organizations who hire workers is required for organized and meaningful approaches to anti-oppressive practice. For example, organizations that hire occupational therapists need to understand and respect regulatory body requirements that may impact the clinician’s administrative load. It becomes the responsibility of the occupational therapist to be transparent about these requirements and educate one’s employer in the hopes of the employee-employer

banding together to provide feedback to regulatory bodies about how certain bureaucracies make it difficult for therapists to effect meaningful change.

Solidarity. Various stakeholders often have different roles. For example, therapists deliver therapy, regulatory bodies create and enforce policies and guidelines intended to safeguard the public, and educational institutions create research evidence that may guide action of both these parties. However, when roles are considered distinct from one another, a divide in responsibilities can create dichotomous relationships and perceptions of difference that impede unified action towards establishing anti-oppressive practice. With increasing demands on occupational therapists to complete administrative tasks, less time and energy can be dedicated to engagement in practice, and surveillance over a clinician's adherence to rules becomes prioritized over critiquing how rules align with core OT constructs of justice and equality. Similar relationships can exist between employers and employees (therapists), where human resource departments and levels of management focus on monitoring employee relations and enforcing layers of bureaucracy needed to make simple changes instead of trusting and making it easier for therapists to engage in the clinical reasoning process in which they were trained. These dichotomies such as clinician-management/regulatory bodies, clinician-patient, professional-client or expert-layperson extend power differentials to the micro-interactions that occur within a therapy or group session. Because occupational therapists are expected to consult

various sources to assess and design interventions that can be measured, tensions and anxieties can be experienced when there is a desire to stray away from mainstream understandings of best practice, even if the environment does not have the resources to support it. As a result, sources of authority that make up and define what occupational therapists are supposed to do simultaneously make it difficult for therapists to challenge oppressive systems and engage with the oppressed in emancipatory actions that may also not align with the “best” available evidence.

Implications for Stakeholders

While any steps towards eradicating oppression are encouraged, recommendations that clarify roles for different groups of stakeholders is important for collaborative and widespread systemic change (Holmes & Scaffa, 2009b). The following recommendations are made based on the results of this master’s work and reflections on my experience working alongside men with criminal records. Some of these suggestions and approaches may be transferable to other disciplines of practice and study.

Occupational Therapy Students

Seeking out opportunities for alternative forms of education such as an emerging placement or applying OT theories while shadowing a variety of professionals can increase a student’s exposure to different opportunities for

practice. Identifying a system as a client when completing assignments or projects can help develop advocacy skills needed for anti-oppressive approaches to OT practice. Recognizing that existing literature, models and theories are only part of the story, it becomes important to also consider what is missing from these sources of information as a way to identify how simple acceptance of mainstream knowledge contributes to oppression, even if it is unintentional. For example, considering population-level statistics around incarceration in addition to stories of lived experience as key pieces of evidence can help student occupational therapists understand how current policies and guidelines are impacting the lives of people who have been through the criminal justice system identifying systemic targets for intervention. This last point would also apply to anyone (clinicians, academics) interested in developing programs or undertaking research that targets systems level issues.

Clinicians

Embracing social theories and advocacy as topics for professional development can enhance practice while also documenting diverse approaches to OT with regulatory colleges. Documenting social, political, economic and institutional barriers in client files can bring attention to how these structures impact clients' lives and/or initiate discussion about social determinants among

team members. These are skills that may also be passed on to students on placement to encourage approaches that include a social lens.

Networking with like-minded colleagues, communities of practice or community organizations to consider how partnerships can distribute resources between healthcare institutions and the community can help develop emerging areas of practice and extend OT services. Understanding the political nature of emerging practice contexts such as competition for funding, community members who may not always be welcoming of a “professional” entering their domain or differences in work styles may require additional training in conflict management skills. Collaboratively documenting the nature of community partnerships, responsibilities, obligations and shared goals/visions can be a helpful exercise to establish a positive relationship while also serving as a reminder to all members about what drew the group together in the first place.

Academic and Educational Institutions

Academic and educational institutions are responsible for designing programs and curricula to meet regulatory standards for the education of student OTs. Therefore, they have the power to include or exclude various types of assignments, topics, workshops, experiences and readings that shape a student’s learning. Opportunities to learn about and also engage in grant-writing, searching for funding (similar to learning search strategies for academic literature), creating

plans for social enterprises or non-governmental organizations, the critique and application of policy analysis frameworks (similar to best practice guidelines) and presentation skills can equip occupational therapists to be leaders and socially conscious entrepreneurs. Education that includes knowledge and skills needed to work independently and advance anti-oppressive practice can prepare occupational therapists to be self-sustainable in an employment climate that is competitive and precarious.

Embracing and engaging in participatory research methods can extend the client-centered nature of OT practice into OT research while also incorporating new and diverse knowledge into established theories and models that inform clinical practice. Grant-writing that requires the identification of gaps in order to secure funding for research should incorporate a population's strengths to avoid communicating gaps as dismal situations and acknowledge the skills and abilities of research participants, and as potential assets whose active engagement in research may meet in-kind resources needs, and meaningfully contribute to the research processes and outcomes.

Occupational Therapy Organizations

Acknowledging emerging areas of practice in position statements, guides and policies that extend beyond the supervision of students on placements is an important step to realizing the potential of OT with marginalized populations.

