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Title of Report: Re-entry Mediation: Evaluating Training Processes for Facilitators Providing Reintegration Support

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EXECUTIVE SUMMARY

Previously incarcerated persons face a variety of challenges upon their release into their communities. These include difficulties finding housing and employment. The re-entry mediation program developed by Dialogue and Resolution Services (DRS) aims to provide reintegration support for previously incarcerated persons by helping them connect with family members, friends, and other supports.

As the re-entry mediation program is new to British Columbia, DRS aimed to provide facilitators with effective training that develops their skills in working with the inmate population. The project evaluates this training process and provides recommendations on how to make future training implementations more effective.

The research question that guided the project is:

*How can Dialogue and Resolution Service’s process for training re-entry mediators be made more effective in promoting positive social relationships for previously incarcerated persons in need of support?*

The objectives of the report are:

*Objective One:* To assess and make recommendations on the current training process, that will inform future training sessions for facilitators doing re-entry mediation work.

*Objective Two:* To contribute to reducing recidivism through developing training for professionals engaging in re-entry mediation work.

**Background**


Mediation is a process where an independent, neutral, third party facilitates discussion between individuals in conflict. Mediators are responsible for ensuring the mediation process is fair and confidential, that all parties are able to make decisions that are free from coercion, and that terms are co-created and acceptable to the parties. Restorative Justice (RJ) is a field of practice that focuses on repairing the harm done to victims of crime by allowing victims to speak to the impacts of the crime, and allowing perpetrators to take accountability and responsibility for harms caused to both the victim and the wider community.

Re-entry mediation integrates mediation with RJ principles, providing inmates with the opportunity to have conversations with individuals with whom they wish to re-build and maintain positive relationships. DRS’s Re-entry Mediation Program was influenced by a re-entry mediation program in Baltimore, Maryland, whose program showed decreased re-arrest rates for previously incarcerated persons.
Literature Review

The literature review provided information on challenges incarcerated persons face in custody and in community. The literature review also discussed inmate reintegration and ways to develop effective training and program designs. Literature was collected from government websites, governmental and non-governmental reports, and published journal articles. Research emerged primarily from the United States, focusing on inmates’ experiences in prison, and challenges to inmate reintegration in communities.

Common challenges experienced by inmates include emotional and physical victimization. Conditions in correctional facilities can lead to health issues and increased risk of inmates being victimized by other inmates. Previously incarcerated persons in community face challenges accessing support services, due to mental health issues, low income, and lack of community support. Having accessible support systems can decrease the challenges that previously incarcerated persons experience when reintegrating into their communities.

Conceptual Framework and Methodology

A conceptual model for the re-entry mediation training program was developed; identifying inputs, activities, outputs, outcomes, and long-term impacts of the re-entry mediation training process. This conceptual framework was used to guide the research approach. Short-term outcomes for the program included client satisfaction and community awareness of the re-entry mediation service. Mid-term outcomes discuss how the program might evolve as it becomes more supported in the community. Long-term impacts discuss broader program goals such as decreasing recidivism and creating inclusive communities for incarcerated persons suffering from multiple barriers.

This project used an evaluative research design to assess the re-entry mediation training. The research process had two phases. First, trainees completed session evaluation forms, and second, trainees who facilitated a re-entry mediation case were interviewed to assess the degree to which training prepared them for their role as facilitators. Evaluations and interview-based information were analyzed using thematic analysis. This analysis informed recommendations on how training could be made more effective.
Findings

The findings were based on training session evaluation forms and interviews with trainees. Nine training sessions were conducted, with evaluations completed at the end of each session. Evaluations provided information on the effects of additional training materials on trainees’ learning, the delivery of information, strengths and limitations of training, new learning’s and insights gained throughout training, location and space of training, and trainee feedback and appreciation. Five individuals completed semi-structured interviews. Three individuals had gone through the re-entry mediation training program, and the other two individuals were the training and program developer, and the project coordinator.

Among evaluations, trainees noted that having a mix of presentation styles was most effective for their learning. Participants appreciated opportunities to debrief materials, obtain feedback, and obtain practice experience through role-play activities. Interviewees also indicated wanting opportunities to connect with other members of the re-entry mediation team, wanting continued training opportunities, and challenges such as not knowing the scope of roles between re-entry facilitators, and re-entry coaches.

Discussion

The discussion chapter identifies commonalities and differences between the literature and the findings, and discussed whether outcomes explored in the conceptual framework were achieved. The themes included accessibility of training information to trainees, the relevance of information provided, whether safe environments were created in the training process, group cohesion, and process issues.

Both the literature and findings show that a combination of presentation styles and activities is most effective for learning, especially presentation styles incorporating personal experience. Evaluating trainees’ skillset, and incorporating role-plays into training were found to be important for skill development. The results also showed the importance of creating safe learning environments for learning. The literature identified what constitutes a safe learning environment, while the findings indicated specific aspects of the training environment that helped or hindered trainees’ learning. Respondents placed importance on incorporating breaks into sessions, and the pace of sessions. Group cohesion was addressed in both the literature and findings.

The conceptual model outlined inputs, activities, outputs, and outcomes for the re-entry mediation program. The success of outcomes outlined in the conceptual model varied. Outputs included having a supported team of trained facilitators who feel confident in their abilities, and having previously incarcerated persons feel supported in their reintegration into communities. Respondents indicated that as more case files emerge and as the program develops, facilitators’ skillset will increase as will confidence of the re-entry mediation program in the community.
Recommendations

Recommendations focused on ways to increase the effectiveness of the training DRS provided to re-entry facilitators. Recommendations were divided into three sections, trainee engagement, in-session training recommendations, and program recommendations. Each section contains short-term and long-term implementation options.

1. Trainee Engagement
   a. Provide trainees with opportunities to connect throughout the year.
   b. Provide continued education and training opportunities.
   c. Develop a Community of Practice (CoP) among re-entry workers and open to a wider network of professionals.

2. In-session Training Recommendations
   a. Develop training session outlines that can guide each training session.
   b. Link the in-session training to the additional reading materials provided to trainees.
   c. Develop trainees’ skills by incorporating more role-play opportunities in training sessions.

3. Program Recommendations
   a. Provide trainees with outlines of coaching and facilitator roles.
   b. Create resource toolkits for facilitators to provide to their clients.
   c. Have program developers meet with facilitators on case files to help identify challenges and opportunities of the re-entry mediation program.
   d. Reframe the re-entry mediation program as a program that works on a spectrum, and tier cases based on their level of complexity.
   e. Conduct a needs assessment identifying needs of previously incarcerated people reintegrating into their communities.

Conclusion

The report suggested ways re-entry mediation training could be made more effective in promoting positive social relationships for previously incarcerated persons in need of support. Ongoing training and skill development, team cohesion, and understanding of process were three primary issues identified. Increased program scope for the re-entry mediation program, and increased referrals are expected to provide the most effective measure of how best to support previously incarcerated persons in community.
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CHAPTER ONE: INTRODUCTION

In March 2015, a count of inmates in custody and those supervised in community corrections offices revealed that there are approximately 2,587 inmates across British Columbia (BC) correctional centres each day (Ministry of Justice, 2015). In BC, the recidivism rate for inmates has been increasing. Approximately 31% of inmates reoffend and return to a correctional centre within two years of their release into the community (Ministry of Public Safety and Solicitor General, 2011, p. 6). More than 60% of offenders currently in correctional centres and in community supervision are repeat offenders, and many of these offenders have been convicted of more than ten offences (Blue Ribbon Panel, 2014, p. 5).

According to Statistics Canada, in 2015/2016, across provincial and federal jurisdiction in Canada, there were approximately 40,147 adults in custody a day. Of that number, 14,742 adults were in federal custody, with the majority of remaining inmates being in provincial/territorial custody (Correctional Services Program, 2017). When taking into account offenders who are under community supervision as well, this number increases. There are approximately 104,302 offenders under community supervision in federal and provincial/territorial jurisdiction. In total, there are approximately 143,524 persons in custody and under community supervision, under federal and provincial/territorial jurisdiction (Correctional Services Program, 2017). Having high numbers of inmates and offenders can cause multiple problems and concerns, especially in provinces and communities.

Provinces, such as BC, face high costs of maintaining correctional facilities, overcrowding of these facilities, and high recidivism in the population (Office of the Auditor General of British Columbia, 2015, p. 5). Overcrowding can lead to negative consequences such as increased conflict amongst inmates and between staff and inmates, higher potential for sickness for inmates, less opportunity for rehabilitative programs to be offered and be effective, and increased rates of suicide among inmates (Office of the Auditor General of British Columbia, 2015, p. 13). These factors cause personal harm and harm to families and communities. Inmates often face multiple barriers to re-entry and re-integration into their communities. Barriers may include for example, lack of support for mental health issues, drug use and misuse, cultural marginalization, a lack of social support systems, a lack of job skills, and feelings of isolation and helplessness. The combinations of these factors, and a lack of positive social supports contributes to inmates reoffending, which in turn may lead to more harmed relationships, decreased public safety, and increased fear in communities.

Re-entry mediation is a process not previously introduced in the British Columbian context. The process involves holding facilitation or mediation sessions between inmates and their family, friends, or other important persons that inmates wish to (re)connect with. The process offers an opportunity to help inmates build social supports upon their re-entry into their communities, and build a plan for their transition out of the prison system. This in turn provides an opportunity for decreased recidivism.
Project Client

The project client is Dialogue and Resolution Services (DRS). DRS is a non-profit organization that provides mediation, arbitration, and parenting coordination services to clients. This organization also provides conflict resolution training. The organization intends to provide mediation services to inmates and individuals with whom inmates would like to (re)build more positive relationships, called re-entry mediation. Re-entry mediation programs in Baltimore, Maryland have shown success in decreasing recidivism through mediation between inmates and their families, or other important persons to the inmates (Community Mediation Maryland, 2013).

DRS’s re-entry mediation program will be offered to formerly incarcerated persons located on Vancouver Island, and will impact communities on Southern Vancouver Island, where inmates will be re-integrated. The program will have mediation sessions co-facilitated by practitioners with diverse backgrounds, typically one family mediator and one practitioner with experience working within the structure of the criminal justice system (CJS), such as a restorative justice (RJ) practitioner. This model will include RJ ideology around repairing harm done to relationships and community, and participants accepting accountability for their contribution to the conflict and developing a course for moving forward. The program will also connect inmates to community resources that will allow inmates and family members access to support for counselling, housing, employment assistance, and psycho-educational workshops.

Overall, the project is connected to three primary groups of individuals. First is the project client, DRS. Research conducted was completed for this organization. Second, are facilitators of re-entry mediation sessions who completed DRS’s re-entry mediation training process. These facilitators were the research participants of this project. Third are the re-entry mediation program’s clients, previously incarcerated persons accessing mediation services and other supports that the program offers.

Project Objectives

The purpose of the project is to evaluate the training that facilitators receive to prepare them to facilitate sessions between formerly incarcerated persons and family members.

The primary research question that guides the project is:

How can Dialogue and Resolution Service’s process for training re-entry facilitators be made more effective in promoting positive social relationships for previously incarcerated persons in need of support?

Effective training will help facilitators feel more prepared to handle high conflict and emotionally challenging sessions. Guiding principles for training include training that is trauma informed, integrates restorative and transformative practices, and provides information on facilitators developing cultural acumen.

Objective One: To assess and make recommendations on the current training process, which will inform future training sessions for individuals doing re-entry mediation work.
Objective Two: To contribute to decreasing recidivism by developing training for professionals engaging in re-entry mediation work.

Project Timeline

The re-entry mediation program was first conceptualized in May 2015, when consultations began with correctional institutions in the Greater Victoria Region, and various community organizations. DRS obtained a grant from Victoria Foundation to implement the re-entry mediation program in March 2016. Training sessions for facilitators began on July 18, 2016 and ended September 30, 2016. DRS obtained their first referral for the re-entry mediation program in September 2016. Interviews were conducted with facilitators the following year, in August 2017.

Organization of Report

This report is divided into eight chapters. Chapter two provides background information on how correctional centres operate within Canada and British Columbia. Chapter two also provides a background on key principles within the practice of mediation and RJ. The literature review in chapter three discusses the impacts of incarceration on inmates, factors leading to recidivism, and impacts of social supports and re-entry programming on recidivism. Chapter four highlights the methodology and conceptual frameworks used to conduct the interviews and develop the research. Chapter five explores the findings from evaluations and interviews conducted with facilitators. Chapter six discusses commonalities and differences between the findings and the literature. Recommendations are provided in chapter seven, on how DRS may adapt training sessions to ensure re-entry facilitators are adequately trained and informed about population specific inmate issues and facilitation specific concerns. The last chapter, chapter eight, provides a summary of the research and concludes the report.
CHAPTER TWO: BACKGROUND

The following will discuss how correctional institutions work in the Canadian and British Columbian context. It will also provide statistics, and information on trends in Canada regarding the inmate population. Lastly, it will discuss what mediation and restorative justice (RJ) practices are, and provide information on the effectiveness of re-entry mediation programs in Baltimore, Maryland.

Correctional Institutions: The British Columbian Context

Corrections fall under both federal and provincial/territorial government jurisdiction. Correctional Service of Canada (CSC) oversees the federal corrections system. The Criminal Code of Canada (1985), the Immigration and Refugee Protection Act (2001), and the Corrections and Conditional Release Act (1992) govern criminal activity and correctional facilities. In the federal system, inmates are adults serving sentences of two years or longer as well as those on conditional release in communities. The Correction Act (2004) and Correction Act Regulations (2005) legislate the provincial corrections system. Under provincial jurisdiction, inmates are serving sentences of less than two years, are awaiting trial, sentencing, or immigration review, or are serving community sentences (Correctional Services Program, 2017).

The scope of BC Corrections includes nine correctional centres, and approximately 55 community corrections offices (BC Corrections). The correctional centres are located in Chilliwack, Kamloops, Maple Ridge, Nanaimo, Port Coquitlam, Prince George, Surrey, and Victoria. In 2015/2016, an average daily count indicated there were 14,798 adults under custody and community supervision in BC. Of that average, 12,146 inmates were under community supervision, with the remaining 2,653 inmates in custody (Correctional Services Program, 2017).

The re-entry mediation program will interact with inmates on Vancouver Island, primarily those located in Victoria, BC. The correctional centre in Victoria BC, called the Vancouver Island Regional Correctional Centre, alone, houses approximately 292 inmates per day (Ministry of Justice, 2015). These inmates, along with others in BC participate in various correctional programs aimed at reducing reoffending. Programs focus on how to self-manage emotions, build positive relationships, use non-violent communication, develop problem-solving skills, manage substance misuse and abuse, and obtain education upgrading (Ministry of Justice, 2013). These programs, however, are not always offered to inmates, and when they are, program completion rates are low (Office of the Auditor General of British Columbia, 2015, p. 6). Programs offered are also considered ineffective at reducing criminal behaviour for various reasons, such as a lack of standardized ways of implementing and evaluating programs in place (Office of the Auditor General of British Columbia, 2015, p. 6).
Federal and Provincial Trends on Inmates

According to Statistics Canada, the number of admissions to adult correctional services has remained stable in Canada, with male adults under age 35 being the majority of admissions (Correctional Services Program, 2017). Offences commonly seen in adult criminal court include impaired driving, theft, common assault, failing to comply, and breaches of probation, with fraud and mischief being less likely offences (Dauvergne, 2012). In 2013, the crime rate, calculated based on the reported number of Criminal Code offences per 1000 persons, was highest for property crime (Ministry of Justice, 2015, p. 13). Examples of property crime include theft, breaking and entering, and possession of stolen property (Ministry of Justice, 2015, p. 13). Statistics Canada indicated that in 2015/16, the incarceration rate increased in provinces/territories, whereas federally there was a decline in the rate of incarceration (Correctional Services Program, 2017). There is also a greater amount of adults in remand, compared to those in sentenced custody (Correctional Services Program, 2017). On average, most adult offenders spend less than one month in provincial custody, with little more than half of adults in remand spending one week or less in custody (Canadian Centre for Justice Statistics, 2015).

Trends vary based on a number of factors, such as legislation changes, policing changes, changes in the way judges sentence, changes in court proceedings, changes in the culture of the criminal justice system (CJS), population growth, and changes in the types of crimes being committed (Office of the Auditor General of British Columbia, 2015, p. 12).

Operating Costs of Correctional Institutions

According to Statistics Canada, costs for operating correctional systems in Canada decreased in 2015/2016, still costing more than $4.6 billion (Correctional Services Program, 2017). This number includes the costs for staffing institutions including administration and central services costs, costs of inmates being in custody each day, and the costs of community supervision of incarcerated persons. In BC, the total cost for the adult correctional system is $264 million; with an inmate in custody in BC costing approximately $202 per day (Correctional Services Program, 2017). British Columbia’s expenditures for operating adult correctional systems is the third highest in Canada, next to Ontario and Quebec (Statistics Canada, 2014).

Mediation and Restorative Practices

Mediation is a process whereby a third party facilitates a discussion between parties in conflict. Parties decide on mutual agreement terms that help in the resolution of their dispute (FMC, Members Code of Professional Conduct). In co-mediation, two or more mediators facilitate a process together. This exposes mediators to different mediation styles and helps building a community of practice for mediators to receive support and continual learning and development (Chicanot & Sloan, 2010). Responsibilities of co-mediators include keeping each other updated and informed of any case developments that will affect the co-mediation process (FMC, Members Code of Professional Conduct).
Mediation is characterized by several main principles, such as disputant autonomy, procedural fairness, substantive fairness, independent third party, and confidentiality. Disputant autonomy occurs when mediators create a space where each party in the mediation has the right to make choices free from coercion and threat, feels in control of the outcomes, and feels that they had voice and were engaged in the outcome (Waldman, 2011, p. 4). Procedural fairness involves mediators creating a fair process, through outlining confidentiality, and their role as listener and mediator (p. 5). Substantive fairness is the fairness of the outcome and how acceptable parties find the outcomes (p. 6).

Mediators act as independent third parties, person or persons who are outside/independent from the conflict. Third parties are not directly linked to persons in conflict in any way, for example, they are not family members, employers, or support persons to participants in the mediation (Moore, 2014, p. 20). Confidentiality is when mediators cannot disclose party-specific information that has been discussed in a mediation session. This includes for example, identifying information such as age, or information parties do not want disclosed. Exceptions to confidentiality are in situations where parties disclose a threat of harm to themselves or others, where child disclosures are made, where breaches in confidentiality are required by law, or where participants agree to confidentiality being broken for specific circumstances (FMC, Members Code of Professional Conduct).

Within the role of a mediator, there are three primary tasks mediators do not do; mediators do not make binding decisions, they do not take sides in the case, and they do not provide legal advice. Mediators facilitate conversations between parties, to help parties communicate over conflicts in their relationship and collaborate over next steps. Any decisions made are made by parties. Terms decided on in session are not binding decisions, but rather help parties have something concrete if they want to have terms written into a formal agreement with their lawyer (Moore, 2014, p. 8). While mediators may manage the power dynamics in the session to ensure that all participants can participate safely and competently, they do not side with any one participant in sessions. Mediators adopt an impartial stance in mediation to help parties understand that the mediator will not push for a specific outcome. The goal is to create a process where all parties feel safe and comfortable to speak to harm and decide how to move forward (p. 8).

Like mediation, various RJ practices and principles also exist. Primary restorative principles are that crime harms people and relationships, and that these violations create responsibilities and accountabilities (Zehr & Gohar, 2003, p. 17). Those involved in the crime, and in doing harm to others are responsible for making right that harm (p. 17). Harms are addressed through dialogue that involves the harmed persons, and the larger community (p. 19). In re-entry mediation, there is an understanding that harm may not be one-directional in a relationship. All parties in a relationship may have caused harm to each other in various ways and these harms are to be acknowledged and addressed.
Re-entry Mediation: Baltimore Program Statistics

In re-entry mediation, inmates are provided the opportunity to mediate with individuals with whom they wish to re-build and maintain positive relationships with, such as family members. Re-entry mediation allows parties to discuss the harms in their relationships and create agreements and plans for how to proceed once inmates are released (Community Mediation Maryland, 2013).

An evaluation of re-entry mediation programs in Baltimore, Maryland shows decreased rates of offenders getting re-arrested after re-entry mediation. The rate was further decreased based on the number of mediation sessions conducted with inmates. One result indicated that the risk of an offender being re-arrested after mediation was down 37%, compared to those persons who did not mediate (Choice Research Associates, 2013). Three months after an inmate’s release from custody, mediation evaluations showed that 54% of respondents felt they better communicated and worked with the other party; 80% of participants indicated they were able to think through various options before responding to new conflicts; and 56% of outside participants and 80% of inside participants (inmates) felt the inmate was more prepared for returning home (Choice Research Associates, 2013).
CHAPTER THREE: LITERATURE REVIEW

The purpose of this review is to provide information on designing and delivering an effective re-entry mediation training program informed by inmates’ experiences both in correctional facilities and during their re-entry into communities.

Information was collected from published journal articles, government reports and reports by non-governmental organizations, and relevant books. Information primarily came from sources written after the year 2000 as limited articles exist on re-entry mediation processes, developing effective programming for inmates re-entering communities, and training for mediators. This literature review provides information about the prison context and impacts of incarceration on inmates, and on developing effective re-entry programs. Material on training was provided by three main sources, including reports from international and non-profit organizations. Research on inmates primarily focuses on adult male inmates in the United States and Canada, and the literature review focuses on the same population. Research was used from the United States because of its large population and high rates of incarceration. Research from the States provides a large amount of information on prison culture and inmate codes, and experiences of inmates prior, during, and after incarceration, including mental health and addiction experiences.

The review begins by defining crime, and discusses the impacts of a punishment based approach to crime and the way inmates are treated in the criminal justice systems (CJS) in Canada and the United States. The review then considers impacts of prison cultures on inmates’ actions both inside and outside correctional facilities. This is followed by information on the impacts of incarceration on inmates, such as impacts of overcrowding and health impacts. The review subsequently discusses the impacts of social supports on inmate reintegration, and finally focuses on how to build effective program and training designs.

Social Context of Crime

Crime can be generally defined as any act that is against the law (Des Rosiers & Bittle, 2004, p. vii). Definitions of what constitutes crime and criminal behaviour change based on the societal and cultural values of the time (Leonard, 2015, p. 30). Public ideas and values regarding crime are reflected in the decision-making authority of those who hold political or economic power, such as politicians, judges, and those with higher socioeconomic status (Leonard, 2015, p. 31). An example of the power dynamics in the CJS can be seen in the overrepresentation of Aboriginal adults in correctional facilities (Correctional Services Program, 2017). The Correctional Services Program indicated that although Aboriginal adults account for 3% of the Canadian adult population, in provinces/territories they account for approximately 25% of all admissions to adult correctional services (2017).

Power and authority is also demonstrated in media attention aimed at crimes such as theft and murder, which cause less impact on society than white collar and organized crimes such as investment fraud and drug cartels (Leonard, 2015, p. 3). Media narrations often display groups in society that are marginalized such as visible minorities and those that lack
financial resources (Leonard, 2015, p. 3). Media’s portrayal of crime shapes the way the

**Impacts of a Punishment Centered Approach to Crime**

Haney (2001) describes how prior to 1970, in the United States, incarceration was a method
used to allow individuals convicted of crimes to evaluate their actions. Since then,
correctional systems have used incarceration as a method to punish convicted individuals
and keep offenders separate from society (The State of Prisons section, para. 1). Sentences
were tools meant to deter offenders from re-committing a crime once they were released
discusses how since the 1970s little focus has been placed on rehabilitating offenders and
providing them with adequate support services to help them after their release. Instead, the
focus has been placed on punishing offenders. This punishment approach, also called the
tough on crime approach, has consequences such as increased cruelty towards inmates by
correctional staff and lack of attention towards issues of conflict and violence in prisons.
The author describes how these consequences are exacerbated when inmates experience
trauma, mental and physical health issues, and stigma due to having been incarcerated (The
State of Prisons section, para. 5). The tough on crime approach is demonstrated when
individuals facing charges are served with harsher penalties and longer sentences of
incarceration than usual for the type of crime they committed (Doob et al., 2014, p. A-2).
Offenders placed under harsher and longer sentences reoffend as often as those with lesser
punitive sentences, suggesting that harsher sentences are not better at decreasing recidivism
(Doob et al., 2014, p. A-3). A meta-analysis conducted by Gendreau, Goggin and Cullen
(1999) showed that prison sentences do not reduce recidivism and may actually lead to
increased recidivism (p. 18).

A Canadian Criminal Justice Association (1985) report discusses how a culture of
punishment as a response to crime has led to increased rates of incarceration, where
incarceration is used as a first rather than last resort option (p. 7). Incarceration leads to
both overcrowding and increased costs of maintaining correctional facilities, and may be
less effective at reducing crime compared to community-based responses, such as
counselling services (p. 26). The culture of punishment also leads to the creation of a
society based on the belief that prisoners are harmful and should be kept away from the
public for public safety (p. 31). This idea creates increased stigma on inmates and may cost
them job opportunities and social supports once they are released from correctional
facilities (p. 3). The culture of punishment impacts whether inmates are granted parole;
contributes to longer sentences; labels inmates as dangerous; and decreases funding to
social services such as addiction services that help the inmate population (pp. 10-13).
Prison Culture

Ricciardelli (2014) discusses prison culture as the culture that exists when convicted individuals are integrated into the prison lifestyle. This lifestyle is characterized by factors such as limited privacy and mobility, and decreased decision-making power. Prison cultures vary based on the correctional institution, the inmates, and societal views on incarceration and crime (p. 236).

Wellford (1967) describes how upon incarceration inmates learn and adapt to the different customs, rules, and general culture of the prison institution. These learned norms may help inmates cope with being incarcerated, and are derived from their experiences with other inmates and the treatment inmates receive by correctional officers and other law enforcement personnel (p. 197). Inmates are also part of various social contexts prior to their incarceration, which influence how they interact with the prison environment (Ricciardelli, 2014, p. 236). Inmates both adapt to the culture within the correctional facility and also bring in internalized characteristics evolving from their pre-incarceration time (Ricciardelli, 2014, p. 237).

The Inmate Code

The inmate code refers to unspoken rules and attitudes expected of inmates during their time incarcerated (Ricciardelli, 2014, p. 236). An early theory on the development of the inmate code, the deprivation theory, suggests that the code provides order within the prison system. The code serves to decrease some of the fears inmates face by providing a structure with rules, attitudes, and beliefs to mold to (Wellford, 1967, p. 199). Problems associated with this theory are that it ignores other factors that contribute to the development of the code, such as the extent of criminal activity by an inmate prior to incarceration and its influence on the degree to which the inmate identifies with the code (Wellford, 1967, p. 203).

Inmates vary in the extent to which they follow the inmate code depending on their values and previous experiences (Trammell, 2009, p. 748). Trammell (2009) indicates that commonly held values of inmates include having a respected identity and reputation, obtaining profit, maintaining peace in the correctional facility, and distancing themselves from prison staff (p. 749). These values help reduce the possibility of being harmed by other inmates and place inmates in positions of dominance rather than as potential victims (Trammell, 2009, p. 763). Victimization can occur through assault, isolation, and loss to reputation (Copes, Brookman, & Brown, 2013, p. 842). Other factors that influence whether inmates abide by the code include their connection or loyalty to other inmates, gang affiliations, and their position in the prison hierarchy (Trammell, 2009, p. 748).

Inmates’ adoption of the code may also be impacted by changing rules and regulations of correctional facilities, mental health issues, substance use and misuse concerns, and social changes regarding inmates’ rehabilitation (Copes, et al., 2013, p. 843). Other factors include contact and supports inmates have to others who are not incarcerated and not involved in the CJS; how long the inmate is incarcerated for; and whether and for how long inmates have been previously incarcerated (Garofalo & Clark, 1985, p. 422).
Several facets of the inmate code that inmates abide by include following prison rules, being tough and responding to threats, harassment, and other forms of disrespect (Trammell, 2009, p. 750). A code of silence exists whereby inmates do not reveal information about other inmates (Trammell, 2009, p. 756). Other facets include gaining respect; being self-reliant; not interacting with authority figures such as correctional officers; displaying dominance, strength, toughness, and violent characteristics; and being dependable but not loyal to other inmates (Copes, et al., 2013, pp. 846-847; Ricciardelli, 2014, p. 238). Incarcerated males interviewed by Bronson (2006) placed value on being able to fight to protect oneself which helps to avoid victimization; being able to stand up for yourself against others; being unobtrusive; building on one’s own weaknesses by learning skills and getting an education; and knowing which groups of people to avoid in the facility (pp. 66-69). In the author’s interviews with inmates, inmates also spoke about learning prison hierarchies. Inmates’ place in the prison hierarchies may be based on their occupations. Valued occupations are those that provide inmates with transferrable skills, are physically demanding, and provide monetary value (pp. 70-71). Hierarchies may also be based on inmates’ networks or connections both inside and outside the correctional facility, inmates’ type and level of education, their previous convictions, and their mental health (pp. 72-74).

The Impacts of Incarceration

Inmates face a variety of challenges during their incarceration, such as potential victimization from other inmates and a high-risk environment with decreased safety (Ricciardelli, 2014, p. 239). Ricciardelli (2014) also indicated that inmates are at risk for rumours and information about their charges and convictions being released by correctional staff inside the facility; indicating breaches in confidentiality by staff. The risk for victimization for inmates with charges related to sexual offences is higher, because these charges place inmates at the bottom of the prison hierarchy (p. 241). Victimization may come in the form of physical harm (i.e. such as stabbings and beatings), intimidation and fear tactics such as threats and humiliation, theft of personal items, sexual assault, and use of force and brutality by correctional staff (p. 242; Modvig, 2014, p. 20).

Along with victimization, inmates may be dealing with serious mental health and addiction concerns. Long (2010) indicated that approximately 13% of male inmates have health problems upon intake into federal corrections (p. 76). According to Sapers (2014) inmates are up to three times more likely to have a mental health issue compared to those in the general population (p. 23). The Public Services Foundation of Canada (2015) indicates that inmates who face disorders such as mood, and anxiety disorders are 90% more likely to be facing another disorder (p. 5). Approximately 60% of federal offenders are identified for follow up upon intake so an assessment for their mental health can be completed (Public Services Foundation of Canada, 2015, p. 44). Inmates facing mental health and addiction concerns are also more at risk for other issues such as physical health problems, difficulty learning new information which in turn may lead to poor or limited education, past trauma, difficulties forming bonds with others, limited experience working with others or in a work environment, debt or limited access to funds, and experiences of homelessness (Durcan, & Zwemstra, 2014, p. 89). Inmates with concurrent disorders and addictions also have more
needs, more developed criminal histories, and are at a higher risk for recidivism (Sapers, 2014, p. 23).

Inmates experience worry, fear, and hyper-vigilant reactions due to an environment where violence can occur at any moment (Ricciardelli, 2014, p. 242). Inmates also deal with concerns over their relationships outside of the prison; distrust, which impacts their ability to talk through problems with others; feelings of repetitiveness, apathy, boredom, and monotony; concerns regarding their release such as where they will live once released; unresolved trauma; and poor nutrition (Durcan & Zwemstra, 2014, p. 89). Haney (2001) indicates that inmates are also positioned in an environment where showing emotions is considered a weakness that makes them more vulnerable to victimization. As a result, inmates may control their emotions and behaviour and develop a flat affect, may have less language around how to discuss emotions, and/or may be uncomfortable with emotions and withdraw or distance themselves from emotional or social situations (Emotional Over-Control section).

Ricciardelli (2014) describes how the extent of fear faced by inmates is impacted by the type of facility they are placed in, such as medium versus high security prisons. Inmates under lower security fear being accused of doing an action that will get them sent to a higher security facility. Those in higher security facilities often face more violent and hostile environments. To counter these negative effects, inmates often act violent, tough, and guarded (p. 242). Inmates may avoid victimization by actively avoiding high risk areas of the correctional facility where violence occurs more often, staying in their cells for longer periods of time, or carrying a weapon to maintain personal safety (Haney, 2001, Hypervigilance section). Violence and victimization are often underreported or not acknowledged due to a fear of becoming victimized or retaliated against (Modvig, 2014, p. 19). The fear of retaliation has consequences such that inmates ignore violence towards other inmates, and do not ask for personal medical help or attention (Ricciardelli, 2014, p. 246).

Incarcerated inmates are part of an environment where they have limited freedoms, a rigid routine and controlled environment, and strict rules and regulations (Haney, 2001, The Psychological Effects of Incarceration section). In community correctional centres, inmates may be facing confined spaces with limited space for movability, and limited access to prison resources and activities such as exercise equipment (Sapers, 2014, Double-Bunking section). Marlow and Chesla’s (2009) interviews with inmates indicate that inmates adapt to incarceration in two primary ways; through acquiescence and inaction, or through aggression. Acquiescence is defined as inmates’ belief that they have to agree to or comply with the rules of the institution to avoid harm and get released without trouble. This belief led to inmates not acting on personal values and morals because these would invite victimization (p. 4). Aggressive behaviour served as a form of self-protection and in some cases offered inmates increased status in the institution. Acquiescence and aggressive adaptations are also impacted by the level of dependency inmates have on the correctional institution (p. 6). Inmates varied from ‘reluctant acceptance’ of the institution to ‘complete reliance’ on the institution (pp. 7-9). Haney (2001) discusses how these adaptations impact inmates’ ability to make decisions, be independent, plan their next steps, and adapt to life post-release. Incarcerated persons may not have been able to build helpful and safe self-
monitoring and self-control practices during their incarceration due to reliance on the rules in the correctional facility. Once the controls of the correctional facility are taken away, inmates may face feelings of discomfort, fear, and the inability to make safe choices (Dependence on Institutional Structure and Contingencies section). They may also act with continued aggressive behaviour once released, dependency on others to make decisions, low self-esteem, and decreased agency and motivation (Marlow & Chesla, 2009, p. 4).