Including a broader number of categorical options for areas of practice for registered occupational therapists that expand beyond institutional settings such as population health, non-governmental organizations or the criminal justice system can help regulatory bodies understand where *all* occupational therapists are working and identify priority areas for funding and research. Encouraging feedback from practicing occupational therapists from all practice areas and settings about how current protocols may contribute to or negate their ability to provide services in a meaningful way can help make guidelines more accessible. With a mandate for ‘meaningful services’ *as a part of* ‘public protection,’ regulatory bodies can broaden their focus from monitoring occupational therapists to ensure they ‘do no harm’, to gathering information that helps understand the essential components of practice that can increase client satisfaction. If people who work with occupational therapists are satisfied in addition to being aware of their rights, investing in resources to reduce liability may no longer need to be a priority.

Advocating to the government about the role of occupational therapists working in a diverse range of settings can help secure funding for services that exist outside of current healthcare institutions creating space for diversity in practice. Establishing funds for anti-oppressive research as part of the Canadian Occupational Therapy Foundation, would provide opportunities to complete meaningful participatory projects that challenge oppressive structures.

Strengths and Limitations

Strengths

Strengths of the Photovoice study include the methods where data collection, analysis and knowledge dissemination strategies were collaboratively decided upon with the co-researchers, ensuring their control and voice to express their stories *and* about how it is presented and shared. This collaborative and flexible approach encouraged different types of engagement from the co-researchers, creating an inclusive environment that built on their inherent strengths. As a result, individual and collective growth occurred in addition to reaching the objectives of the study. Community partnerships were strengthened through this work and the co-researchers are now able to list volunteer opportunities, a published work and a successful grant to their personal and professional resumés for future job searches. Additionally, the co-researchers shifted from asking the primary author to make community connections and presentations to taking the spotlight in a lecture delivered to graduate students. The production of a pdf/book means that the co-researchers' work can be referenced in different social arenas such as academic publications so that their message can continue to be shared.

Pre-existing relationships that were reciprocal and respectful between the occupational therapist and the men set the stage for this project to happen in a way that aligned closely to CBR principles. Therefore, this type of work may be

possible for other master's students who have previously developed relationships with marginalized populations or who start to develop them early on in their degree (e.g., prior to writing their thesis protocol). However, no matter what the length of time of a master's project, considerations of how CBR principles can inform research is a step toward anti-oppressive practices. For clinicians working with marginalized populations, Photovoice is an evidence-informed approach that can therefore be justified as a way to 'do' OT in emerging settings.

The use of AE as a research method brings the role of advocacy to the fore in an anti-oppressive way to practice OT with men who have been incarcerated, while also addressing gaps in the literature. As an analytic method that encourages personal reflection, writing as a method of inquiry helped me work through and understand my own values and beliefs about EBP, OT and working with people affected by the criminal justice system.

Limitations

Despite the primary author's focus and intent on employing methods designed to provide the men with control over the research process, her position as an 'expert' in research methods makes it difficult to erase relationships that may contribute to power imbalances. For instance, the inclusion of the men as co-authors on the second chapter was a decision that was made during a supervisory committee meeting. Therefore, to classify the men's efforts and contributions in

the publishing processes as sufficient enough to warrant co-authorship was a choice made by people with more power and control over the end result.

Examples of increased attendance at community presentations, increased authenticity in group discussions where emotions were laid bare and increased willingness of co-researchers to hear the perspectives of others in the group are the observations that may show the men have developed confidence in sharing their experience and making their voices heard. However, the individual and collective growth of the co-researchers was observed directly by the primary author without the collection of formal outcome measures.

The impact of the criminal justice system extends beyond the individual who is incarcerated. However, friends, family and communities surrounding individuals who are or have been incarcerated were not included in this study therefore limiting insights to an individualistic perspective. Group discussions indicated that some systems of oppression were more readily accepted by the co-researchers than others, directly impacting their perspectives and experiences of daily life with a criminal record. However, this master's thesis does not provide information about reasons why men with a criminal record might fail to recognize or take up some sources of oppression over others. Similarly, this study focused on the lived experience of men with a criminal record; women, members of the LGBTQ community and other people whose voices are also suppressed, were not included in this work.

Concrete action plans about how the results of the Photovoice project may inform future policies and services was not examined. For example, while a need for “a fair shake” (Co-researcher) was stated as having access to housing, employment and removing institutional barriers that accompany a criminal record, further research is required to understand how policies can be changed and services can be developed to effectively address these needs. Finally, the political nature of this work means that people who take up an anti-oppressive or socially just stance may be putting their own job security at risk, making it difficult to make progress towards liberation work with clients. Further research about how to engage in anti-oppressive practices in a mutually constructive manner may be warranted.

The definition of emerging OT practice used in this master’s thesis may exclude some practitioners who identify as working in an emerging setting. This group may include clinicians: (1) working under a different title but who were trained as occupational therapists; (2) working within an established healthcare institution but have role-enhancing responsibilities that extend beyond the institution; or (3) who may not have a body of evidence supporting their work. As a result, the conclusions and implications of this thesis may not apply to all occupational therapists who identify as working in an emerging setting.

Future Research

Because correctional facilities are gendered institutions, operating and perpetuating gender binaries and heterosexual norms, future research that focuses on understanding how people with a non-binary gender identity navigate and are impacted by the criminal justice system is warranted. Future research about the transition from correctional institutions to the community should involve people with a criminal record to contribute to and/or challenge mainstream understandings of factors that contribute to desistance from crime. Adhering to CBR principles enhances reciprocity and helps to avoid further suppression of people who are in marginalized groups when they are excluded from data analysis. Involving co-researchers from diverse backgrounds may increase understandings about interlocking systems of oppression from the perspective of people with a criminal record.

To expand research evidence and practice guidelines applicable to OT practice in emerging settings, research about guiding theories, frameworks and practice processes in addition to core skills for emerging settings (e.g., advocacy, entrepreneur, understanding of politics) is needed. Developing ways to incorporate core skills learning into educational curricula remains another area for future research. Finally, occupation-focused research and practice that guides OT work outside of a medical model can help expand the profession while also

advocating for third-party funding models so that occupational therapists have resources that support anti-oppressive work.

Conclusion

This thesis contributes knowledge about emerging OT practice with men transitioning to the community post-incarceration. Paying attention to tensions in emerging settings and daily life from the perspective of criminalized men brings the voices of people with lived experience to the fore. This work also contributes to literature that recognizes a need for alternatives to incarceration by building evidence for the damage that penal institutions cause, regardless of one's background or identity, including men labelled as "violent and aggressive". By working together for a common goal, liberation from oppressive systems, various levels of stakeholders can take action that builds collaborative efforts together to work towards a more just society.

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Appendices

Appendix A

CBR principles and modifications, (Israel et al., 1998)

Principle	Description	Modification
Recognize Community as a unit of identity	Communities are marked by a sense of connection, common interests, systems and shared values, norms and influence.	Developing an understanding of community was a goal of this work. The co-researchers involved shared a connection and certain markers of similarity which was the essence of their lived experience. However, understanding how identity can be developed (or re-developed) through community work was a large part of this work.
Builds on strengths and resources in the community	Existing relationships, abilities of community members, common/shared spaces, and willingness to create new partnerships.	The primary author entered with knowledge of strengths and resources of the community as a result of pre-existing relationships with the co-researchers. Co-researchers had a broad array of opportunities to participate in different capacities so they could build on their strengths.
Facilitates collaborative partnerships in all phases of the research	All aspects of the research project are open for participation and input from all members in ways that is equitable and builds on individual strengths.	Because time was limited, the primary author entered with a suggested research question. The co-researchers were not restricted to these suggestions and the group’s focus emerged in an iterative process. Regular meetings extending beyond initial 10 sessions were done to involve the men in the publishing of a pdf/book and in the academic publishing process.
Promotes co-learning and capacity building among	Empowering folks with knowledge and skills to promote social justice is a	No CAB was formed. The men in the group advised on the research process throughout. Because they collected the data and also participated in the group

partners	reciprocal process between the researcher, the Community Advisory Board (CAB) and the researched.	analysis, the men took up roles of co-researchers and participants interchangeably. This arrangement meant that reciprocal learning took place among all co-researchers.
Integrates and achieves a balance between research and action for the mutual benefit of all partners	Knowledge is co-created by researchers and participants with the clear goal of integrating results into community action in a way that all involved partners benefit.	The bulk of the action took place after the pre-set number of sessions that were dedicated to the Photovoice group. Therefore data collection ended while the work related to ‘action’ continued. A pdf/book to tell a narrative from the perspective of the co-researchers was created, printed and disseminated to key stakeholders. The co-researchers were identified as the authors.
Involves systems development through a cyclical and iterative process	Problem definition, learning, data collection and analysis, methodology etc. are undertaken collaboratively in a flexible manner.	The primary author suggested exploring the men’s experience of community integration. Data collection, analysis and methodology was flexible as long as it took place within the set number of sessions.
Emphasizes local relevance of problems and ecological perspectives.	Capitalizing on strengths that are present in the environment to solve local problems.	A concrete solution to local and systemic (large-scale) issues was not outlined however, recommendations to key stakeholders were made in the pdf/book. Capitalizing on existing resources to complete this project required consistent problem-solving and worked to build capacity among everyone involved by learning about what their city has to offer.
Disseminates knowledge gained to all partners and involves all partners in the	Sharing data and results within the team is essential to inform iterative analysis and action. Sharing results with	Community stakeholders outside of the co-researchers included the funders and a couple of non-profits who provided space and photography supplies. Copies of the pdf/book were disseminated to them. They were also invited to

dissemination process	members wider than those not directly involved requires input and an OK from everyone, including academic publications.	community presentations of the results of the research. Broader dissemination of the results occurred with additional community presentations, a lecture delivered by the co-researchers at a local post-secondary institution, posting of the pdf/book online and dissemination to community organizations and public libraries.
Involves a long-term process and commitment	Building relationships should happen prior to the introduction of a research project and remain long after project completion.	The primary author built on her current role in the community to initiate the Photovoice project. Once the 10 sessions for the project were complete, the primary author of this thesis continued to work with the co-researchers for an additional 10 sessions to complete the pdf/book and engage in dissemination activities.

Appendix B

Letter of Information/Consent



LETTER OF INFORMATION / CONSENT

Defining community integration post-incarceration through Photovoice

Investigators:

Local Principal Investigator:

Dr. Lori Letts
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Purpose of the Project

This project provides a chance for men with a criminal record to share their experience of community integration using photography. Men with a criminal record may experience barriers when living in the community. Stigma, discrimination and little resources may be a few. I hope to learn more about what community integration means to men with a criminal record. I also want to learn what community and integration mean to you. This research is part of a Masters Thesis and will be using a process called Photovoice.