Overcrowding in Institutions

Overcrowding can result in double or triple-bunking for inmates, where there are two or three inmates to a cell instead of one (Public Services Foundation of Canada, 2015, p. 5). Double-bunking or triple-bunking within facilities increases the risks inmates feel in prison, increases conflicts among inmates and between staff and inmates, and leads to increased violence (Public Services Foundation of Canada, 2015, p. 20). A 2013/2014 report by the Office of the Correctional Investigator on federal inmates showed 1000 assaults and fights between inmates, more than 29,000 complaints and grievances, a little less than 2000 inmates being involuntarily transferred to another facility, and approximately 1000 inmates committing self-injuring behaviour, due to overcrowded conditions (Sapers, 2014, p. 32). Overcrowding places inmates at increased risk for health issues, such as increased risk for transmission of infectious diseases, especially in institutions with less sanitary measures in place (Sapers, 2014, p. 20). Overcrowding also provides less opportunity for inmates to obtain the resources and programming they need to get help both within and outside correctional facilities (Public Services Foundation of Canada, 2015, p. 24). These effects are exacerbated for inmates facing mental health and addiction issues (Public Services Foundation of Canada, 2015, p. 14).

According to the Public Services Foundation of Canada (2015), correctional staff also deal with the consequences of overcrowding, especially when they intervene in conflicts between inmates. Within the past five years, there have been 211 assaults towards staff across BC institutions, not accounting for other forms of violence such as threats, and attempted assaults (p. 20). This dynamic of violence is increased when accounting for increasing number of gangs in Canadian institutions (p. 36). Overcrowding threatens the ability of correction officers to separate gang members from each other, and increases opportunities for recruitment of new gang members (pp. 36-37).

Health and Incarceration

Inmates are at risk for disease while incarcerated. Examples of communicable diseases that inmates may be at risk for include Human Immunodeficiency Virus (HIV), Hepatitis B, and Hepatitis C (Hariga, 2014, p. 45). Inmates are up to ten times more likely to experience HIV/AIDS compared to the general public (Sapers, 2014, p. 22). The potential for inmates to obtain these diseases is higher within the closed system of the correctional facility where inmates may not practice safe sexual practices, where there is overcrowding, transmission of disease through shared needle use, unsterilized medical and dental equipment, and increased risk for sexual assault (Hariga, 2014, p. 45). Inmates are also at risk for infectious diseases such as viruses. The effects of infectious diseases may be exacerbated by delayed vaccinations for inmates (Todts, 2014, p. 73).
According to Sapers (2014), medical information on the inmate population is difficult to retrieve due to un-automated records (p. 20). Among the inmate population approximately 7% have diabetes, 20% have cardiovascular conditions, and 15% have respiratory issues (p. 21). Older inmates are at greater risk for health issues and are approximately 20% of the federal inmate population (p. 3). The author describes complications with the treatment options and medical services that inmates are provided. These include service delays, ineffective and lack of treatment options, lack of medical follow-up on health issues, ineffective communication between health-care staff and correctional staff, and incomplete medical histories and records on inmates’ case files. These issues lead to increased deaths among the inmate population, which primarily occur for inmates around 60 years of age (p. 29). Approximately 65% of deaths in custody are linked to natural causes such as aging, 16% are attributed to suicide, 5% to homicide, and approximately 3% due to drug overdose (p. 28).

According to Haney (2001) mental health can affect inmates in a variety of ways. Those facing mental health issues may be less able to control their behaviour and conform/adapt to the prison culture, leaving them more at risk for victimization. They may have difficulty learning and following the rules in place at the correctional facility and have difficulty learning from the reintegration programming they receive. Inadequate health care in the facility and inadequate follow-up care may lead to inmates discontinuing their medications, which in turn may lead to increased harm to themselves and others, correctional facility rules being broken, and harsher penalties for these persons (Mentally Ill and Developmentally Disabled Prisoners section).

**Impacts of Incarceration on Families**

Inmates may experience difficulties rebuilding and maintaining prior relationships and trust due to their time incarcerated, and may be facing issues such as Post Traumatic Stress Disorder, re-traumatization, physical health issues, and feelings of hopelessness and helplessness (Haney, 2001, Implications for the Transition from Prison to Home section). These issues may have negative consequences on inmates’ children and family members who are trying to cope and adjust to the changing circumstances and adjust to changed personality characteristics of the inmate (Haney, 2001, Implications for the Transitional from Prison to Home section).

Haney (2001) describes how experiences of incarceration can impact inmate’s capacity to parent. Inmates’ dependence on correctional facilities’ rules and the controlled atmosphere can make it difficult for them to make decisions regarding their children’s lives. Inmates may also feel disconnected from their children because of experiences of isolation and emotional suppression while incarcerated. This has impacts on an inmate's ability to be emotionally responsive to their child(ren) and show their child(ren) affection and physical closeness. Developed traits such as mistrust, may impact inmates’ ability to build trust with their children (Haney, 2001, Implications for the Transitional from Prison to Home section).
According to Lockwood and Raikes (2016), children with incarcerated parents may suffer from a variety of issues associated with the loss of a parent. These include behavioural issues such as aggressive behaviours; increased anxiety and anger; confusion, especially when children were only partially told about their parent’s incarceration; and mental health issues such as depression. These issues may be exacerbated by lack of social supports for the family and children, and changes to family dynamics and home and school environments (p. 231). A research summary conducted by the Centre for Criminology and Sociolegal Studies indicated that boys with fathers who have been incarcerated are more likely to be aggressive and commit offences; and mothers with male incarcerated partners are more likely to suffer from mental health issues, impacting their parenting (Doob, Webster & Gartner, 2014, p. A-4). These dynamics vary based on factors such as the relationship between child and parent prior to the parent’s incarceration and the involvement of parents in providing care for the child, as well as social support systems for both the child and their caregivers (p. B-25).

Factors Impacting Inmate Reintegration

While incarcerated, inmates may be dealing with decreased control over reactions and emotions; memory loss; a loss of identity; and decreased ability to cope with stress and anxiety (Haney, 2001, Prisoners in Supermax or Solitary Confinement section). Charkoudian and Flower (2014) discuss how these challenges may be exacerbated during the release process and during times of economic distress. One of the primary challenges faced by inmates is the inability to find work once released from the correctional facility. This challenge may cause incarcerated persons to go back to activities they were doing for income prior to their arrest (p. 15). Charkoudian, Cosgrove, Ferrell, and Flower (2012) indicate that 70% of inmates needed help gaining employment once released and approximately 45% needed help finding appropriate housing. Upon release from incarceration those at greater risk for reoffending included those who did not have stable housing (p. 94). Other challenges inmates face include building positive support systems, obtaining financial resources, and leaving high-risk lifestyles, people or situations that may lead to reoffending (Dickson & Polaschek, 2014, p. 1431).

Inmates with longer periods of incarceration, who have served a sentence of ten or more years in a correctional facility, face barriers to support and resources to a greater extent, leading to higher risk for recidivism (John Howard Society of Alberta, 1999, p. 1). Longer incarceration may lead to decreased ties between inmates and their families, partners, and friends, and less opportunity for inmates to find employment due to different job markets and decreased communication skills (Visher & Travis, 2003, p. 96). Longer periods of incarceration are also associated with decreased optimism, hope, and motivation by inmates re-entering into communities (Visher & O’Connell, 2012, p. 391). Draine, Wolff, Jacoby, Hartwell and Duclos (2005) indicate that the two main types of barriers inmates face upon being released into communities are availability barriers and willingness barriers. Availability barriers include inmates’ access to resources such as treatment centres, and willingness barriers are based on how willing members of the community are in supporting inmates, for example, through employing inmates. These two barrier types are impacted by an inmate’s offence history, and the type of resources the inmate wants access too (p. 699).
A study reported by Durcan and Zwemstra (2014) discussed what inmates facing mental health challenges view as their six primary needs for successful reintegration into their communities. First, inmates needed to have someone to talk to and build a trusting relationship with, such as a psychologist. Second was preparation for release, such as help finding housing, obtaining income, and support for health issues. Third, inmates wanted to be doing meaningful activities. These include activities that can help them with their transition into communities, such as job training activities. Fourth, inmates required help and support during times of crisis. Fifth, inmates reported needing both therapy and the right medication, as well as support in how to use medications. Sixth, included a need for someone to be an advocate for the inmate to help the inmate express and address their needs (p. 90).

Canadian community correctional centre research conducted by Sapers (2014) indicated that inmates felt unprepared for their transition from prison to community. Inmates indicated not having identification cards such as health cards and other needed documents. Inmates also indicated that they were unaware of their release process and the programming in place. Programs often had long wait times and did not always adequately reflect inmates’ needs; for example, programming was often offered during the day, not allowing inmates to work or find adequate employment during the day. Community correctional centres were also understaffed and under supported, which has greater consequences for inmates who are experiencing mental health issues, are older and have differing needs, and who are suffering from extreme illnesses due to poor physical health, infection, or terminal illness (pp. 13-15).

**Social Support and Re-entry**

Visher and Travis (2003) indicate that social support can positively impact inmates’ re-entry into communities. Inmates with stronger family ties, more family contact during incarceration, and interest in maintaining family relationships are more likely to integrate better into communities after their release. Support for inmates is especially important in the period right when inmates are released from incarceration (pp. 99-100).

Social support theory asserts that increased support can lead to decreased crime (Orrick, Worrall, Morris, Piquero, Bales, & Wang, 2011, p. 499). Incarceration negatively affects social supports by decreasing family bonds and decreasing trust in communities (Orrick et al., 2011, p. 500). Social support is split into two categories: instrumental, and expressive/emotional (Hochstetler, DeLisi, & Pratt, 2010, p. 590). Instrumental support involves practical help and support provided to someone, such as helping someone find housing. Expressive support involves providing others with emotional support (Hochstetler et al., 2010, p. 590). Expressive support increases the supported person’s sense of self-worth and belonging (Listwan, Colvin, Hanley, & Flannery, 2010, p. 1144; The John Howard Society of the Lower Mainland, 2013, p.11). In general, support can be provided by helping people meet their needs, balancing the needs of the individual with the needs of the collective, and building an environment based on persons being morally obligated to help one another succeed (Orrick et al., 2011, p. 500). Support comes in various forms, such as through social assistance programs, government assistance programs, and interpersonal relationships (Hochstetler et al., 2010, p. 590; Orrick et al., 2011, p. 500).
The John Howard Society of the Lower Mainland (2013) indicates that inmates that have social supports outside of prison better integrate and succeed outside of prison once released (p. 11). The support of family and friends can decrease the stress, hostility, and depression inmates face while incarcerated (Hochstetler et al., 2010, p. 601). Positive supports also hold inmates accountable for their actions and keep inmates motivated towards making positive changes, such as through receiving counselling, or completing educational requirements (John Howard Society of the Lower Mainland, 2013, p. 11). Families may provide support financially; emotionally through affection and acceptance; and with opportunities for housing, and employment (Visher & Travis, 2003, p. 99). Inmates who are able to obtain jobs often do so through their families or other personal contacts (Durcan & Zwemstra, 2014, p. 91).

Orrick et al (2011) describes how support systems provide a source of social control for inmates that controls inmates’ behaviour while simultaneously providing support and opportunity. Social control involves connecting inmates to positive influences that dictate what appropriate and inappropriate behaviour is (p. 501). With these supports inmates have more opportunities to gain social skills (Charkoudian et al., 2012, p. 94). Family support and support from spouses or partners also reduce emotional strain which in turn provides emotional controls on inmates (Spjeldnes, Jung, Maguire, & Yamatani, 2012, p. 134).

Research conducted by Listwan et al (2010) discusses how family and other inmate support persons help inmates cope with victimization and trauma effects experienced during incarceration. The study showed that for persons who have experienced or seen violence, having few coping skills and social supports places them at increased risk for experiencing trauma reactions, depression and aggression (p. 1141). In turn, increased social support increases psychological well-being, especially when other elements such as victimization are decreased (p. 1154). A common challenge faced by inmates is a loss of social support, and feelings of isolation during incarceration (Cochran, 2014, p. 203). Cochran (2014) studied the impact of visitation on inmates’ recidivism and found that inmates who were visited earlier in their incarceration and those visited consistently through their incarceration were less likely to reoffend (p. 218).

The John Howard Society of Lower Mainland (2013) provides information on how family members, friends, and other supporters face various challenges of being in the supporter role for an inmate. Challenges may include dealing with financial and emotional costs of being a support person, legal concerns, and lack of time. Costs incurred may include the costs of taking phone calls from inmates and the costs of visiting inmates in person, especially if the inmate is in an institution far from the supporter (p. 11).

Prior to a positive relationship being possible, inmates and their support persons may have to deal with past harms or fears as a result of incarceration (Charkoudian et al., 2012, p. 95). The re-entry program in Baltimore showed through telephone follow-up that after inmate mediations, inmates and the other participants each felt more in control of their relationship, felt better able to handle conflict constructively, and felt increased hope about the reintegration process (Charkoudian et al., 2012, p. 97). Inmates indicate family as a primary reason for successful re-entry into their communities (Spjeldnes et al., 2012, p.
Inmates may, however, have families who have also engaged in criminal activities and are facing challenges such as substance abuse issues. This environment may lead to negative outcomes for the inmate, such as reoffending (Charkoudian et al., 2012, p. 95).

Designing Re-entry Programs

Visher and Travis (2003) outline four dimensions that impact an inmate’s transition from incarceration to the community. These are the inmate’s personal characteristics, such as their core values; their relationships with families and friends; the community and neighbourhoods they are part of; and state policies (p. 92). Neighbourhood influences that impact inmates may include feelings of trust and support between neighbours, housing prices in inmates’ living area, job availability, and social and health care services (pp. 103-104). Communities that lack resources and have limited services pose more challenges for inmates (Wang, Hay, Todak, & Bales, 2013, p. 304). State policies impact inmate re-entry, through policies that decide what actions are crimes, who should be incarcerated and for how long, and what conditions inmates should be placed under (Visher & Travis, 2003, pp. 103-104).

Visher and Travis (2003) discuss how inmates’ reintegration is also impacted by four different time frames, their time preceding incarceration, the experiences they gained during incarceration, the period after they have been released from the correctional facility, and the period after they have integrated into their communities. Pre-prison time frames may include an inmate's work history; in-prison experience may include their interactions with inmates; post-prison experiences may include any supports and services provided to inmates after their release, and post-release integration may include influences of the neighbourhood on an inmate (pp. 92-94). For example, inmates integrating into urban areas are at a higher risk for recidivism (Wang et al., 2013, p. 312).

Dynamics that help inmates abstain from committing criminal acts include motivation and a purposeful decision to stop criminal behavior, and taking on new roles such as becoming a parent or employee (Visher & Travis, 2003, p. 93). Inmates who are no longer part of their previous social networks face challenges such as isolation and frustration, which can be exacerbated by the stigma inmates face due to their time incarcerated (Visher & Travis, 2003, p. 98). A study by Visher and O’Connell (2012) looked at the impacts of inmates’ self-perceptions on their re-entry into communities. Inmates’ self-perceptions impacted how well they adjusted to their communities, especially for inmates who knew they had family support, felt a sense of control and self-worth, and felt optimism and hope for their re-entry. Inmates felt more hope and optimism when they participated in treatment for substance abuse issues, when they had children, and when they felt safe in the neighbourhood they were returning too (p. 392).

Re-entry programs are helpful when they can connect inmates to conventional activities, such as meaningful volunteer and community work (Visher & Travis, 2003, p. 95). Inmates who become part of different support programs and organizations, such as church, are less likely to reoffend because these organizations provide a structure for inmates to conform to (Hochstetler et al., 2010, p. 592). Inmates who want to take on roles as volunteer, parent,
homeowner, or employee, for example, are less likely to commit criminal activities due to a positive sense of self (Visher & O’Connell, 2012, p. 387).

Dickson and Polaschek (2014) discuss how release-planning is an important aspect of re-entry programs because it clarifies the conditions placed on the inmate; allows inmates to navigate those conditions while helping them access their basic needs; provides opportunity for the involvement of community organizations and resources, as well as offenders’ support persons; and assists inmates with making a plan on how to deal with challenges they may face in the community (p. 1435). Good quality and in-depth release planning is associated to longer periods in the community and decreased risk for recidivism (p. 1432). Quality is determined based on factors such as how specific the plan is and the extent to which the plan is agreed too (p. 1433). Plans are effective when they are personalized, goal oriented and employment focused, and when they assess how to deal with risk factors and risk situations in the community (p. 1444). One study reported in Spjeldnes et al (2012) indicated that inmates with mental health issues had lower recidivism rates when they had effective care plans in place and were being professionally monitored (p. 134).

Charkoudian et al (2012) discuss the re-entry mediation program in Baltimore, Maryland, which is a six-step program. Steps included assessing an inmate to ensure their eligibility for the program; adapting case plans to the specific needs of the inmate; implementing programs that assess risks and inmate needs; employment preparation programs or training for inmates; family involvement; and community liaisons (p. 96). Community partnership may include collaboration between social service providers, police, probation and parole officers, healthcare facilities, and government services; these collaborations help inmates easily access different resources that they need, making for an easier transition into their communities (Spjeldnes et al., 2012, p. 143). McKiernan, Shamblen, Collins, Strader, and Kokoski (2013) recommend that re-entry programs connect inmate populations with community organizations and have a large scope and longer duration to help equip inmates for the re-entry process (p. 116).

Kubrin (2013) indicates that successful re-entry programs often occur prior to the offender being incarcerated and continue after through to inmate reintegration into their communities (p. 40). Listwan, Cullen and Latessa (2006) discuss three phases needed in re-entry programs, to help inmates in the re-entry process. The first phase is the assessment phase, which is completed while inmates are incarcerated. This phase includes selecting which participants/inmates can access the program, and assessing inmates’ needs and risk factors to integration. Phase two begins once the inmate is released and includes determining targets such as educational goals or job-skill development goals of the inmate. Phase three includes any form of aftercare provided to inmates once they are in their communities. This stage involves ensuring inmates have access to services such as educational/skill development programs and counselling services, and may include helping inmates develop relapse prevention strategies such as coping skills (pp. 21-22).