Am I eligible to take part?

If you:

- Identify as a male
- Are currently between the ages of 18 and 64
- Have been to an all male jail or prison
- Would like to talk about what community integration means to you
- Are currently living in Hamilton, Ontario and;
- Can understand this consent form

Then you are eligible to take part in this project.

What will happen during the project?

Session 1: The first session will focus on group introductions, and learning about Photovoice. We will also talk about what community integration means to you. As a group, we will agree on what we would like to photograph. You can use your own cell phone or camera or the cameras I will provide. The goal will be to understand what Photovoice is and for you to feel comfortable with taking pictures in the community.

Sessions 2 and 3: These sessions will start with a review of the pictures you took over the week. In a group, we will talk about what the meaning behind the pictures is. All thoughts will be welcome to help understand the meaning behind the picture. Should you agree, these sessions will be audio recorded and typed. This typing is called a transcription. They are used to understand research. The main goal of these sessions is to understand the pictures you have taken and what is meaningful within them.

Session 4: This session will focus on bringing our pictures, ideas and thoughts together in a central message. The group will decide on which photographs should or should not be included. Each group member will then write 1-2 sentences under each picture that briefly explains the meaning. Help with writing these sentences will be provided if needed.

Session 5: This session will add more time to session 4 if anyone needs it. We will also spend time planning if and how the group would like to share their story. Some examples are a display at an Art Crawl or a story in the local Herald newspaper. The end project will be decided on by the group. The goal of this session is to have a plan of how we want to share our work.

Five – Ten sessions will happen weekly for 60 – 90 minutes.

What will happen with the results of this project?

How your photographs are shared will be decided by you and the group. What message we want to share and with who will help us make this decision

Because this project is part of a Masters Thesis, a research paper will be written about the project. This paper will not share any information that you do not want to share. You can ask questions about this paper throughout the project. Time in the final session will also be dedicated to talking what you would or would not like to share in this research paper.

Are there any risks to doing this project?

- You may feel anxious when taking or sharing pictures. You may also feel uncomfortable sharing thoughts and feelings about the pictures you have taken. Training will be provided to help you feel comfortable with the camera. Group discussions are confidential and you will not be judged for anything that you share.
- If you are receiving occupational therapy services, whether you decide to take part or not, occupational therapy services will not be impacted.
- You can withdraw from this project at any time with no consequences. You may also take your pictures with you and remove all comments from the transcriptions.
- You may not want to take pictures of some things for personal reasons. That is ok and you do not have to take photos of things you do not want to.
- You may not want to share certain pictures or data in the final product and still want to be part of the group. Any specific information that you do not want to include in the final product or any public presentations does not have to be shared.

Potential Benefits

- Sharing knowledge about your experiences with other community members and stakeholders may decrease stigma around men with a criminal record
- The opportunity to discuss social justice issues that impact you daily that you may not have had a chance to talk about before
- You will develop skills taking meaningful photographs
- You will develop research skills
- You will have an opportunity to organize a community event as a group as something to put on your resume
- You will have the option to request reference letters from Stephanie Zubriski regarding your participation
- You will have the chance to create positive messages about what is needed for men with a criminal record to feel part of a community
- Your messages and the community event may lead to action items for policy makers and government officials to make change
- You will be part of a positive group environment where you can learn, express yourself and create knowledge. You may also develop positive working and personal relationships

Bus tickets will be provided in each session to help you get around the community to take photos. Group bike rides using Hamilton's bikeshare, SoBi, will also be an option to get around to take photographs.

Confidentiality

The steps I am taking to protect your privacy include:

- Using pseudonyms (a nickname) for transcriptions so that what you say is not connected to you. This means that your real name will not be listed next to what you said
- Storing all paper records in a locked filing cabinet in my office during the study and then will be transferred to a locked cabinet at McMaster in the Local Primary Investigator's office. Data will be stored for 3 years before being destroyed
- Protecting all electronic audio files with passwords on a password protected computer. Data will be transferred to a USB stick after the study and stored in a locked cabinet in the Local Primary Investigator's office. Data will be destroyed after 3 years.

If as a group we decide to present the finished project to the community, you will have an option regarding whether you would like to be present or not so you can protect your privacy.

Before a research paper is published, Stephanie Zubriski will have ask all group members what they do or do not want to be included in this paper.

The only reason why any of your personal information would be shared is if there is an immediate risk to your own personal safety or the safety of someone else.

Because this is a group setting, there is a risk that group members share what is being discussed in sessions and therefore complete confidentiality can not be guaranteed.

What if I change my mind about being in the project?

It is your choice if you want to be part of the project or not. Even if you decide to be part of the project, you can decide to stop (withdraw) at any time; even after signing the consent form. If you decide to withdraw, there will be no consequences to you. If you are receiving occupational therapy services, withdrawing from the project will not impact these services. If you withdraw prior to publishing any data, you will have the choice of also removing any photographs or information from transcriptions. Anything you share is valuable therefore if you choose to contribute more to discussion than taking photos or vice versa, that is ok.

How do I find out what was learned in this project?

Because we will be taking photos and talking about them in a group, you will be part of creating the project results. You will also have the opportunity to be part of how this project is shared. Therefore, you will be kept up to date as the project happens. I expect to have the research paper completed by September 2017. If you would like a copy, there is an opportunity to provide your contact information on the consent form.

Questions about the Project

If you have questions or need more information about the project itself, please contact me at: zubrissa@mcmaster.ca, szubriski.thebridge@gmail.com or 905-308-2974. You can also contact Dr. Lori Letts at: letts@mcmaster.ca or 905-525-9140 ext.27816.

This project has been reviewed by the Hamilton Integrated Research Ethics Board (HiREB). The HiREB is responsible for ensuring that participants are informed of the risks associated with the research, and that participants are free to decide if participation is right for them. If you have any questions about your rights as a research participant, please call the Office of the Chair, HiREB, at 905.521.2100 x 42013.

INFORMED CONSENT

I have read this letter about a project being lead by Stephanie Zubriski of McMaster University.
I have had the chance to ask questions about this project. My questions have been answered as I requested.
I understand that I can withdraw from the project at any time.
I have been given a signed copy of this form.
I meet all eligibility requirements.
I agree to be contacted by my preferred contact method for scheduling and organizing purposes.
I agree to participate in the project.

I would like to receive a summary of the project's results. **Yes No**

If yes, where would you like the results sent:

1. *Email:* _____

2. *Mailing address:* _____

3. *Pick up at The Bridge (I will be notified by phone when results are available)* **Yes No**
If 'Yes', please provide your phone number: _____

Preferred contact method (circle all that apply): **Phone Email Other**

Please provide contact information if not already provided above: _____

Name of Participant (Printed) Signature Date

Consent form explained in person by:

Name and Role (Printed) Signature Date

Appendix C

Photovoice Group Session Plans

Session Plan → Session 1/5

Group Title: Photovoice

Session Title: Photovoice - Introductions

Format (90 min total):

- 5 minutes: The group leader will introduce herself and establish group norms
- 7 minutes: Define Photovoice and briefly explain it's philosophy and general process
- 5-7 minutes: Go over consent form
- 5-7 minutes: Time for questions from group members, signing of consent forms
- *10 - 13 minutes: Break and Regroup – prompt participants to think about what they would like to photograph*
- ****Start recording**
- 8 minutes: Ice breaker – Go around the room and talk about what it was that attracted them to this project. What made them want to be here today?
- 20 minutes: Discuss what the group would like to photograph (e.g. shared critical consciousness), what they might want to achieve and/or change and confirm photograph assignment
- 5-10 minutes: Go over camera equipment and how to respect people in the community when taking photographs. Discuss the power behind the camera as a surveillance and documentation tool. Answer questions about how to use the cameras as applicable.
- 14 minutes: Wrap-up – Review key learning points and restate photo assignment. Thank the group, provide bus tickets for participating and confirm next meeting date.

Supplies: Flipchart and markers, pens and notepads, copies of consent form, photovoice consent to take pictures form, photovoice toolkit, feedback sheet, bus tickets, audio recorder

Description

1. Introduction
 - The group leader will introduce herself and how she is connected with this project
 - Review flipchart with pre-written “goals of photovoice” as per Wang and Burris (1997). Have a discussion about what these goals might look like to explain the philosophy and general process (as part of the consent)
 - Review and sign the consent form while providing time for questions
2. Activity
 - Break and Regroup
 - Icebreaker
3. Sharing, Generalizing and Processing
 - What drew them to this group (icebreaker)
 - What they want to photograph
4. Application
 - Apply discussion in intro re: goals of Photovoice to what the group might want to achieve
 - Apply discussions of community integration to potential photograph assignments
 - Apply their photograph assignment to how it might achieve or work towards social change
5. Summary
 - Review key learning points
 - Restate photo assignment
 - Hand out bus tickets
 - Ask for feedback (more of, less of, stop doing, start doing) verbally and/or pass around a sheet where people can write things down for confidentiality

Photovoice Session One Outline: Introductions

Time	Action	Materials
00:00 – 00:05	Introduce myself go over general group norms to establish respect	Flip chart and markers
00:05 – 00:12	Define Photovoice and briefly explain its philosophy and general process	Flip chart and markers
00:12 – 00:19	Review and explain consent form	Consent forms
00:20 – 00:27	Provide time for questions about the consent form and signing of forms. Review group norms if needed to modify or add things	Consent forms (2 for each participant; a copy for me and a copy for them) Flip chart and markers
00:27 – 00:37	Break and Regroup	None
3 minute buffer post-break		
00:40 – 00:48	Icebreaker	Audio recorder
00:48 – 00:68	Start to develop a shared critical consciousness and a photograph assignment	Flipchart and markers, pens and notepads
00:68 – 00:76	Review photovoice toolkit, ethics of photography. Answer technical and ethical questions as needed	Photovoice toolkit, Photovoice consent to take pictures form
00:76 – 00:90	Wrap-up – Review key learning points and restate photo assignment. Thank the group, provide bus tickets for participating and confirm next meeting date.	Flipchart and markers, foursquare feedback sheet, bus tickets

Session Plan → Session 2/5

Group Title: Photovoice

Session Title: Photovoice – Exploring Photographs

Format (60 - 90 min total):

- 8-10 minutes: The group leader will welcome everyone and provide some time for the men to get settled in/general chit-chat and thank participants for returning. Start the recorder at this stage
- 8-10 minutes: The group leader will review the photograph assignment/topic to start a discussion about how the past week went (e.g. feedback, barriers, what went well, outcomes)
- 15 – 27 minutes: Review the pictures that were taken the previous week using the VOICE acronym to help get at the meanings behind each photograph for the person that took them and for the group
- *10 - 13 minutes: Break and Regroup – prompt participants to think if they would like the same or a different photo assignment*
- 10 minutes: Review key points from VOICE discussion and determine if group would like to stick with same photo assignment or create a different assignment that looks at the issue from a different angle
- 5 minutes: Wrap-up – Restate photo assignment, thank the group for participating, provide bus tickets and confirm next meeting date.