Programs that are also valuable are community based programs and those that focus on high-risk offenders (Kubrin, 2013, p. 40). Programs that involve cognitive-behavioural treatments are also beneficial; these are treatments that focus on changing the way certain stimuli is understood and acted on by individuals (McKiernan, Shamblen, Collins, Strader,
McKiernan et al (2013) evaluated two community partnership programs aimed at informing inmates re-entering communities about substance abuse, support for recovery, recidivism, safe sexual practices, information about HIV and sexually transmitted infections, and building positive relationships with family and other supports. The programs outlined the role of family as a source of support in the recovery and re-entry process. Participants were involved in learning skills associated with communication, self-control, and coping. The program was based on assessing risk-factors associated with re-entry and promoting resiliency in inmates and their supports, through emphasizing inmates’ internal strengths, and personal and community resources (pp. 97-98). The program emphasizes human connection to others, healing, and culturally sensitive approaches to cases (p. 100). Evaluation results showed that program effectiveness is increased the more engaged and motivated participants are, and showed the importance of evidence-based processes and techniques in helping inmates. Other helpful program aspects included inmates consistently being treated with respect, recognition, and positive regard; having inmates develop self-regulation practices; inmates decreasing negative self-talk tendencies; and connecting inmates to other resources and organizations (p. 115).

Listwan et al (2006) list principles that are important in re-entry intervention programs. These include cognitive-behavioural approaches that are flexible and part of the inmate’s daily environment, and intensive interventions that help assist high-risk and high-criminogenic inmates. Programs need to integrate aspects of risk, inmate needs, and inmate responsivity to programming. Risk involves the personal and community factors that are risks to future offending behaviour. Inmates’ needs may include access to healthier problem solving and impulse control skills. Responsivity involves the adaptability of the program to meet the inmates’ abilities (p. 20).

In a World Health Organization report on mental health in prison, Durcan and Zwemstra (2014) discuss five principles that can be used to guide the development of re-entry programs. The first principle is an understanding that recovery is a process towards increased health and wellness as determined by the inmate(s) themselves. Second, is that hope and self-discovery are important parts of the recovery process, and can be fostered by allowing inmates to feel in control of their lives and to see that change is possible. Third, is that the role of helper is not as an expert talking to a patient, but rather one as facilitator or partner that works alongside the inmate. Fourth, inmates require inclusion in communities and support for their recovery. Fifth, the language used by someone in a helper role is important and can determine whether the inmate feels safe to continue obtaining help (p. 94).

**Training Design for Re-Entry Mediation**

Training can be generally defined as a process where there is a transfer of knowledge between trainer and participants, and where new information is gained (Management Sciences for Health, 2012, p. 52.2; United Nations Office on Drugs and Crime, p. 3). Palameta, Myers, Gyarmati, and Voyer (2011) describe two types of training processes: formal and informal. In formal training programs, participants work towards accreditation or certification from learning institutes such as colleges. Informal training involves training conducted by community organizations or employers who instruct trainees in some
organized fashion, and where participants do not work towards obtaining credits. Training may involve providing participants with varying degrees of practical skills and increasing participants’ knowledge on relevant subject matter (p. 4). Primary goals of training include changing attitudes and actions, increasing confidence and competencies, helping trainees learn how to respond to challenges, and helping advance organizational goals (United Nations Office on Drugs and Crime, p. 3).

Training Process Model

The United Way Toronto and York Region (2016) describe a model for training delivery and program design. The first part of the model describes the inputs and resources that go into training development. Inputs may include funding, accessible trainers, and facilities for training to occur in. The second part describes the training activities that need to be completed prior to training. Activities may include developing training material and establishing any products and marketing pieces for the program. The third part is outputs, which involves the products and services that are delivered. Outputs may include the number of training manuals provided to participants and the type of training sessions participants engage in. The fourth part is outcomes, which involves the consequences or benefits of the training for participants. The fifth part is impacts, which involves the long-term outcomes achieved as a result of the training program. An example of a long-term impact or outcome may include increasing organizational capacity through employee development (pp. 21-22).

Needs and Skills Assessments

A needs assessment is conducted to assess the type of program and training that is required, other programs that already exist, and the extent to which the community requires the program (United Way Toronto & York Region, 2016, p. 31). Management Sciences for Health (2012) discusses how needs assessments are also based on the organizational environment of the organization implementing the program. The organizational environment may include organizational visions and goals, and the engagement of workers and supervisors in organizational tasks. Skills and knowledge assessments are based on the prior learning experiences of participants, such as participants’ previous knowledge of the subject matter (p. 52.4). Needs and skills assessments inform program and training development (United Way Toronto & York Region, 2016, p. 11).

Training Development and Implementation

Training programs are most effective when they identify and address problems regarding participants’ performance (Management Sciences for Health, 2012, p. 52.3). The development of effective training depends on several factors (Palameta et al., 2011, p. 5). Palameta et al (2011) describe structural factors such as labour market fluctuations that influence the development of training programs. Trainings may develop based on what jobs become more relevant and the type of education required in obtaining those jobs. Training programs may also be based on what programs governments provide funding for, which may be based on economic conditions and legislation changes. Individual participant factors such as lack of financial resources also impact training development (p. 5).
Trainers designing a training process may have to assess costs and resources of delivering training (United Way Toronto & York Region, 2016, p. 27). Trainers also assess how they will adapt the training process based on participants’ experiences, comprehension of material, and learning styles, as well as any language barriers, and cultural differences (Palameta et al., 2011, p. 11). Trainers may also have to adapt training based on group dynamics (United Nations Office on Drugs and Crime, p 18). This includes creating a flexible environment for participants to engage in learning, and setting breaks so participants do not become disinterested or overwhelmed by the training process (Management Sciences for Health, 2012, pp. 52.15-52.16). Trainer characteristics that help foster a positive learning environment include willingness to listen and understand participants’ questions and reflections; respect for participants’ experiences; empathy and patience; and willingness to adapt instruction based on participants’ needs (United Nations Office on Drugs and Crime, pp. 36-37). Effective trainers motivate participants to learn in ways that are useful to the participant, and connect training to applicable cases that participants can relate to in their daily lives (United Nations Office on Drugs and Crime, pp. 13-14). Lastly, trainers provide supervision, and continued training and education opportunities to support the continued learning of participants (Management Sciences for Health, 2012, p. 52.2).

Management Sciences for Health (2012) describes two ways of implementing a training program. First, is by having a trainer control and direct the learning process. The second is by having learners control their own learning with a trainer acting as a facilitator to the learning process (p. 52.9). Implementation is based on the needs and aims of the organization conducting training, as well as an assessment of what participants are required to know by the completion of the training process (United Nations Office on Drugs and Crime, p. 4).

Organizing Training Sessions

Training sessions may be organized in several ways through use of media and technology such as audio-visual aids, and through the training styles used in sessions (Management Sciences for Health, 2012, p. 52.2). Audio-visual aids, such as flip charts, can increase participants’ interest in a topic and allow participants to engage in a different way (Management Sciences for Health, 2012, p. 52.8).

Management Sciences for Health (2012) describes various training styles that can help participants engage in training. These include lecture, discussions, case study examples, role-play exercises, group exercises, demonstrations, brainstorming activities, and single or group presentations (p. 52.2). Lectures are often unidirectional, where trainers explain a topic to participants. In discussions, participants engage together in a topic and discuss different aspects about that topic. Case studies involve participants analyzing and learning from a real case, story, or event of a person who has gone through a circumstance relevant to the training topic. Role-playing involves participants learning from acting out certain roles. Group exercises involve having a group of participants engage in an activity together. Demonstration involves having facilitators/trainers demonstrate an activity or action for the rest of the participants to see and learn from. Brainstorming involves having participants
generate multiple ideas on a topic that can then be narrowed down collectively at a later time (pp. 52.6-52.7).

Training sessions are most effective when they obtain the active involvement of participants in the session (Management Sciences for Health, 2012, p. 52.7). According to Management Sciences for Health (2012) trainers can organize sessions to increase participant involvement in several ways. Sequencing the training session topics in a logical order helps participants understand and progress through the training process. This may include for example, providing a general theory and then narrowing into specific skills or best practices. Sessions may also be organized by building on information that participants are already familiar with before providing information that is new or more challenging. A last technique called spiralling, involves linking any information provided, back to the general concepts or goals, so participants know how the information fits with their personal goals and the organizational goals (p. 52.7). Participants also learn more when they’re interested in the material and motivated or inspired to learn it; when there is enough time allocated for learning activities so participants can practice and internalize the material; and when appropriate feedback is provided so participants can work towards success and increased learning (United Nations Office on Drugs and Crime, p. 13). If training manuals are used, they are most effective when they involve consultation with those who have experiences with the training topic, which helps promote buy-in with the participants and organization (Management Sciences for Health, 2012, p. 52.7).

Evaluating Training Processes

Management Sciences for Health (2012) outlines three steps in the training evaluation process. The first step is assessing training needs. This step involves having participants use knowledge received from training, interviewing the participants, analyzing their responses and finding out problems with training (p. 52.2). Trainees may be assessed based on their performance of certain tasks, and may be asked to reflect on how the training will be important for them going forward, whether training led to positive changes, and questions regarding the content and quality of the training, such as whether trainers were effective at facilitating learning (United Nations Office on Drugs and Crime, p. 9-16). The second step of the Management Sciences for Health (2012) training evaluation process is organizing what the training programs objectives are. This information comes from trainer and trainee feedback assessing training needs. The third step is the creation and adaptation of the training program to fit the needs of the participants and organization. Adaptation may include shorter or longer in-person training sessions, online training sessions, and/or mentoring opportunities (p. 52.2).

Summary

Crime is socially constructed based on laws, politics, and the social context of the time. These factors, in turn, impact the way correctional facilities are run and impact the culture within the correctional facility. Inmates often face a variety of issues during their incarceration. These issues include various forms of victimization by other inmates and correctional facility staff that impact the mental and physical health of inmates. As part of incarceration, inmates adopt an inmate code to help mitigate victimization. Overcrowding
and other conditions within correctional facilities such as lack of appropriate health care, may lead to inmates developing health issues and trauma reactions. Inmates also face multiple barriers to their release, including a lack of potential support systems and community resources, addiction and mental health issues, and a lack of income. Building positive support systems can positively impact the re-entry process for inmates, by providing both emotional and instrumental support to inmates.

Understanding the prison context, and problems inmates face in their re-entry process, are important when designing a training process for re-entry mediation. Training processes developed should allow facilitators to gain knowledge on mediation and impacts of incarceration so they can effectively facilitate conversations between inmates and their supports. Training needs and objectives may be assessed to determine the degree to which training equipped trainees to meet clients’ needs.
CHAPTER FOUR: CONCEPTUAL FRAMEWORK AND METHODOLOGY

Table 1 below presents a conceptual model based on the project objectives and the information gathered from the literature review. The model describes the inputs, activities, outputs, outcomes, and long-term impacts of the re-entry mediation training process, and guides the research approach.

Table 1

*Conceptual Model for Re-Entry Mediation Training Program*

<table>
<thead>
<tr>
<th>Inputs</th>
<th>Activities</th>
<th>Outputs</th>
<th>Short-Term Outcomes</th>
<th>Mid-Term Outcomes</th>
<th>Long-Term Impacts</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Staff and contractors</td>
<td>• Research</td>
<td>• Supported team of trained facilitators</td>
<td>• Trainees developing their own tools for effective facilitation</td>
<td>• Program process</td>
<td>• Decreased recidivism</td>
</tr>
<tr>
<td>• Time</td>
<td>• Training layout: number, format, location, and topic of training sessions</td>
<td>• Trainee confidence and ability to work with incarcerated and vulnerable persons</td>
<td>• Trainees participating in re-entry mediation</td>
<td>• Program stability</td>
<td>• Increased funding and programming for inmate reintegration into communities</td>
</tr>
<tr>
<td>• Funding</td>
<td>• Training manual development</td>
<td>• Healthier relationships between inmates and their families/friends/communities</td>
<td>• Trainees experiences informing future training sessions</td>
<td>• Standardized training format for future training</td>
<td>• Reduced stigma for incarcerated persons</td>
</tr>
<tr>
<td>• Volunteers</td>
<td>• Program and training marketing</td>
<td>• Community awareness of re-entry mediation program</td>
<td>• Increased program funding</td>
<td>• Increased program scope, including mentorship opportunities for inmates</td>
<td>• Increased public awareness of issues facing inmate populations</td>
</tr>
<tr>
<td>• Technological equipment</td>
<td>• Program framework and form development</td>
<td>• Community resources and partnerships</td>
<td>• Program stability</td>
<td></td>
<td>• Increased scope for mediation processes</td>
</tr>
<tr>
<td>• Knowledge and expertise</td>
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</table>

Dialogue and Resolution Services (DRS) had two full-time staff, and a contractor hired as a project coordinator when it started work on the re-entry mediation program design. The project coordinator, a practicing mediator who had previously contracted with the client on other projects, had extensive knowledge and expertise in mediation and restorative justice (RJ) practices. The client and project coordinator were involved in design and delivery of training, design and implementation of the re-entry program, and the programs case management. The second staff member, the organization’s administrative director, offered support throughout the re-entry program and training design, and implementation process.
The client obtained funding from the Victoria Foundation to complete a training process and implement the re-entry mediation program. DRS had volunteers, office space, and the equipment needed to implement the training process. Training activities focused on developing information and tools for facilitators to use in their mediations, developing processes for client intake, client screening, case management, client follow-up, and case termination, and promoting the re-entry mediation program to community organizations. Outputs for the training process focused on building trainees’ capacity and comfort working with previously incarcerated persons who may have multiple barriers to accessing services, including addiction concerns, and physical and mental health concerns. The client attempted to ensure trainees felt supported in their role as facilitators and experienced a team ethic towards their fellow facilitators and program leads.

As shown in the conceptual model, short-term outcomes focus on outcomes of a successful re-entry program, such as client satisfaction and community awareness of the re-entry service. Mid-term outcomes focus on how the program might evolve, as it becomes a more supported program. Long-term impacts focus on the long-term values and goals of the program, such as decreased recidivism, decreased stigma on the inmate population, and more inclusive communities for incarcerated persons suffering from multiple barriers.

**Research Design**

This project used an evaluative research design to assess DRS’s re-entry mediation training process. Both formative and summative evaluation were used. McDavid, Huse, and Hawthorn (2013) describe formative evaluation as the evaluation of a program implementation process to provide recommendations to program managers for how to create more effective programming; whereas summative evaluation is described as evaluation that focuses on whether a program achieved the expected outcomes (p. 23).

The research process was conducted in two phases. First, trainees provided feedback on training sessions by completing evaluation forms. Second, once trainees facilitated a re-entry process applying the training, they were interviewed to assess the degree to which the training prepared them for their role as facilitators. Information from these interviews was used to evaluate DRS’s training process and make recommendations on how the training model could be made more effective.

Training consisted of seven sessions and ran in the evenings from approximately 5:00pm to 8:30pm except for the sessions on violence screening. Violence screening was taught as a three-part session; training running for two-days from 9:30am to 3:00pm, and the third day practice session running from 5:00pm-8:30pm. Trainees were able to decide which sessions they wanted to participate in, in consultation with a DRS team member, based on trainees’ understanding, comfort, and skill level with the training topics. All participants were required to participate in the first and last session.

The first session was an introduction to the re-entry mediation program and its goals. The first session also discussed Cultural Competency and Anti-Oppressive Practice. The other sessions include Mental Health/Addiction, Restorative Practices/Harm, Violence Screening Training, which was divided into three training sessions, Legal Structure and Prison
Culture, Family Mediation, and Trauma-Informed Practice. The final session was a role-play session using sample case scenarios that allowed facilitators to practice their skills as re-entry mediators.

Sessions were delivered in a variety of ways; some focused on content, some focused on practicing skills, and others took a narrative approach to facilitate learning, in which personal stories and experiences were shared with the group. Sessions were conducted in three locations: the DRS office, the client’s home office, and the Victoria Restorative Justice Society office.

The client and project coordinator organized where and how training sessions would be conducted. The client was a trainer in the sessions on cultural competency and anti-oppressive practice, violence screening training, and family mediation, and provided information and resources on all session topics. Both the client and project coordinator provided training support during all sessions, and coordinated program design and development for the re-entry mediation project. The second staff member, the administrative director, offered support in organizing the re-entry training sessions and was a participant in the sessions.

**Recruitment**

The client and project coordinator selected nine participants to complete the re-entry mediation training process. These nine trainees were chosen as research participants by the researcher, because they would best inform how effective training was in preparing them for re-entry mediations.

Participants were chosen by the client and project coordinator through a combination of a posted Request for Expressions of Interest, and direct recruitment of former contractors, mediators, mentees, and staff of organizations known by both client and project coordinator. Participants’ backgrounds included work in RJ, psychology, mediation and dispute resolution, research, training, work with Aboriginal groups and individuals, and consultation and engagement work. As a result of the trainees’ expertise and the diversity of backgrounds, some trainees acted as trainers for certain sessions. This allowed the rest of the group to gain expertise and real-life case examples from individuals trained in specific session topic areas.
Data Collection

Data was collected using evaluation forms and interviews with participants. Evaluation forms consisted of eleven questions asking participants about their area of practice, whether the pre-session reading material was effective for learning, and the strengths and limitations of training. Evaluation forms were provided to participants at each training session. The names of trainees who participated in each session remained confidential.