Supplies: Flipchart and markers, pens and notepads, computer (laptop), USB stick, projector, photograph printer, photovoice toolkit, feedback sheet, bus tickets, audio recorder

Description

6. Introduction
 - The group leader will welcome participants back
 - Space will be created for general chit-chat, getting food/coffee, etc.
 - The group leader will remind participants that the session will be recorded

7. Activity
 - Break and Regroup
 - Ask for a verbal 1-2 sentence description of their presented photographs from each participant during sharing circle

8. Sharing, Generalizing and Processing
 - Review past photograph assignment to discuss what went well, what were the barriers and the outcomes and if there is any general feedback
 - Sharing using VOICE acronym that links photos to an individual and to others

9. Application
 - Apply what was shared to the photo assignment that informed today’s photos
 - Apply their photograph assignment to how it might achieve or work towards social change
 - Discuss value of keeping same or changing the photograph assignment

10. Summary
 - Restate/confirm photo assignment
 - Hand out bus tickets
 - Confirm next meeting date
 - Ask for feedback (more of, less of, stop doing, start doing) verbally and/or pass around a sheet where people can write things down for confidentiality

Photovoice Session Two-Three Outline: Exploring Photographs

Time	Action	Materials
00:00 – 00:10	Welcome and thank you. Remind participants that I will be recording the session	Audio recorder
00:10 – 00:20	Review photo assignment and have a discussion about how the week went. Review group norms for any changes if needed.	Flip chart and markers
00:20 – 00:47	Review photos using VOICE (voicing our independent and collective experience) Allow for 1-3 photos from each person where 1 photo is presented at a time and we go around the circle to allow for everyone to have a chance to share.	Flip chart, markers, computer, printer, projector, notepads, pens
00:47 – 00:57	Break and Regroup <i>Prompt participants to think if they would like</i>	None

	<i>the same or a different photo assignment</i>	
3 minute buffer post-break		
00:60 – 00:70	Review key points, discuss value of keeping same or changing photo assignment	Flip chart, markers
00:70 – 00:75	Wrap-up – Restate photo assignment. Thank the group, provide bus tickets for participating and confirm next meeting date.	Flipchart and markers, foursquare feedback sheet, copies of community consent forms, bus tickets

**For wrap-up on session 3 (aka: the final session before final photos are taken and captions are created), also be clear that the purpose of taking photos for the next week is just to have one last ‘shot’ at getting the ‘right’ photo or if you feel you missed anything.

Session Plan → Session 3/5

Group Title: Photovoice

Session Title: Photovoice – Exploring Photographs

Format (60 - 90 min total):

- 8-10 minutes: The group leader will welcome everyone and provide some time for the men to get settled in/general chit-chat and thank participants for returning. Start the recorder at this stage
- 8-10 minutes: The group leader will review the photograph assignment/topic to start a discussion about how the past week went (e.g. feedback, barriers, what went well, outcomes)
- 15 – 27 minutes: Review the pictures that were taken the previous week using the VOICE acronym to help get at the meanings behind each photograph for the person that took them and for the group
- *10 - 13 minutes: Break and Regroup – prompt participants to think if they would like the same or a different photo assignment*
- 10 minutes: Review key points from VOICE discussion and determine if group would like to stick with same photo assignment or create a different assignment that looks at the issue from a different angle
- 5 minutes: Wrap-up – Restate photo assignment, thank the group for participating, provide bus tickets and confirm next meeting date.

Supplies: Flipchart and markers, pens and notepads, computer (laptop), USB stick, projector, photograph printer, photovoice toolkit, feedback sheet, bus tickets, audio recorder

Description

11. Introduction

- The group leader will welcome participants back
- Space will be created for general chit-chat, getting food/coffee, etc.
- The group leader will remind participants that the session will be recorded

12. Activity

- Break and Regroup
- Ask for a verbal 1-2 sentence description of their presented photographs from each participant during sharing circle

13. Sharing, Generalizing and Processing

- Review past photograph assignment to discuss what went well, what were the barriers and the outcomes and if there is any general feedback
- Sharing using VOICE acronym that links photos to an individual and to others

14. Application

- Apply what was shared to the photo assignment that informed today’s photos
- Apply their photograph assignment to how it might achieve or work towards social change
- Discuss value of keeping same or changing the photograph assignment

15. Summary

- Restate/confirm photo assignment
- Hand out bus tickets
- Confirm next meeting date
- Ask for feedback (more of, less of, stop doing, start doing) verbally and/or pass around a sheet where people can write things down for confidentiality

Photovoice Session Two-Three Outline: Exploring Photographs

Time	Action	Materials
00:00 – 00:10	Welcome and thank you. Remind participants that I will be recording the session	Audio recorder
00:10 – 00:20	Review photo assignment and have a discussion about how the week went. Review group norms for any changes if needed.	Flip chart and markers
00:20 – 00:47	Review photos using VOICE (voicing our independent and collective experience) Allow for 1-3 photos from each person where 1 photo is presented at a time and we go around the circle to allow for everyone to have a chance to share.	Flip chart, markers, computer, printer, projector, notepads, pens
00:47 – 00:57	Break and Regroup <i>Prompt participants to think if they would like</i>	None

	<i>the same or a different photo assignment</i>	
3 minute buffer post-break		
00:60 – 00:70	Review key points, discuss value of keeping same or changing photo assignment	Flip chart, markers
00:70 – 00:75	Wrap-up – Restate photo assignment. Thank the group, provide bus tickets for participating and confirm next meeting date.	Flipchart and markers, foursquare feedback sheet, copies of community consent forms, bus tickets

**For wrap-up on session 3 (aka: the final session before final photos are taken and captions are created), also be clear that the purpose of taking photos for the next week is just to have one last 'shot' at getting the 'right' photo or if you feel you missed anything.

Session Plan → Session 4/5

Group Title: Photovoice

Session Title: Photovoice – Final Steps

Format (60 - 90 min total):

- 8-10 minutes: The group facilitator will welcome everyone and provide some time for the men to get settled in/general chit-chat, get food and thank participants for returning. Start the recorder at this stage
- 8-10 minutes: The group facilitator will review the photograph assignment/topic to start a discussion about how the past week went (e.g. feedback, barriers, what went well, outcomes)
- 10 – 20 minutes: As needed → review the pictures that were taken the previous (and final) week using the VOICE acronym and link to previous week's discussions to come up with themes/main ideas
- *10 - 13 minutes: Break and Regroup – prompt participants to think about what photos they would like to keep in a final product based on the themes/main ideas*
- 22 minutes: Provide time for participants to write captions (1-2 sentences) that explain what is going on in the photo and what it means to them
- 5 minutes: Wrap-up – Restate photo assignment, thank the group for participating, provide bus tickets and confirm next meeting date.

Supplies: Flipchart and markers, pens and notepads, sticky notes, computer (laptop), USB stick, projector, photograph printer, photovoice toolkit, feedback sheet, bus tickets, audio recorder

Description

16. Introduction

- The group facilitator will welcome participants back
- Space will be created for general chit-chat, getting food/coffee, etc.
- The group facilitator will remind participants that the session will be recorded

17. Activity

- Break and Regroup
- Ask for a verbal 1-2 sentence description of their presented photographs from each participant during sharing circle

18. Sharing, Generalizing and Processing

- Review past photograph assignment to discuss what went well, what were the barriers and the outcomes and if there is any general feedback
- Sharing using VOICE acronym that links photos to an individual and to others

19. Application

- Apply what was shared to the photo assignment that informed today’s photos
- Apply their photograph assignment to how it might achieve or work towards social change
- Discuss value of keeping same or changing the photograph assignment

20. Summary

- Restate/confirm photo assignment
- Hand out bus tickets
- Confirm next meeting date
- Ask for feedback (more of, less of, stop doing, start doing) verbally and/or pass around a sheet where people can write things down for confidentiality

Photovoice Session Four Outline: Final Steps

Time	Action	Materials
00:00 – 00:10	Welcome and thank you. Remind participants that I will be recording the session	Audio recorder
00:10 – 00:20	Review photo assignment and have a discussion about how the week went. Review group norms for any changes if needed.	Flip chart and markers
00:20 – 00:40	Review photos using VOICE in a circle style. Link this to previous week’s discussions to come up with preliminary themes/ideas	Flip chart, markers, computer, printer, projector, notepads, pens
00:40 – 00:50	Break and Regroup <i>Prompt participants to think about what photos they would like to keep in a final product based on the themes/main ideas</i>	None

3 minute buffer post-break		
00:53 – 00:75	Write 1-2 sentences for each photograph that is going to be included in the final product. The facilitator can help as requested	Pens, notepads, sticky notes
00:75 – 00:80	Wrap-up – Restate photo assignment. Thank the group, provide bus tickets for participating and confirm next meeting date.	Foursquare feedback sheet, bus tickets

**Let participants know that going forward, the goal will be to complete the captions underneath the photographs and to start planning how and where they might want to share their work. If the group members decide they need more than 1 session (e.g. 2 sessions) then that is what will happen.

**Prompt them to think about how they might want to share their photographs and with who prior to the next session

Session Plan → Session 5/5

Group Title: Photovoice

Session Title: Photovoice – Planning

Format (60 - 90 min total):

- 8 minutes: The group facilitator will welcome everyone and provide some time for the men to get settled in/general chit-chat, get food and thank participants for returning. Start the recorder at this stage
- 15 minutes: The group facilitator will provide additional time to complete photo captions as needed and ask participants to review themes/ideas from the last session.
- 15 minutes: The facilitator will ask the group for their thoughts about how they might want to share their work.
- *10 - 13 minutes: Break and Regroup – Prompt participants to pick which way they would prefer to share their work as this will determine with who and what impact they could have*
- 10 minutes: Make a group decision about a dissemination method. Make a list of people who should be involved.
- 10 minutes: Create an action plan
- 5 minutes: Wrap-up – Thank the group for participating, provide bus tickets and confirm next meeting date as applicable.