Ten participants, including the second staff member, participated in training. Attendance varied by participants’ background and availability. Eight participants attended the session on anti-oppressive practice and cultural competency. Seven participants attended the session on addictions. Eight participants attended the session on RJ. Part one and two of violence screening training had six participants and part three of violence screening training had five participants. Ten participants attended the session on prison culture. Six participants attended the session on family mediation. Lastly, ten participants attended the practicing skills through role-play session. See Appendix One for trainee evaluation forms.

Interviews were conducted after completion of the training, and involved three trainees, the training developer, and the training coordinator. All of these individuals had been involved in a re-entry mediation process, in various capacities. Two were interviewed in person and three were interviewed by phone. A semi-structured interview process was used for the interviews. Semi-structured interviews use questions or themes that allow the interviewer flexibility to individually explore interviewees’ responses while also obtaining a certain level of standardization across interviewees’ responses (Patton, 2002, pp. 342-347).

Interviews were audiotaped where consent was provided. Notes were also taken during the interviews on key themes emerging from discussions with participants. Interviews were then transcribed and inputted electronically into a Word document. Written information such as transcribed audiotapes, evaluation forms, and notes, were assigned a letter associated to participants’ responses.

Trainees were asked eleven questions in their interviews, including their area of practice, how the mediation process went, and how they felt training equipped them for their re-entry mediation session. General themes of the interview focused on whether training equipped facilitators for mediation; how training could be improved; prominent issues that emerged in the mediation; logistics of the mediation process; skills used in the mediation sessions that were helpful to the process; and the overall environment/climate of the mediation session. Interviews allowed the researcher to evaluate the effectiveness of the initial facilitator training process, and focused on what the strengths and limitations of training were. See Appendix Two for the interview questions.

Data Analysis

Training session evaluations were analyzed by grouping participants’ answers by the questions asked on evaluation forms. Evaluation answers were then coded for common themes regarding training strengths and limitations identified by the trainees.
Interview transcriptions were analyzed using thematic analysis, where themes emerged based on recurring ideas of participants’ responses. Thematic analysis was used because it is a flexible approach in qualitative research that allows for detail to be gained from participants’ data (Braun & Clarke, 2006, pp. 78-79). Themes were identified deductively, based on the evaluation and interview questions, as well as inductively, from participants’ responses. Data was considered a pattern or theme, based on how often participants across data sets referred to the topic, and how relevant the topic was in helping inform a more effective training design.

**Limitations**

Training was conducted with a small number of participants known by the client. Participants may have been concerned by having to evaluate the client, and fellow participants in sessions where their fellow trainees were session trainers. To mitigate this limitation evaluation forms were made anonymous.

Participants evaluated their own prior learning and experience in consultation with the project client to determine which sessions they would participate in. This impacted group dynamics at each session, and did not allow for a consistent assessment of how each participant found each session. Anonymous evaluation forms helped to mitigate this limitation, allowing participants to choose whether they wanted to evaluate the sessions they attended.

The researcher was both a volunteer with DRS and was part of the training process. This allowed her to have a better understanding of the organization and training process, and answer any questions participants had regarding the research. The presence of the researcher at training however, may have limited participants’ comfort when completing evaluations or interviews, especially if participants were concerned about how the researcher would interpret their responses.
CHAPTER FIVE: FINDINGS

Re-entry mediation training was developed and implemented by the client. Training focused on equipping trainees to facilitate dialogues between previously incarcerated persons and their family members, partners, and others they want to (re)connect with. The training consisted of nine sessions, with the session on violence screening split into three separate sessions. Facilitators completed evaluation forms after each session. Participants of the training program were asked to complete follow-up interviews once they had facilitated a re-entry mediation case file. The training evaluations provide information on training sessions and how they could be made more effective. The interview results focus on the re-entry mediation process and the degree to which facilitators felt they had the necessary tools to mediate re-entry mediation case files.

Evaluation of Training

This section contains seven components: Effects of Additional Training Materials, Delivery of Information, Strengths of Training, Training Limitations, New Learning’s and Insights Gained, Pace of Training, Location and Space of Training, and Appreciation and Feedback, and Future Outlook.

Effects of Additional Training Materials

Session one: anti-oppressive practice and cultural competency. Four of six respondents indicated that the additional training materials were complementary to the in-person training sessions. Of these four respondents, three said the material was relevant, with the fourth respondent indicating that having the theoretical readings, and the personal narrative and staff wisdom in the in-person sessions was effective. Two of six respondents indicated not having read the additional materials. Of these respondents, one indicated not having read the materials, and not knowing there were materials for the module, and the other indicated not reading the material, wanting to do the in-person training session first.

Session two: addictions. Three of five respondents indicated that the training materials were relevant to the in-person training sessions. Of three respondents, one indicated that much of the materials on addictions was already known, but seeing the relevance of the topic to “our target population was powerful”. Of five respondents, one indicated not having read the material, and another respondent wrote “not applicable”.

Session three: restorative justice. All four respondents indicated that the training materials were complementary to the in-person training sessions. Two respondents indicated that the video was impactful; one respondent indicated it was “excellent”, while the other indicated that it was “very emotional”. One of the four respondents indicated that the materials were relevant, clear, and well structured.

Session four: violence screening part one. One respondent indicated that the training material added to their learning.
Session five: violence screening part two. All three respondents indicated that the training materials were relevant to the in-person training sessions. One respondent indicated that it would have been helpful to be told to read certain parts prior to training as well as the additional cheat sheets provided. Another respondent indicated that it was good to discuss and go in-depth into the material.

Session six: violence screening part three. Two of three respondents indicated that the training materials were relevant and complementary to the group training sessions. Two of three respondents indicated that it was helpful to have the Zutter script and Zutter questions in advance.

Session seven: prison culture. Three of four respondents indicated that the training materials were relevant and complementary to the in-person training sessions. One of four respondents indicated that the materials sent were “straight forward”, and that it would have been helpful to discuss the material in-person. This respondent also indicated that they “appreciated the more personal material of the session”. Another respondent indicated that they had not yet read the training materials.

Session eight: family mediation. All two respondents indicated that the training materials were relevant to the in-person/group training sessions. One respondent indicated liking having a list of steps and the table format, as well as information comparing transformational and problem solving mediation. This respondent also indicated that it might be useful to have a “checklist handout” of the five mediation stages.

Session nine: final role-play session. Two of four respondents indicated that the training materials were relevant to the in-person training sessions. Of these two respondents, one indicated using training materials to create a checklist to prepare for the facilitator role. One of the four respondents indicated that the re-entry mediation process outline provided at the beginning of the session was helpful. Another of the four respondents wrote not applicable, but indicated that all of the materials were relevant because it was practice day.

Delivery of Information

Session one: anti-oppressive practice and cultural competency. All six respondents found the presentation style, narrative, effective for their learning. One respondent described the narrative approach to training, as “engaging”, while another respondent indicated that the delivery of information was “very emotionally effective”. Two of six respondents commented on presentation style. One of the two respondents indicated that the presentation style was excellent, and the other indicated that the presentation style was great, and that “storytelling made the information have powerful context”. One of the six participants indicated that conversation was the best way to deliver information given the personal nature of the content.

Session two: addictions. All five respondents indicated that the delivery of information was effective. Two respondents indicated that it was helpful to have the PowerPoint in the session, and one of the five respondents indicated appreciating that the PowerPoint would be sent out. Another respondent indicated that having a combination of both storytelling
and PowerPoint facts were a “winning combination”. One of five respondents indicated enjoying “hearing personal stories” of how people persevered through difficult circumstances.

Session three: restorative justice. All three respondents indicated that the delivery of information was effective. One respondent indicated having “loved it”, appreciating the group work and brainstorming process. Another respondent indicated that the mixture of overhead, video, and verbal presentation was very effective for their learning.

Session four: violence screening part one. All four respondents indicated that the delivery of information was effective for their learning. Two respondents indicated that they liked the various methods used to engage participants. Two respondents highlighted that the combined use of PowerPoints, videos, discussion, and written materials were great. One respondent indicated appreciating the ability to talk in depth about a complicated topic. Another respondent indicated liking “the conversational style” of training. This respondent also indicated advanced notice that material on violence could be triggering might better prepare people for the discussion topic.

Session five: violence screening part two. Two of three respondents indicated that the delivery of information was effective. One of the two respondents indicated that the discussion was good but there was not enough time to practice the material. One of the three respondents indicated liking the article received from the first session. Another of the three respondents indicated that there were technological issues around printed materials, but the material was available on PowerPoint, which worked okay.

Session six: violence screening part three. All three respondents indicated the delivery of information was helpful. One respondent indicated that role-playing was challenging and valuable, and that having the demonstration beforehand as well as debrief after, was helpful. Another respondent indicated that role-playing is “intimidating but useful”, and that being able to receive feedback from trainers was helpful.

Session seven: prison culture. Three of four respondents indicated that the delivery of information was effective. One of three respondents indicated that the speaker’s personal story had an “incredible impact”, and another of the three respondents indicated that no other materials were necessary, just the speaker. Two of four respondents indicated some discomfort sitting, looking, and listening to the speaker for a long period of time.

Session eight: family mediation. All two respondents indicated that the delivery of information was effective for their learning. One respondent indicated that having notes on the board in front, hit all the main points.

Session nine: final role-play session. All four respondents indicated that the delivery of information was effective. One respondent indicated role-playing was “valuable for this work”, and another indicated it was “helpful”. One respondent indicated enjoying the role-play as well as the mock mediation video. Another respondent indicated that role-playing was “a valuable learning experience” and that being able to obtain feedback, and debrief the role-play was useful.
Strengths of Training

Session one: anti-oppressive practice and cultural competency. All six respondents indicated aspects they enjoyed about training. Four respondents highlighted that connecting with other practitioners and sharing information and wisdom, as well as gaining new knowledge from others was beneficial. One of six respondents indicated that the friendly, authentic, and genuine nature of the trainers made the training enjoyable. Three of six respondents highlighted that the in-depth personal stories, real life experiences, and storytelling aspect of training was enjoyable. One of six respondents indicated that the food was beneficial, as was the content, which was “very relevant”. All six respondents highlighted information they found useful in the session. One of six respondents indicated that all of it was useful. Two of six respondents indicated that the speaker's personal knowledge, and the storytelling aspect of the session was useful. Another of the six respondents indicated that it was useful to ask questions and hear from a professional who works with the same population. A different respondent highlighted that information on proper protocol when supporting a person with an Indigenous cultural background, was helpful. The last respondent indicated that the “did you know” aspect of training was helpful, as it re-affirmed what the respondent knew.

Session two: addictions. All five respondents indicated they enjoyed the training session and the presenter’s presentation style. Two respondents indicated that the practical information and the personal story with relevant examples were beneficial. Two respondents indicated that storytelling, and hearing the speaker’s real-life experience was beneficial. The fifth respondent indicated appreciation for how honest the speaker was, especially in connecting their personal experiences with their passion for helping others. All five respondents indicated they had learned useful information during the training session. One respondent indicated that all of it was useful, while another indicated that facts relating to addictions were helpful to know. Another respondent indicated it was useful learning more about the presenter’s organization, the supports the organization offers, and how they advocate for people that access their services. Of the two other respondents, one indicated it was helpful learning ways to talk about substance use with family members of the user, as was information regarding services. The other respondent indicated it was useful to hear that the notion of unconditional positive regard will provide important support.

Session three: restorative justice. All four respondents indicated what they enjoyed about the session. One respondent indicated liking everything, specifically, the summary, background, and process of restorative justice (RJ), as well as the group discussions and shared experiences of those in the room. Another respondent indicated that it was great learning about RJ, and doing the case discussions. The third respondent indicated that the practice sessions and pre-mediation activities were enjoyable. The last respondent indicated that the workshop was very well put together, and there was lots of background provided and great exercises. Three respondents indicated that they found all the information in the session useful. One of the three respondents indicated that knowing everything about the process was useful. One of the four respondents indicated that the experience of the first exercise was useful.
Session four: violence screening part one. All four respondents indicated that they enjoyed the session. Three respondents indicated that the discussion, relationship building and contributions from group members were something they enjoyed. Of these three respondents, one indicated enjoying the “easy going pace”, and the half hour taken for lunch instead of the whole hour, feeling training was both valuable with relevant content. The second of the three respondents indicated that the discussion was great, collaborative and engaging, and the videos were interesting. One of the four respondents indicated liking how the types of violence were broken down into four categories plus two more. This respondent indicated also enjoying the videos. All four respondents indicated various content they found useful. Two of four respondents indicated they found the four types of violence useful. One of these two respondents also indicated that the legal definitions were useful. The other of the two respondents indicated also liking the Gottman video showing the body language of violent men. One other respondent indicated really enjoying the videos, finding them useful. The last respondent indicated that the annual report of domestic violence death review was useful because it was new information.

Session five: violence screening part two. All three respondents indicated enjoying the session. Two respondents indicated they enjoyed the group discussions and support of the group. One of these two respondents indicated that they enjoyed the practical tools and the discussion, compassion and support of the group. The other of the two respondents indicated enjoying the camaraderie, trust, openness, vulnerability of the group, and the great questions from the discussion. The third respondent indicated enjoying the practical aspect of the session, as well as talking about real life cases and dealing with ethical issues. One of the three respondents indicated that the whole session was useful. Another of the three respondents indicated that the Mediator’s Assessment of Safety Issues and Concerns (MASIC) tool was useful as was discussing it and learning the trainers’ approach with the tool. The third respondent indicated that it was useful breaking up the intake by screening, preparation, process design, rapport building, education pieces, and more.

Session six: violence screening part three. All three respondents indicated enjoying training. One respondent indicated enjoying taking turns with the role-play. The second respondent indicated enjoying the opportunity for practice and feedback. The last respondent indicated enjoying talking about and debriefing session activities. One of three respondents indicated finding it useful to provide a context to the scenario, as well as the pro-mock mediation, and the opportunity to provide feedback. The second respondent indicated that the Zutter script was useful and their preference of this tool to the MASIC tool. The third respondent indicated that the discussion during brief was useful.

Session seven: prison culture. All four respondents indicated they found the personal experience and stories in the session enjoyable. One respondent also indicated enjoying the presenter reading from an upcoming book. This respondent also indicated really liking guest speakers, and appreciation for those who talk openly and can give advice on how this work will be perceived by the clients. Two of four respondents highlighted the presenter’s personal experience as being useful. One of the two respondents indicated that it was useful to be able to ask the presenter questions, and that the presenter’s openness about experiences faced was useful. Of the other two respondents, one indicated that it was useful
to know what it is like dealing with professionals. The other respondent indicated that the information about the presenter’s experiences while incarcerated and released, was useful. This respondent also indicated that everything discussed about the criminal justice system (CJS) was useful.

Session eight: family mediation. All two respondents indicated enjoying training. One respondent indicated enjoying being asked what trainees want to learn at the start of the session, as well as the comparative chart in the handout and discussion. The second respondent indicated enjoying the in-depth discussion, and the mediation experiences and examples given by the trainers. This respondent also indicated that it was helpful to hear how the work unfolds “‘in real life’”. One respondent indicated that knowing the difference between positions versus interests, and knowing the steps of the mediation model was useful.

Session nine: final role-play session. All five respondents indicated enjoying training. One respondent indicated enjoying role-plays, while another respondent indicated enjoying debrief and feedback. Three of five respondents indicated that they enjoyed seeing other people’s styles, approaches, strategies, and skills. One of these three respondents also indicated enjoying hearing about the process again, and being able to try things out in a safe environment. One respondent indicated it was useful to debrief role-plays. Three of five respondents indicated that they found getting feedback helpful. One of the three respondents indicated it was helpful to get feedback from all parties as well as be able to practice skills. The other two respondents indicated that getting tips and feedback from trainers was useful.

Training Limitations

Session one: anti-oppressive practice and cultural competency. Three of four respondents indicated topics they would like more exposure too. One of three respondents indicated that trainees were told they could ask anonymous questions to the presenter. This respondent indicated excitement for it, though it never happened. Another of the three respondents indicated feeling that a lot had to be learnt regarding working with other cultures, and that there is a lot that cannot be taught. This respondent also indicated that learning would come through experience. One of the three respondents indicated wanting more exposure and information regarding culture and cultural practices. The fourth respondent indicated that nothing was missing from the session, and there was nothing they would have liked more exposure on.

Session two: addictions. One of four respondents indicated wanting more exposure on the topic. This respondent would have liked more clear strategies on how to broach the topic of addictions with clients and their families. Of the other three respondents, one indicated that the topic is broad so it is difficult to say what more could have been discussed. The other respondent indicated being unsure of what more could have been discussed. The last respondent indicated that there was nothing missing from training.
**Session three: restorative justice.** One out of two respondents indicated wanting more exposure on the transfer of practice from RJ to re-entry mediation. The second respondent indicated nothing was missing from training.

**Session four: violence screening part one.** Two of four respondents indicated that outlining what was missed in the training would depend on what violence screening training in part two looked like. One of the four respondents indicated their hope that the screening tools would be discussed in part two of the violence screening training. Another of the four respondents indicated that nothing was missed, but more time was needed for the session.