Supplies: Flipchart and markers, pens and notepads, sticky notes, photograph printer, photovoice toolkit, feedback sheet, bus tickets, audio recorder

Description

21. Introduction

- The group facilitator will welcome participants back
- Space will be created for general chit-chat, getting food/coffee, etc.
- The group facilitator will remind participants that the session will be recorded

22. Activity

- Break and Regroup
- Complete captions for photographs

23. Sharing, Generalizing and Processing

- What does this project mean to the men and how would like to share it?
- What kinds of results would be most desired for them? What is realistic?
- Sharing using VOICE acronym that links photos to an individual and to others

24. Application

- Apply their learning, dissemination method and stakeholder selections to an action plan for next steps

25. Summary

- Hand out bus tickets
- Confirm next meeting date (as applicable)
- Ask for feedback (more of, less of, stop doing, start doing) verbally and/or pass around a sheet where people can write things down for confidentiality

Photovoice Session Five Outline: Planning

Time	Action	Materials
00:00 – 00:08	Welcome and thank you. Remind participants that I will be recording the session	Audio recorder
00:08 – 00:23	Group facilitator will provide additional time to complete photo captions and ask participants to review the themes/ideas from the last session	Photos, notepads, pens, sticky notes, flipchart, markers
00:23 – 00:38	Start a group list about how they might share their work and in order to fit with social change objectives	Flipchart, markers
00:38 – 00:48	Break and Regroup <i>Prompt participants to pick which way they would prefer to share their work as this will determine with who and what impact they could have</i>	None
3 minute buffer post-break		
00:51 – 00:61	Decide on a dissemination method. Make a list of people who would be involved. This does not need to be exhaustive as we can add people	Flipchart, markers, pens, notepads

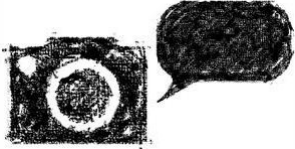
	during the next step as well.	
00:61 – 00:71	Make an action plan (make a timeline, delegate tasks, and decide if the group wants to continue to meet)	Flipchart, markers, pens, notepads
00:71 – 00:76	Wrap-up – Restate photo assignment. Thank the group, provide bus tickets for participating and confirm next meeting date.	Foursquare feedback sheet, bus tickets

*** I did not work in time to talk about my thesis and get information about what they would or would not want to be included in my work. I'm wondering if I should:

- a) Make a 6th session to continue planning and ask what they would or would not want included in my thesis
- b) Modify session 4 to have more planning so that this session can have time for talking about what they would or would not want included in my thesis

Appendix D

Recruitment Poster



Share your Story Through the Power of Photography


"A picture is worth a thousand words"
-anonymous

IF YOU
Identify as a male between the ages of 18-64
Have been in a jail or prison for men
Currently live in Hamilton
Think photography can help you share what being part of a community means to you

Photovoice uses the power of photography to make changes in a community. Men with a criminal record will be able to share their experience of living in their community. To take part, you will be asked to share your pictures with a group. The group may also plan to share their work outside of the group. There will be 5-10 group sessions that are 60 - 90 minutes long. Sessions will happen once a week with time to take photographs in between. The total number and length of group sessions will be decided by the group. Free food, cameras and bus tickets will be provided. This project is part of a research study.

**If you are interested or would like more information, please contact Stephanie Zubriski by Monday July 10, 2017 at:
(P): 905-308-2974; OR
(E): szubriski.thebridge@gmail.com**

This study has been approved by the Hamilton Integrated Research Ethics Board (HiREB)
Version – June 2, 2017



Inspiring Innovation and Discovery

Appendix E

Mental Health Resources Handout



Mental Health Resources and Services

The following mental health links and resources are provided should you require supports or services.

	Service	Description	Contact
In Hamilton and Ontario	Telehealth	Contact a Nurse in Ontario	1-866-797-0000
	Good2Talk	A free, confidential and anonymous helpline providing professional counselling and information and referrals for mental health, addictions and well-being to post-secondary students in Ontario 24/7/365.	http://www.good2talk.ca/ or phone 1-866-925-5454
	COAST	Mobile crisis outreach and support team (24/7 emergency crisis response)	905-972-8338
	St. Joseph's Healthcare Hamilton	50 Charlton Avenue East has Psychiatric Emergency Services	905-522-4941
	The Canadian Mental Health Association	Hamilton branch also provides a range of community services	http://www.cmhamilton.ca/prgramsandservices.htm
	Mood Disorders Association of Ontario	Dedicated to providing education and information for people with mood disorders, families, professional and the public concerning mood disorders.	http://www.mooddorders.ca/
	Mental Health Helpline	24/7Mental Health helpline or chat	1-866-531-2600 http://livechat.connexontario.ca/ECCChat/MHHchat.html
Online Services	Mental Health Supports in Ontario	Lists all mental health supports in Ontario	http://www.mentalhealthhelpline.ca/Search/ServiceTypes
	Self-Care Starter Kit	A neat website from the University of Buffalo that provides students with tools to help develop a self-care toolkit	http://socialwork.buffalo.edu/resources/self-care-starter-kit.html
	CASP	Canadian Association for Suicide Prevention provides information and resources aimed at reducing rates of suicide and the harmful consequences of suicidal behaviour.	http://suicideprevention.ca/
	Calm in the storm	A digital stress management tool that through clinical research has been proven to reduce stress.	http://calminthestormapp.com/home
	Mindfulness Hamilton	Many free resources on website and links to community services related to mindfulness meditation	http://mindfulnesshamilton.ca/