**Session five: violence screening part two.** All three respondents indicated what they felt was missing from training. One respondent indicated wanting a cheat sheet for the MASIC tool. Two respondents indicated that they felt the practice and role-play aspect was missing from training. Of these two respondents, one indicated it was hard to answer what was missing from training because mediation or an actual risk assessment had not yet been done.

**Session six: violence screening part three.** Both respondents indicated that nothing was missing from training.

**Session seven: prison culture.** One of two respondents indicated that the session was missing information about prison and the legal system. This respondent also indicated that it would have been useful to discuss some of the additional training material provided, as a group. The other respondent indicated nothing was missing from training.

**Session eight: family mediation.** All two respondents indicated topics they would have liked to discuss in training. One respondent indicated wanting more tips and tricks on how to maneuver through past issues that people might bring up in sessions. The other respondent indicated wanting more exposure on common challenges and themes that come up in family mediation. This respondent also mentioned that the session talked a lot more about mediation in general.

**Session nine: final role-play session.** All four respondents indicated some changes that could be made to the training session. Two respondents indicated that the session was a bit short. One of these two respondents indicated that a longer session would have been helpful, and that more time practicing would be beneficial. The other of the two respondents indicated that the session ran short on time, but a lot was still learned. One of the four respondents indicated that it would be nice to have done two pre-mediation session role-plays, as well as a full session, so that facilitators could “learn how it will feel and what to expect”. Another of the four respondents indicated wanting more exposure on cultural diversity options.

**New Learnings and Insights Gained**

**Session one: anti-oppressive practice and cultural competency.** Four of five respondents indicated that they had learned something new. One of these four respondents indicated loving the presenter’s perspective, and the comparisons made between different cultural
dynamics. This respondent and two other respondents highlighted the example of looking for the leader, matriarch, in Aboriginal settings, as a way to discover the clients’ needs. One of the four respondents indicated appreciating knowing protocol, such as the seven teachings. Another of the four respondents indicated feeling more comfortable moving forward after this training.

Session two: addictions. All five respondents indicated various pieces of information they learned from the session. Three respondents discussed learning related to facts about addictions. One of these three respondents discussed learning about statistics on addiction, what services the presenter’s organization offers, how to support people who use substances, and how to balance “unconditional positive regard” with boundary setting. Another of the three respondents indicated more generally that they learned new facts and information about services offered by the presenter’s organization. The last of the three respondents indicated that they learned about the proportion of addictions to substance use. Of the two other respondents, one indicated learning information on how addictions can impact family members, and the other respondent indicated learning about access to systems.

Session three: restorative justice. All four respondents indicated they learned about RJ. One respondent indicated learning about the RJ process. Another respondent indicated they learned how RJ works and what the organization does.

Session four: violence screening part one. All three respondents indicated they learned something new. One respondent indicated learning the rules and regulations of family mediation, the four types of violence, and more about what facilitators will be doing in the re-entry mediation program. Another of the three respondents indicated that the whole session provided new learning.

Session five: violence screening part two. All three respondents indicated they learned something new. One respondent indicated that everything in the session was new learning. This respondent highlighted learning’s related to cobras versus pitbulls, statistics related to violence, risk factors, and defining personal boundaries around what kind of client’s facilitators are comfortable working with. The second respondent indicated that the MASIC tool, as well as the material in the manual was new learning. This respondent highlighted how hearing the trainer’s experiences and approaches to the work was new and great information.

Session six: violence screening part three. All two respondents highlighted information that was new. One respondent discussed learning about the story introduction in screening. The second respondent indicated that the role-plays helped provide a sense of what their personal strengths and weaknesses are with the skills that were used.

Session seven: prison culture. Two of three respondents indicated learning something new from the session. One of these two respondents highlighted learning about drugs and use, and the other respondent highlighted “learning about someone’s perspective”, which was appreciated. The third respondent indicated having heard similar stories and so had not learned something new.
Session eight: family mediation. All two respondents highlighted new learning’s. One respondent discussed learning about the family mediation models’ steps, and transformative versus problem solving models of family mediation. The other respondent also highlighted learning about transformative mediation, and discussed learning practical tips used by the session trainers, as well as information about the re-entry mediation program. This respondent indicated appreciation for the conversation about the differences between RJ and mediation.

Session nine: final role-play session. All four respondents indicated they had learned new information. One respondent discussed learning little things about good facilitation. Another respondent indicated learning the difference between mediation and RJ, as well as how to respond to escalating and inappropriate behavior. The third respondent indicated learning some of the difficulties with co-mediating. The fourth respondent indicated learning skills and techniques that other facilitators used, through watching them in role-plays.

Pace of Training

Session one: anti-oppressive practice and cultural competency. Three out of five respondents indicated a need for more breaks. One of the five respondents indicated that the session went over the time limit, and built in breaks every hour would be appreciated. Another of the five respondents indicated that the pace was effective, specifically for the information regarding First Nations culture. One of the five respondents indicated the session was “a marathon, but fun”.

Session two: addictions. Four of five respondents indicated the pace was good. Two of five respondents discussed the need for breaks. One of these two respondents indicated appreciating the time for questions at the end of the session.

Session three: restorative justice. Three out of four respondents indicated that they liked the pace of training. One of the four respondents indicated the break was too long. Another of the four respondents indicated that the conversation was intriguing throughout the session.

Session four: violence screening part one. Two out of three respondents indicated the pace was good. One of the two respondents indicated that there were a good number of breaks, whereas the other indicated that sitting and discussing all day made the day a bit long. The second respondent also indicated that breaking into smaller groups, or doing an activity might have been helpful. One of the three respondents indicated that the room was a bit hot and small for the PowerPoint projection.

Session five: violence screening part two. All two respondents indicated the pace was good. One respondent indicated that there was a lot of information given between day one and day two of the violence screening sessions, and that it was “emotionally exhausting” information. The second respondent indicated that the session started to feel rushed at the
end, it also moved into discussing both training and program design, which was good but took time.

Session six: violence screening part three. Both participants indicated that the pace of training “perfect” and “great”.

Session seven: prison culture. Three of four respondents indicated that the pace was good. One of four respondents indicated that two short breaks would have been nice, and stated that there were no exercises.

Session eight: family mediation. All two respondents indicated that the pace of training was good. One respondent indicated that the breakdown was great, as was the time allocated for questions and discussions. The second respondent indicated that the session was over time, “which usually happens.”

Session nine: final role-play session. Three of four respondents indicated the pace of the session was great. Of these three respondents, one indicated that it was nice to talk before actually doing role-play sessions, giving time to prepare. The other of the three respondents indicated that more mock mediation experience might be required. One of the four respondents indicated that the pace was good, however less time could have been spent on the process of the program and more time allocated for practicing skills.

Location and Space of Training

Session one: anti-oppressive practice and cultural competency. Four out of five respondents indicated that the space and location of training sessions was good. One of the four respondents indicated that it was cozy, and another of the four indicated that the chairs were great as was the food. One of the five respondents indicated that more breaks would have been beneficial.

Session two: addictions. All five respondents indicated that the space of training was good. Two respondents indicated that it was comfortable, with one of these respondents indicating that the low light and chairs being in a circle helped make the area comfortable. One of the five respondents commented that the traffic was heavy on the way to the session location.

Session three: restorative justice. All four respondents indicated that the location and space of the training session was good. Two respondents indicated that it was lovely, and two respondents indicated that it was great. One of the four respondents indicated that they liked the circle approach.

Session four: violence screening part one. All two respondents indicated that they liked the space and location of the training. One respondent indicated being glad to receive training and appreciating the additional handouts and snacks provided, but being unsure if the old video shown was helpful or accurate.
Session five: violence screening part two. Two out of three respondents indicated that the space and location were good. One of three respondents indicated that the location and space worked well for the group. Another of the three respondents was unsure if the older information presented was accurate. This respondent indicated appreciating the check-in at the beginning of the session.

Session six: violence screening part three. All two respondents indicated that the space and location of the session were good.

Session seven: prison culture. Two of four respondents indicated that the space and location of training were good. One of the four respondents indicated that the room was a bit cramped because of all the people. Another of the four respondents indicated it was difficult to drive to the area during rush hour.

Session eight: family mediation. All two respondents indicated that the location and space of training were good. One respondent indicated it was difficult to read the writing and notes on the glass door.

Session nine: final role-play session. All four respondents indicated they liked the location and space of training. Three indicated they loved it, and one indicated the space was comfortable.

Appreciation and Feedback

Session one: anti-oppressive practice and cultural competency. All four respondents indicated their appreciation for the session. One respondent indicated wanting to spend more time on the topic. Another respondent indicated liking the pace and aura of the environment. The third respondent thanked both trainers and presenters for sharing with the group. The last respondent indicated loving the training.

Session two: addictions. All two respondents indicated appreciation for the session. One respondent indicated the presenter was a wonderful person, and the other respondent indicated enjoying the evening.

Session three: restorative justice. One respondent indicated their appreciation. This respondent was thankful, and indicated it was a great night.

Session four: violence screening part one had no respondents.

Session five: violence screening part two. One respondent indicated their appreciation for the trainers and the immense effort trainers put into training, and for the trainers being collaborative with the group. This respondent indicated that it was nice to discuss issues that were not easy.

Session six: violence screening part three had no respondents.
Session seven: prison culture. One respondent asked if the trainers would see the feedback forms before training was finished. This respondent indicated that some changes could be implemented quicker. This respondent also indicated that the presentation could have been shorter, and that the session got weird at the end.

Session eight: family mediation. One respondent indicated wanting at least five minutes at the end of each session to complete the evaluations, to write things down while they are fresh.

Session nine: final role-play session. All three respondents indicated appreciation for the training. One respondent indicated that the last training session was a favorite.

Future Outlook

Session one: anti-oppressive practice and cultural competency. Two respondents indicated the degree to which they felt prepared to conduct a re-entry mediation. One of the two respondents indicated they felt unprepared but felt more prepared after the first session to imagine being in that position. The second respondent indicated still feeling nervous and incompetent, specifically in facilitating a session with an Aboriginal family. This respondent also indicated feeling unsure whether any amount of training would shift that.

Evaluation of the Effect of the Training on Practice

The following are findings based on interviews with five individuals who were on case files. Three of the interviewed participants had gone through the re-entry training process. The fourth individual was the training and program developer, and the fifth was the project coordinator. Interviewees were on case files in various capacities, including facilitator and coaching roles. Primary topics included the Re-entry Mediation Process, Communication with Clients, Communication with Team Members, Case File Concerns and Process Changes, Dynamics in Facilitating Re-entry Mediation Cases, Readiness to Facilitate a Re-entry Mediation File, Helpfulness of Training for Facilitators, and Training Gaps and Future Training Development.

Re-entry Mediation Process

Four respondents indicated that they had pre-sessions with clients. One respondent indicated that both facilitators organized pre-sessions with clients to introduce themselves, their role as facilitators, the mediation process, and to ask clients what they would like out of the process. The second respondent indicated completing initial phone calls to clients, individual pre-sessions, and then a session with all parties together. The third respondent indicated meeting clients in person for individual pre-mediations, and then at various locations depending on the client’s availability and situation. This respondent indicated that during pre-mediations, the facilitators would assess the risk of the situation, and learn about the clients. The fourth respondent indicated they developed a profile of the clients, and connected with their co-facilitator to have individual pre-sessions assessing clients’ needs.

Four respondents indicated that a joint session was done after individual pre-sessions. Two respondents indicated that they provided clients with homework in the joint session for
clients to work on individually and with their coaches. Both respondents indicated that after clients had met with their coaches, they came back in a joint session. One of these two respondents indicated that no caucusing was involved in the joint sessions. The second respondent indicated doing a joint session after homework was provided to clients, to see if clients had any questions. The homework clients were asked to complete asked questions about the clients’ relationship, such as their needs and expectations of each other. The third respondent indicated that in the joint session, facilitators identified their role and the process, asked clients to talk about what they were struggling with, and then asked clients to recount their experiences pre- and post-incarceration. The fourth respondent indicated doing one joint session to provide the clients with information. This respondent indicated that after the joint session was completed, consultation was done with other parties that clients were connected too, including psychologists, and parole officers. The respondent indicated providing psychologists and parole officers with information on the child protection process, explaining the differences in standards between Ministry of Children and Family Development (MCFD) processes and the processes of the CJS, so that these professionals could offer more effective support to clients involved with MCFD. This respondent created a list of resources for clients, including anger management training, communication strategies, and mental health resources.

Three respondents discussed going over forms with clients, such as confidentiality agreements. One respondent indicated that an agreement to participate was completed with clients, clients were provided with signed copies of the forms, and confidentiality was discussed. This respondent indicated that in the process, no mediation agreement was done, as there was no mediation. This respondent also indicated that no real model exists for this work, and no specific steps on how to create an agreement. The second respondent indicated that no formal agreements were formed because clients discussed what they needed to, although some verbal agreements were made. The third respondent indicated that in coaching sessions, confidentiality was discussed, as well as how information was going to be shared with facilitators. This respondent indicated having their client sign a coaching agreement, where the coach’s role and the limits of confidentiality were discussed.

Three respondents discussed their roles in the re-entry mediation process. The first respondent indicated liaising with MCFD, connecting with the clients, connecting with community resources that clients were connected too, and providing coaching and support to clients. This respondent also reported to facilitators, connected with clients’ family members, and liaised with the other client’s coach. The respondent also worked to identify clients’ challenges, what client’s needed to develop capacity on, identified clients’ strengths to help build the clients’ self-efficacy, and supported clients in dealing with other resources and agencies clients were connected too. The second respondent indicated that there were two facilitators, and the other party had a coach as well. This respondent indicated meeting with their client twice, based on the number of hours assigned to the case. Sessions focused on assessing needs and completing homework assigned by facilitators, which included building clients’ capacity, addressing clients’ fears, identifying next steps for the client, and finding ways to empower the client. This respondent indicated not knowing where the sessions were in the case process, but that it might have been after the pre-sessions. This respondent also indicated that it was facilitators who decided the number of coaching
sessions for the client. The respondent indicated that if needed, more client sessions could have been asked for, to deal with any client concerns or issues. The third respondent discussed potential roles in future re-entry cases. This respondent indicated that in cases with MCFD involvement, where sexual assault is involved, re-entry mediations could come from a re-unification lens to support families, and support adults in having tough conversations about the charges. This respondent also indicated that a concern when choosing files was the amount of commitment files would be, especially if it involved connecting with other people in the clients’ lives, like in family group conferencing.

Two respondents discussed the closing of re-entry files. The first respondent indicated not remembering learning anything about what had to be done to close files. The second respondent indicated closing the file after finishing coaching. This respondent indicated it should have been kept open until the entire process was complete. This respondent also indicated that there was no debrief or evaluation process at this point in the case. The respondent indicated that debrief for both team members on cases, as well as for facilitators that received re-entry training, would be great; allowing team members to talk about challenges and positive outcomes, and learn from one another. This respondent also indicated that it was important to get feedback from clients about their experiences of the process and how facilitators can more effectively meet their needs.

Communication with Clients

Two respondents discussed their role with clients. The first respondent indicated wanting to be clear with clients about roles and clarify any expectations clients might have of facilitators. This respondent indicated telling client’s that facilitators might have conversations with clients’ coaches to help clarify everyone’s role, and to check how the process was for clients. The second respondent indicated that in speaking with clients, both confidentiality and informed consent were important in ensuring clients were served in the best way, and that the process was transparent and collaborative.

One respondent discussed connecting with the clients throughout the process to assess client needs and provide ongoing support. Another of the five respondents indicated doing a lot of work trying to manage clients’ expectations of being out in community while also still being regulated by other systems, such as the CJS. This respondent indicated that their team member outlined various agencies that the client could go to for more support. Supports included violence management courses.

Two respondents indicated they asked clients for feedback. One respondent indicated asking clients whether they felt the process was meaningful to them.

Communication with Team Members

Three respondents discussed communication with team members. One respondent indicated discussing what their roles were and what recommendations they could make to clients, with their co-facilitator. This respondent indicated meeting with the co-facilitator prior to every meeting with the client. This respondent also indicated having lots of open dialogue with their co-facilitator, communicating through emails, text messages and more, to discuss
how to approach sessions, and who wanted to do what tasks. For this respondent, it was good to have conversations identifying who would take what part of the process. The second respondent indicated debriefing sessions with the co-facilitator after every meeting with the client. This respondent indicated it was necessary for co-facilitators to debrief, to assess case dynamics. The third respondent indicated that no communication happened with facilitators after the coaching sessions with the client. This respondent indicated talking to facilitators beforehand to see what facilitators were hoping for, and what facilitators’ goals were for coaching sessions. This respondent was unsure whether information was being shared with the team, and how confidentiality worked within the re-entry mediation process. This respondent also indicated leaning towards being able to share information as a team, if clients are okay with it. The respondent indicated it was also of value however to have an independent coach for clients, so clients feel safe and able to freely communicate.

*Case File Concerns and Process Changes*

Four respondents indicated concern over roles. One respondent indicated that there was no reporting to facilitators. This respondent indicated that the process is good, but there was no clarity on how information sharing would work, and whether coaches would be independent or part of the case team. Two of four respondents outlined concerns over having too many people on cases. One of these two respondents indicated concerns over-servicing clients. This respondent indicated that client’s might get confused if service providers offer differing views on what clients should do. The second respondent indicated that having too many people on cases might lead to role confusion, regarding what coaches and facilitators do.

Two respondents indicated concerns regarding boundaries with clients. One of these respondents indicated that clients might want continuous support and services because the program is a free resource. This respondent indicated that with free resources, sometimes there is a decreased sense of ownership from clients. The second respondent indicated that the program was new and that roles can be defined as the program progresses. This respondent indicated that the organization as a team would have to address the diversity of how facilitators understand their boundaries with clients, including where they are willing to meet clients, and how they communicate with clients. This respondent indicated a need for team cohesion and cultural identity around boundaries with clients, to not set the organization up for risk, and not leave clients vulnerable in any way.

Four respondents discussed case complexity. One respondent indicated the case was not simple, but not complex, and was unsure if clients needed facilitators. The second respondent discussed how lower complexity, lower conflict cases would be those in which clients are functioning well in society, are well resourced and are able to obtain supports. This respondent indicated in low conflict cases, clients might need conflict management courses, and training in basic communication skills, as opposed to one on one coaching. Coaching would be used for high conflict, high complexity cases. The third respondent indicated that intake processes could become more detailed to better assess a case’s complexity. This respondent indicated that detailed intake would allow facilitators and coaches to know what other factors families are facing, and more effectively align internal
and external resources for those clients. The fourth respondent indicated six hours of free mediation per case was not enough, because of case complexities. When dealing with trauma, it was important to this respondent to be able to provide more services, and six hours might underestimate what is required with complex cases. For this respondent, about 18 hours a case would be more effective. Additional hours would be filled with coaching to help build clients’ capacity, and help clients deal with emotional regulation and trauma reactions so they feel supported in having difficult conversations. This respondent indicated it was important that sessions are client-centered and not a one size fits all approach to cases.

Dynamics in Facilitating Re-Entry Mediation Cases

Four respondents differentiated between facilitating a re-entry mediation process from the work they usually practice. One respondent indicated it was a “fairly steep learning curve” and that files are complex. This respondent indicated that good intake and assessment processes are important for facilitators, so they can anticipate what help and resources to provide to clients. The second respondent indicated that the case was difficult, because there was violence involved. This respondent indicated that no training could prepare for in-the-moment case dynamics. The third respondent indicated that it was nice that the process for cases was flexible, allowing it to be client-centered. The last respondent indicated it was different, and focused more on building relationships between people as well as building basic skills, such as, communication skills.

Four respondents discussed what happened in the mediation session that was unexpected. One respondent indicated surprise at having to manage clients’ expectations about their release into the community. The second respondent indicated surprise over how receptive clients were to services, and to receiving help. The third respondent indicated surprise over how important it was to be flexible as issues arose for clients. The last respondent indicated that much of this work is in dealing with the unexpected, by staying calm, and taking time when needed. This respondent discussed having to slow down the session with the client to ensure process pieces such as agreement terms were discussed, so that the client had informed consent regarding the process.

Five respondents indicated common themes that emerged in their sessions. Four respondents discussed the theme of child protection and MCFD involvement in cases. One of these respondents highlighted a theme around providing clients with adequate supports and resources, to increase client capacity. The second respondent indicated that trauma, dynamics of culture, managing power imbalances, and child development were common themes. Two respondents indicated a theme around clients learning basic communication skills. One of these two respondents also noted themes focused on parenting education, emotional regulation, and conflict management. Two respondents indicated a theme on clients living together post-release. One respondent highlighted themes on clients’ expectations of one another, and dynamics of co-parenting a child.

Four respondents discussed the skills they used in sessions. Two out of four respondents indicated using active listening, paraphrasing, and assertiveness in sessions. One of these two respondents also indicated reframing the conversation, and using humor in sessions to
manage power imbalances. This respondent also used patience in sessions to ensure all participants were heard. The other of the two respondents indicated primarily using assertiveness, challenging, and reality checks in sessions. The third respondent highlighted skills such as meeting people where they are at emotionally, being empathetic, naming emotions, being responsive and present in sessions, and identifying interests of participants. This respondent focused on seeing what trauma reactions of clients look like in sessions, and how to be responsive to those reactions. The respondent also highlighted being collaborative, and not taking charge of the process. Flexibility, asking for client feedback, and helping clients process emotions and achieve their identified goals were also skills used by this respondent. The fourth respondent indicated using empathy, trust building, and metaphor to help clients.

Four respondents discussed liaising with other stakeholders. Three of four respondents indicated that they did not liaise with outside professionals for their case. Two respondents indicated that liaising with outside professionals had been done prior to them being on the case, and they had not been involved in contacting outside professionals. One respondent indicated that clients initiated contact with outside professionals. The fourth respondent indicated that liaising with outside parties such as workers with MCFD, counselors, and parole officers. This respondent highlighted that between professional organizations there was little understanding of the difficulties clients face in having to abide by professionals’ varied expectations. As a liaison, this respondent indicated providing education, and help in creating consistent resources and expectations across professionals, to better support clients. When asked about the working relationship with these professionals, the respondent indicated that the relationship with parole officers was supportive, but that the structural system, in which parole officers are in, may be a challenge. This respondent also indicated that MCFD was not a barrier to the process.

Five respondents discussed the incorporation of RJ practices in the facilitation. Three of five respondents incorporated RJ principles in their facilitation. Two of five indicated that through their facilitation style, it was incorporated in sessions. One of these respondents indicated bringing into sessions ideas regarding harms done, breaches of trust, and accountability and repair, and discussion around what it would look like if those harms were to reoccur. The second respondent indicated that RJ principles were applied when allowing clients to have conversations about their experiences and worries. This respondent indicated that it is difficult to identify between family mediation, and RJ practices, as there is no step-by-step process for how to integrate these principles. This respondent identified as practicing from a transformative lens, focusing on finding ways to support clients in having difficult conversations. The third respondent indicated discussing with the client, responsibility for what the client had done, labeling actions as harms, restoration in the community, and what it would look like to be a victim-centered process. The last two respondents indicated that they did not incorporate RJ principles in their facilitation. One of these respondents indicated that the client had done their time, and had already reflected on the consequences of their actions. The other respondent indicated not knowing much about the RJ elements, and indicated that in the case, it did not seem necessary. This respondent indicated engaging with RJ principles in sessions regarding repairing relationship and acknowledging harms done to others.
Three respondents discussed their incorporation of family mediation practices in their facilitations. One of the three respondents indicated that although there was no mediation, family mediation practices such as empathy were incorporated into the facilitation. The second respondent indicated that practices relating to building relationships among parties, and helping parties communicate were incorporated in sessions. The third respondent indicated bringing family mediation practices out in sessions by explaining the facilitators role in the process, and by letting clients know the purpose of the sessions, which focused on helping clients to find new ways of working together. When one respondent was asked how their current area of practice affected how they approached the session, the respondent indicated bringing realness to the sessions, and awareness of the family setting and how to discuss basic communication skills with clients.

Three respondents discussed their use of anti-oppressive and trauma-informed practice in their facilitations. One of three respondents indicated they were not used. The other two respondents indicated that they incorporated anti-oppressive and trauma-informed practices by listening to the client and showing support. One of these two respondents indicated that it was used by recognizing “the growth and change” that has happened for the client, and ensuring all clients’ voices were heard. The other respondent indicated active listening, being non-judgmental, showing sensitivity and awareness, and having some self-disclosure were all used to help build relationship. This respondent indicated not knowing what anti-oppressive practice was, but indicated using tools such as matching the client, and challenging the client to help empower other parties in the session.

Four respondents discussed how cultural differences were managed in the sessions. One of four respondents indicated that they explored what different concepts, such as family, meant to clients, discussed roles and how clients envision their roles in their relationships, clarified questions, and gave parties time to communicate. This respondent indicated that training provided an understanding of other “players” in the clients’ lives, and knowing terminology used by probation officers helped in managing prison culture dynamics. The second respondent also identified prison culture, but indicated that there were no cultural differences to be managed in sessions, outside of language and terminology used by the client relating to their time inside prison. This respondent also indicated training helped with understanding the language and terminology of the prison system. The third respondent indicated doing research to get more information on what clients were struggling with, and provided referrals to clients so clients could access various community services. The last respondent indicated managing cultural dynamics by slowing clients down so they could listen to one another, and asking questions about how the clients would do things in their own culture, what their cultural norms are, and their expectations.

Four respondents discussed how many parties were in sessions. All four respondents indicated that it was just the clients and facilitators in sessions. One respondent indicated that liaising with child protection workers, and counselors, had all been done prior, and they were not involved in sessions. The second respondent indicated that there were no external parties to communicate with. The third respondent indicated that neither of the clients had any advocates or lawyers in the room. Facilitators connected with parole officers and counselors after an initial joint meeting with clients. The fourth respondent indicated that one of the parties asked if their conflict coach could be in the session, and the
respondent and co-facilitator had decided against it, to ensure the process was focused on helping clients strengthen their relationship and communicate with each other. This respondent indicated that having more professionals at the table might be a consideration as things progress, and indicated clients had not asked for any other support people in sessions.

Readiness to Facilitate a Re-entry Mediation File

One of three respondents indicated feeling prepared to facilitate a re-entry mediation file. Two respondents indicated there was no specific way to practice re-entry mediation work. One of these two respondents indicated that the work was new and it was hard to know what to expect. This respondent indicated training was good, feeling there was not much more training could have provided to prepare facilitators. The second respondent indicated that there was no “formula” for how to do re-entry mediation work. This respondent indicated that as much as training could prepare someone, it is important “to feel it out” in the moment, and look for “similar patterns or systems”. For this respondent, it was important to not have training be too prescribed. One respondent indicated feeling that training did not provide new information, although it was interesting. The second respondent indicated not feeling prepared at all, because of the “size and the capacity” of the work. The third respondent indicated feeling future cases would probably be more complex. This respondent indicated they were flexible, knowing the program was new.

Helpfulness of Training for Facilitators

All five respondents indicated that training was helpful. Three of five respondents indicated it was useful to have a team member who was trained in other areas. One of these three respondents indicated that it was key having a team member that knew the child protection and judicial system well, and that had worked within those systems. The second respondent indicated it was amazing having a team member who knew about areas of practice the respondent had less understanding of. The third respondent indicated that a really effective element of training was having practitioners from diverse backgrounds paired together, and having senior practitioners paired with less senior practitioners.

All five respondents indicated finding training session material useful. One respondent indicated the best part of training was being able to understand the language and terminology used by inmates, and probation and parole officers. This respondent also indicated that it was helpful to understand how MCFD works, and challenges clients may face when working with MCFD. The second respondent indicated that all of training was useful, and felt the personal stories were interesting, but that nothing was new information. The third respondent indicated that the lesson on prison culture was helpful in prepping facilitators for what they may encounter in sessions, and for screening cases appropriately. This respondent also indicated that the lesson on trauma was also a good support for facilitators. The fourth respondent indicated that the content of training was good and thorough, that the book was well done, and appreciation for the role-play session and having food together. This respondent also indicated appreciating having guest speakers present, but also indicated training could have continued for longer, and continued to
explore the content. The fifth respondent indicated that it was helpful knowing some of the other organizations and supports that would be in clients’ lives.

*Training Gaps and Future Training Development*

Four respondents indicated that continuing connection with the other re-entry facilitators would be beneficial. One respondent indicated that it was good to get together as a group, and build the relationship of the team, and that regular connection to build a community of practice would be nice. For this respondent, having facilitators get together to debrief, share challenges, get ideas on different strategies to help clients, and gain support, on a regular basis, would be beneficial. This respondent indicated that ongoing regular connection for facilitators who were not on cases right away would be helpful, to help build the confidence of facilitators, and ensure facilitators are still engaged in the process. The second respondent indicated that a get together would be nice, and that one could happen every six or three months, to recap, and have facilitators who have been on cases speak to what they faced. This respondent also indicated that refresher lessons of the material would be beneficial. This respondent really appreciated the presenters, and indicated gaining from experiential learning, and hearing stories and experiences of presenters. For this respondent, it would be good for people who had been on cases to speak to what it is like to be on a case. This respondent indicated it was important to have practitioners feel supported, and that maybe there should have been a certificate for training to show recognition of the commitment people made to training.

Two respondents indicated they would like more sessions on trauma. One respondent felt that training focused more on reading for the session on trauma informed practice. This respondent indicated wanting a session on trauma informed practice, about signs of trauma, and how to help people having trauma reactions. The second respondent indicated that although trauma informed practice guides are good, it would be nice knowing what trauma actually looks like for clients, how facilitators can practice in a trauma informed way and how that would be evaluated. This respondent wanted ongoing training on trauma.

Four respondents discussed content for future training sessions. One respondent indicated not remembering if there was training content about child development, and that child development had a place in cases. This respondent also indicated that there might be a place for child interviewing, understanding developmental stages and ages, and how to bring children’s voices into sessions. When asked about training for coaches, this respondent indicated that training on coaching would depend on whether facilitators felt it was something they needed. The second respondent indicated that it would have been beneficial to do additional role-playing sessions. The third respondent indicated that assertiveness training would be beneficial. The fourth respondent indicated wanting a role-play video with a scenario that has more complexity, so that facilitators can be better prepared for how re-entry mediation files might look. This video would include, how it would be to liaise with MCFD, parole officers, and mental health practitioners, and address the concerns of these professionals. This respondent also indicated that training could have done more to create “a resource kit”; a reference list of resources that facilitators can provide to clients when needed. Two of five respondents indicated it would be beneficial to have more information about the re-entry mediation process. One of these respondents indicated
wanting a session around paperwork, what the system looks like and how to submit paperwork. This respondent also indicated that as more cases occur, having case examples would be good in training, so trainees can watch how the process works. The second respondent indicated wanting a “process piece” to sessions. One of the five respondents indicated that if training were implemented again they would introduce a triage model for cases. This respondent indicated that in the triage model, families would be identified as having greater or lesser complexity. Lesser complexity files would involve fewer hours and fewer resources. For this respondent, having this model would help team members feel more supported, and would help clients gain more resources and support. This respondent indicated that a more detailed intake would be beneficial, so that facilitators have more tools to draw on when screening and identifying needs of the families, and when identifying what resources client’s have.

Summary

Facilitator evaluations and interviews provided various findings on how training equipped facilitators to conduct re-entry mediations. The scope of the findings focused on session topics, space and location of trainings, re-entry mediation case processes, and how facilitators communicated to team members and clients. According to the evaluations, most facilitators felt the additional training materials were complementary to in-person training sessions. Facilitators most commonly discussed having a mix of presentation styles, such as storytelling, discussion, and group work, as being the most effective way to learn. Facilitators appreciated debriefing material, having opportunities to do role-plays, and having opportunities to connect with other practitioners. Practitioners indicated wanting clearer strategies for helping people with addiction and trauma, information about the legal system, and more opportunities to do role-plays. Some facilitators indicated that they wanted more breaks throughout training sessions. Facilitators discussed appreciation for having co-facilitators that were knowledgeable on subjects in which they had less exposure.

In interviews, facilitator’s highlighted challenges, what they learned, and what they would like for future training sessions. Common challenges faced by facilitators included confusion of roles between facilitators and coaches, and lack of understanding on how confidentiality will work within the re-entry mediation team. Facilitators indicated issues around case complexity, with different understandings of when coaches should be involved in cases. Boundaries with clients, and how to deal with too many practitioners on files, were other issues facilitators discussed. Facilitators indicated wanting more information about the re-entry mediation process. All facilitators discussed information they found helpful in the training, such as guest speakers, training on terminology used in the CJS, and training on prison culture. Facilitators also indicated a need for continuous training, training on trauma, and more connection with other facilitators. Views on future training session options included information on child development, assertiveness training, and training on re-entry process and paperwork.
CHAPTER SIX: DISCUSSION

The purpose of Dialogue and Resolution Service’s (DRS) re-entry mediation training was to further develop facilitators’ skills and foster a better understanding of how to help formerly incarcerated persons build positive social relationships with important people in their lives. The findings demonstrated how training sessions and the re-entry mediation process could be made more effective so facilitators feel prepared in handling re-entry mediation cases. The following will discuss common themes that emerged from the findings, and discuss how the findings connect to the literature reviewed previously. Further literature will be explored to inform how re-entry mediation training could be made more effective in future implementations. The conceptual model for the re-entry mediation training program will also be discussed.

Primary themes that emerged from the findings include accessibility to training information, relevance of information, the creation of safe learning environments, group cohesion, and process issues.

Accessibility to Information: Presentation and Content

The findings confirm what was found in the literature regarding how best to engage trainees in training processes. According to Management Sciences for Health (2012), effective trainers use various methods such as discussion and role-play exercise to engage trainees in the learning process and develop their skillset (p. 52.2). Respondents indicated that having a combination of presentation styles, such as role-plays, debrief sessions, and guest speakers were effective for their learning. Hedeen, Raines, and Barton (2010) indicate that having personal stories and examples of cases are important in training processes (p. 164). This idea was also reflected in the findings, when respondents identified their appreciation for training sessions that incorporated personal stories and cases.

Both the literature and the findings discuss the importance of assessing trainees’ competencies. The literature described the importance of training processes where trainers know the training objectives and what competencies they want trainees to achieve by the end of training (The United Nations Office on Drugs and Crime, p. 4). Trainers should have a way to assess and evaluate whether trainees are gaining necessary competencies (Management Sciences for Health, 2012, pp. 52.2-52.3). This clarifies trainees’ expectations during the training and as facilitators. Findings from respondents are consistent with the literature. Respondents indicated they appreciated having opportunities to gain feedback from facilitators and that increased opportunities for feedback would be beneficial.

Similar to the literature, findings showed the importance of having role-plays and practical experience as part of the training process. Management Sciences for Health (2012) highlights how learning is achieved when it involves active participation. Training should incorporate audio, visual, and tactile learning into sessions to meet the learning needs of trainees (p. 52.2). Raines, Hedeen, and Barton (2010) discussed training requirements for a court program in Florida, which placed value on role-plays for developing trainees’ skills.
The findings support the literature in that many respondents indicated learning by actively practicing skills and wanting more opportunities to complete role-plays. Respondents also indicated a need for understanding how to practically implement the theories and knowledge gained from sessions. Hedeen, Raines, and Barton (2010) indicated that along with role-play exercises, it was valuable to have trainees observe mediations, and have more senior mediator practitioners mentor newer mediators (p. 160).

Relevance of Information

The literature and findings both show the importance of having relevant and updated information provided to trainees in training sessions. Raines, Hedeen, and Barton (2010) outline the importance of having current information on laws, relevant discussion topics, and current and relevant case examples provided to trainees so trainees are effective in their mediator role (p. 547). Likewise, respondents discussed their concerns with whether older information presented in training was accurate.

Literature on implementing effective training suggests session guides in training that outline training objectives and activities (Management Sciences for Health, 2012, p. 52.7). Evaluation-based findings indicated that respondents were confused when their training went into different subjects that were not part of the set session topic. Session guides could manage trainees’ expectations of what training will involve. Well-organized training sessions also contribute to a safe learning environment (United Nations Office on Drugs and Crime, p. 16).

Creating Safe Environments

Ways to create safe learning environments were discussed in both the literature and the findings. Safe learning environments are those which create emotionally intelligent facilitators, that challenge how facilitators deal with emotionally difficult situations, and those where learners are able to direct their own learning process and reflect on their own practice style (Gill, Ramsey, & Leberman, 2015, p. 262). Respondents discussed feeling safe in the learning environment by commenting on enjoying the camaraderie, trust, openness, and vulnerability expressed by the group. Hedeen, Raines, and Barton (2010) show that having flexible training structures and processes where trainees can share information, and are challenged in a supported environment, are also important to creating a safe environment (p. 165).

Safe learning environments mitigate the risk of shame or embarrassment that learners may feel if they ask questions or partake in training activities (Gill, Ramsey & Leberman, 2015, p. 262). Trainers create safe learning environments by increasing trainees’ confidence in their own abilities, managing trainees’ anxieties, and treating trainees with care and respect (p. 263). Many respondents identified feeling valued in the training process. Some, however, indicated the need for breaks, especially during emotionally heavy training sessions. The pace of training is important in ensuring trainees feel safe in the learning environment. The literature identifies that having a slower training pace that allows trainees to complete tasks is most effective for learning (United Nations Office on Drugs and Crime, p. 36).
Hedeen, Raines, and Barton (2010) discuss additional methods to creating positive learning environments. These include having collaborative learning environments, where trainers are expertise in their field, where sessions have a clear purpose, where trainees understand the session objectives and goals, and where trainees are able to say what they would like to learn from sessions. Trainers should have a clear outline of how sessions will unfold and ensure that all trainees understand the process, while still maintaining a flexible process that is based on trainees’ needs (p. 163).

*Group cohesion*

Both the literature and the findings highlight the benefits of having co-mediation models. Lund (2000) discusses how co-mediation models are valuable in high conflict settings, because they allow team members to co-plan next steps, provide support to one another, and respond more effectively to dynamics that occur in mediation sessions (p. 66). The findings are consistent with the literature. Respondents indicated appreciation for having a co-facilitator, specifically those with different knowledge backgrounds that could help on cases. Respondents also discussed how having a co-facilitator model allowed less senior practitioners to gain mentorship from more senior practitioners.

The findings further reported a need from respondents for continual connection with other facilitators. Continual connection would develop group and co-facilitator cohesion, increasing the effectiveness of co-faciliations. Team cohesion can be built in training by having smaller and larger group exercises where trainees work together towards a common goal (United Nations Office on Drugs and Crime, p. 27).

*Process Issues*

Both the literature and the findings discussed the role of ethics in mediation training processes. Raines, Hedeen, and Barton (2010) discuss how ethics training for mediators is imperative for every mediation training program, to clarify standards of practice among facilitators, and explore ethical dilemmas practitioners might face (p. 549-550). Respondents discussed mediator ethics, identifying their confusion regarding how confidentiality and boundaries with clients work within DRS’s re-entry mediation program.

The findings placed value in having formal debrief sessions in training, and throughout mediation processes. Bolitho and Bruce (2017) discuss the importance of professional debriefing for facilitators. Professional debriefing may include having a trained outside professional facilitate the debrief sessions. Having consistent debrief sessions provides facilitators with support and maintains the motivation facilitators feel for their work (p. 357). The findings also indicate that along with a need for debrief sessions, it was important to gain client feedback on the re-entry mediation process and work of facilitators.

According to Management Sciences for Health (2012) continuous training is important for developing trainees’ skillset (52.9). Likewise, the findings showed the importance of having continual training opportunities. Respondents indicated wanting continued training, refresher sessions, and opportunities for facilitators to meet and get to know one another.
Both the findings and literature discuss how to manage complex cases. Bolitho and Bruce (2017) discuss important characteristics in facilitating complex cases. They indicate that for cases with high complexity, facilitators need to be non-judgmental, have an understanding of complex trauma, including symptoms of trauma, and understand the role of other support services that clients might be accessing (p. 339). Other support service practitioners may be involved in the facilitation process as well, or in helping plan effective facilitation processes (p. 339). The findings indicated that respondents often did not communicate with alternate support persons and organizations in their clients’ lives. Based on the literature, future training can inform facilitators on how to effectively engage external professionals into the mediation process. Varied from the literature, findings showed that respondents had different views on their case complexity. Future iterations of training could incorporate a triage model so facilitators more effectively understand their case’s complexity. Complexity would depend on clients’ needs, the number of resources and supports the case requires, and how many external stakeholders the client is connected too.

Further literature was found that identified qualities of restorative justice (RJ) practitioners that make them effective in their work. Bolitho and Bruce (2017) discuss how facilitators’ values and beliefs, personal characteristics, and presence in mediation, defined as their ability to maintain a calm, non-directive, and honest process, was most important in creating effective RJ dialogues (p. 339). This is similar to what respondents indicated when voicing that RJ practices were brought in through their personal facilitation styles.

*Re-visiting the Conceptual Framework*

The conceptual model presented in chapter four outlined inputs, activities, outputs, and outcomes for the re-entry mediation program. Inputs included staff and contractors, funding, equipment, and knowledge and expertise. These inputs were used throughout the training process. Activities included the creation and implementation of a training layout, the development of a training manual, and program marketing. Respondents indicated appreciation for guest speakers and supplementary material provided by trainers. Challenges were identified in the implementation of a detailed training layout that identified times for breaks, questions, discussion and debriefs, and different content related activities such as role-play exercises. Several respondents indicated their need for breaks, their appreciation for debriefs and discussions, and their need for more role-plays.

Outputs of the conceptual framework included having a supported team of trained facilitators who felt confident in their abilities to facilitate re-entry mediation cases. Interviewee respondents identified that training could only help prepare facilitators to an extent but most learning would be done when on case files. For facilitators that were unable to be on case files, confidence in their ability to facilitate cases might be affected. Respondents identified how continuous connection among all facilitators was important in building facilitator’s confidence, and ensuring facilitators stay engaged in the re-entry mediation process. Respondents identified challenges within the re-entry mediation process. Respondents indicated confusion over roles, and lack of understanding around process issues such as confidentiality within the re-entry mediation team. Future
implementations of training could clarify roles of facilitators, and provide clarity on process-related issues.

Outcomes of the conceptual framework includes having trainees feel comfortable in their role as facilitator, having increased program scope such as opportunities for previously incarcerated persons to be mentors, and having increased public awareness of issues facing inmate populations. Study participants indicated that case files were limited and that as more case files emerge, facilitators will gain more comfort in their roles. They also indicated that within case files they communicated with clients and other community supports, which will help increase community awareness of the program. As the program develops, mentorship roles for inmates may emerge. Increased public awareness of issues facing inmate populations will occur as more facilitators connect with others in the community through case management work.

Summary

Themes that emerged from the literature review and findings of this research were discussed. These themes were accessibility to information, relevance of information, the creation of safe environments, group cohesion, and process issues. Both the literature and findings recognize that training is most effective when combinations of presentation styles are used, such as group discussions, and role-play activities. The findings confirmed what was identified in the literature on how to create safe learning environments for trainees, the importance of having continual training for trainees’ skill development, and on how to manage complex cases. Lastly the discussion revisited the conceptual framework of the re-entry mediation program, identifying what successes and challenges exist within the re-entry mediation program.
CHAPTER SEVEN: RECOMMENDATIONS

The primary objective of this project was to provide recommendations to Dialogue and Resolution Services (DRS) on how to increase the effectiveness of training provided to facilitators. The long-term vision of the re-entry mediation program is intended to contribute to decreasing recidivism rates in the Greater Victoria region, by providing previously incarcerated persons with increased support and resources.

The following recommendations are divided into three sections, trainee engagement, in-session training recommendations, and program recommendations. Within each section recommendations are broken into short-term and long-term implementation plans. Short-term recommendations can be done in one to four months. Long-term recommendations are to be introduced in six to eight months or within the next training iteration. All recommendations are relatively low cost, primarily involving food costs and costs of labour.

Trainee Engagement

Short-Term Implementation

1. Have trainees come together every three months to re-align them to the vision of the re-entry mediation project and allow facilitators on cases to speak about their case file experiences.

Long-Term Implementation

1. Provide continued education and training opportunities for facilitators to increase their skill level. Possible training session topics include understanding the Criminal Justice System; understanding child protection within the Ministry of Children and Family Development in British Columbia; mediation ethics; and child development.

2. Develop a Community of Practice (CoP) among re-entry mediators, and open to a wider network of mediators, psychologists, and Restorative Justice (RJ) practitioners. Practitioners in the CoP would initially meet every two weeks for three-hour sessions, to build the community’s identity. After two months, practitioners would meet every month for three hours. The first meeting would introduce all practitioners and have them co-create a vision for the CoP. Have practitioners decide the session topics, session schedules, and who will lead each session. Social media platforms such as Facebook can be used to increase communication between practitioners and build the community.
In-session Training Recommendations

Short-Term Implementation

1. Add structure to future training sessions by developing training session outlines. Break sessions down by session topic, session goals and objectives, session facilitator(s), type of presentation styles used, and training session activities. Allocate set times for session introductions and breaks, time for questions, and session debriefs. Outline what supplementary information trainees should read for additional knowledge.

Long-Term Implementation

1. Create direct connections between reading material and in-session trainings. Have session facilitators describe key points of the additional training materials provided to trainees, and have half an hour in sessions allocated to discussing the reading materials.

2. Develop trainees’ understanding of session topics by increasing role-play opportunities in sessions. Incorporate one to two hours of role-play time on restorative practices and harm, violence screening training, and family mediation, with a mandatory two-day role-play session on facilitating re-entry mediation cases. In the final sessions, trainees role-play case pre-sessions and a facilitation session.

The two-day role-play session would end with a written assessment of trainees’ skills completed by trainers, and provided to trainees. Trainers should assess trainees at a ratio of one trainer per four trainees.

Program Recommendations

Short-Term Implementation

1. Provide trainees with a written description outlining the roles of coaches and facilitators and provide a training session for trainees outlining those roles.

Long-Term Implementation

1. Create a resource toolkit for facilitators to provide to clients. Resources would include communication training, emotional regulation and stress management courses, resources for finding employment, and organizations clients can access for support, such as mental health services, addictions counseling, and crisis line information.

2. Have program developers meet with facilitators on case files before and after case closures. Program developers would explain procedures for file closures including how to obtain client feedback, would debrief with facilitators, and obtain input on case and process challenges and training gaps.
3. Reframe the re-entry mediation program as a program that works on a spectrum, from one-on-one coaching support, to co-mediated facilitation sessions, to formal mediation processes. This will allow more clients to access support, and provide direction about what the needs of previously incarcerated persons are in Greater Victoria.

Cases would be tiered based on level of complexity. Lower complexity cases require fewer resources. Higher complexity cases require liaising with other community resources, and having facilitators and coaches on cases. Trainees would facilitate lower complexity cases to increase their skill and confidence prior to facilitating higher complexity cases.

4. Conduct a needs assessment reflecting the needs of previously incarcerated persons. Assess what services organizations working with inmates and previously incarcerated persons in community provide, and identify gaps in services. Have community partners indicate what programs they would like to have provided for this population, and interview front line workers on challenges previously incarcerated people face reintegrating into their communities.
CHAPTER EIGHT: CONCLUSION

This report evaluated Dialogue and Resolution Service’s (DRS) re-entry mediation training program. The purpose of the report was to present effective ways for the organization to enhance their facilitator training program. Trainees completed evaluations of training sessions, and those trainees who facilitated a re-entry mediation case file, were interviewed. These evaluations and interview responses informed the training recommendations.

The goal of re-entry mediation training was to ensure trainees were able to facilitate high conflict and emotionally challenging discussions between formerly incarcerated persons and their families. The program’s goal was to provide previously incarcerated persons with increased social support in their communities. The program also aimed to decrease recidivism in BC communities.

The literature provided background on experiences of incarcerated persons and challenges they face in re-integrating into their communities. The literature also provided information on how to develop effective training programs that foster learning and development. The conceptual framework provided insights into further short-term and long-term goals of re-entry mediation training, and the re-entry mediation program. Among these are, increased clientele participating in re-entry mediation, increased community awareness of the program, having trainees develop strong tools for effective re-entry mediation work, reduced stigma on inmates and previously incarcerated persons, and increased public awareness of issues facing the inmate population. These outcomes are likely to be achieved as the re-entry mediation program gains promotion in communities and develops an increased and broader caseload.

The recommendations, informed by the findings, provide ways that future re-entry mediation training implementations can be made more effective. Respondents indicated wanting a clearer understanding of the re-entry mediation process, wanting ongoing training, wanting continuous opportunities to connect with other trainees, and wanting more opportunities to practice the skills they gained in training. Many individuals indicated training was effective, and that a large component of facilitation and mediation skills are gained when on case files. Trainees need to continually be able to inform new training iterations to ensure they are practicing in consistent and ethical ways, and in ways that increase the quality of support they provide to clients accessing re-entry mediation services.


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APPENDIX ONE: TRAINING EVALUATION RE-ENTRY MEDIATION

Client: Kathleen Bellamano, Dialogue and Resolution Services

Training Evaluation: Re-entry Mediation

Date: ______________________

1. What is your area of practice?

☐ Family Mediator  ☐ Restorative Justice Practitioner

☐ Corrections Officer  ☐ Lawyer

☐ Counselor/ Psychologist  ☐ Other: ________________________________

2. Were the training materials relevant/ complementary to the in-person/group training sessions?

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

3. How effective was the delivery of information for your learning (e.g. visual aids, presentation styles (PowerPoint), language)?

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

4. What did you enjoy about training?

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

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5. What information did you find useful?
_________________________________________________________________________
_________________________________________________________________________
_________________________________________________________________________

6. What topics would you have liked more exposure on, or felt was missing in the training?
_________________________________________________________________________
_________________________________________________________________________
_________________________________________________________________________

7. Did you learn something new from the training? Please Describe:
_________________________________________________________________________
_________________________________________________________________________
_________________________________________________________________________

8. Please comment on how you felt the pace of the training was (e.g. was there enough time allocated for breaks and training exercises?):
_________________________________________________________________________
_________________________________________________________________________
_________________________________________________________________________

9. Please comment on how you felt about the space and/or location where the training sessions were held:
_________________________________________________________________________
_________________________________________________________________________
_________________________________________________________________________

10. Other comments
_________________________________________________________________________
_________________________________________________________________________
_________________________________________________________________________

~ Thank you for your feedback ~
APPENDIX TWO: INTERVIEW QUESTIONS FOR TRAINED FACILITATORS

Date: ______________________

1. What is your area of practice?

2. What was it like facilitating a re-entry mediation file? What was your role in the file?

3. What were some themes and issues that emerged in the mediation session?

4. What happened in the mediation that was unexpected?

5. What skills did you use in the mediation session that you found effective?

6. What did the process look like?

7. How did participants respond to issues such as confidentiality, forming agreement terms, and other processes that were introduced?

8. How many parties were in the mediation? How do you think this affected the mediation?

9. In what ways were trauma informed practice, and anti-oppressive practice used in the mediation?

10. How did you incorporate restorative justice principles and practice, and family mediation principles and practice in your mediation sessions? What were some difficulties you faced doing this?

11. How were cultural differences managed in the mediation session?

12. How do you think your current area of practice affected how you approached the mediation session?

13. How prepared did you feel at the end of training to facilitate a re-entry mediation file?

14. In what ways did training help you going into the mediation process?

15. After being a re-entry facilitator, how do you feel training could more adequately train facilitators?

16. What would you like to see in future training sessions?