Mindfulness Training for Community Corrections Staff & Probation & Parole Officers

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Executive Summary

On July 7, 2015, Fleet Maull and Brad Bogue conducted a mindfulness training and brief research study with twenty-eight community corrections staff from two partner organizations based in Denver, Colorado – *Time To Change Community Corrections* and *Correctional Psychology Associations*. Time To Change operates halfway houses and community corrections programs in Adams County, Colorado and Correctional Psychology Associates provides the counseling and treatment staff for those programs.

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Participants in the Community Corrections Mindfulness Workshop and brief research study included community corrections case managers, counselors, treatment providers, technicians (line staff), administrators and probation & parole officers. The four-hour workshop included an introduction to basic mindfulness practices, various guided meditations, the current neuroscience findings related to mindfulness practice and the Center for Mindfulness in Corrections' mindfulness-based wellness & resiliency (MBWR)™ model; however, the primary focus of the workshop was the introduction of basic mindfulness of body and mindfulness of breathing practices, including a guided body scan, and a number of simple breathing techniques for self-regulation.

The workshop began with an invitation to participate in a brief research study, including an informed consent document and the completion of a brief survey that included basic demographic questions and two scientific scales, the Five

Facet Mindfulness scale and the Brief Resilience scale. At the end of the workshop, the participants completed a brief workshop evaluation questionnaire.

The workshop was very well received and the program director indicated a wish to pursue additional mindfulness-based training for his staff. A significant number of the participants indicated a strong interest in further training and an likelihood of beginning or maintaining a mindfulness practice as a result of the workshop experience.

A Brief Case for Mindfulness and Community Corrections

Community Corrections, which includes probation and parole systems and departments, half-way or transition houses and various day reporting or community supervision programs, is a key fulcrum point in determining recidivism or re-arrest rates for released prisoners, or positively stated the successful reintegration of incarcerated youth and adults back into the community and society. There are many factors weighing on an individual's likelihood of successful reintegration or of returning to jail or prison, either for a new crime or for a technical violations of his or her conditions of releases, ie., parole violations. The predominant factors have been identified through research as "criminogenic" needs or risk factors. There are often referred to as criminogenic needs, the idea being that offenders may have many different needs that could be addressed, but there are certain needs that are more determinant of their return to criminal behavior or not.

There are any number of versions of criminogenic needs, but they largely agree on the most important ones: antisocial peers; antisocial beliefs, values, and attitudes; substance abuse, dependency, or addiction; anger or hostility; poor self-management skills; inadequate social skills; poor attitude toward work or school; and poor family dynamics. Of the overlapping factors, those repeatedly asserted to be the most closely related to recidivism are an antisocial personality pattern (marked by impulsiveness, aggression, stimulation seeking); pro-criminal attitudes/antisocial cognition (such as negative attitudes towards the law, values, thinking styles, and general attitudes supportive of crime); and social supports for crime (criminal friends, isolation from pro-social others). Other criminogenic risk factors also related to recidivism include substance abuse, employment instability and/or dissatisfaction, family problems, and a lack of involvement in pro-social leisure activities.

Training community corrections professionals in mindfulness based or mindfulness compatible evidence-based best practice client interventions like Mindfulness-Based Cognitive Treatment (MBCT), Acceptance Commitment Therapy (ACT), Dialectical Behavioral Therapy (DBT), Mindfulness-Based Stress Reduction (MBSR), Mindfulness-Based Emotional Intelligence (MBEI), Mindfulness-Based Substance Abuse Treatment (MBSAT) and Motivational Interviewing (MI) have demonstrated significant results and

great promise in reducing recidivism and helping more released prisoners successfully reintegrate into the community (Himmelstein et al. *Mindfulness*, July 2015; Harrison, Clarke & Maull, *CFM Conference* 2013; Samuelson, Carmody, Kabat-Zinn & Bratt, *The Prison Journal*, 2007; Himelstein, *International Journal of Offender Therapy and Comparative Criminology*, 2010).

While mindfulness-based interventions have demonstrated many salutary effects for clients including improved attention stabilization, emotion regulation, well being, improved stress management and increased feelings of self-worth, training community corrections professionals in the delivery of such interventions may lead to many similar salutary benefits for the professionals as well, especially if that training encourages clinicians to embrace mindfulness as a personal practice for their own health and well being. There is a great deal of evidence pointing to the quality of the interactions between probation and parole officers, case managers, community corrections counselors and treatment providers and their clients as a critical contributing factor to positive or negative client outcomes. It would appear that the ability of the clinicians to form some kind of therapeutic alliance with their clients is a very leveraged place to focus our efforts; and mindfulness training in it's many forms certainly has great potential for enhancing such abilities in community corrections professionals (Muran & Barber, The therapeutic alliance: an evidence based guide to practice, The Guilford Press, 2010); Bland, Corrective experiences in correctional counseling, Journal of Theoretical and Philosophical Criminology, January 2014)

Community Corrections Mindfulness Workshop
Research Background

Research methods are readily available for enhancing the credibility of mindfulness training and learning more about the impact of mindfulness practice within corrections. This paper describes a simple approach to assessing mindfulness training that has evolved out of independent studies of corrections staff training in mindfulness in three different state jurisdictions: RI Department of Corrections; OR Department of Corrections, and, CO Community Corrections. The results from the latter studies indicate that the Five Factor Mindfulness Questionnaire (FFMQ) is consistently sensitive to changes over time in the perceptions and attitudes of corrections staff who have been introduced to mindfulness practice. In addition to delineating pre-post differences across subjects, the FFMQ also appears to differentiate at baseline between staff with prior and current meditation experience versus no experience.

In a collaboration with the National Institute of Corrections the Rhode Island Department of Corrections, Justice System Assessment & Training (JSAT) and the Center for Mindfulness in Corrections (CMC) entered into a contract in 2012, to provide a joint training in Mindfulness-Based Emotional Intelligence (MBEI) and Motivational Interviewing (MI), with a follow-up, pre-post evaluation design. The participants in the

study were 60 correctional counselors, social workers and probation and parole officers in the RI DOC. Twenty-two of these staff members volunteered to get training in MBEI and MI, including a series of monthly booster meetings, forming the 'intervention' group. The remaining 38 staff were identified as a 'control' group that would complete baseline and follow-up (one year later) surveys, along with volunteering DOC staff participants.

The pre-post measures for this study consisted of both behavioral skill ratings (based on recorded counseling sessions done by JSAT staff using the Motivational Interviewing Therapeutic Integrity (MITI-3.1) scales) and three survey tools: 1) Likert Organizational Climate Scale (LOCS); 2) Assessing Emotions Scale (AES); and, 3) the Five Factor Mindfulness Questionnaire (FFMQ).

Although this study had response rate problems at follow-up with the control group, it did demonstrate significant survey gain score differences between the control and experimental groups on a number of the scales involved in the three tools. Three of the six FFMQ subscales and one of the five AES subscales indicated significant differences, (Phi's of .01 or greater). There were no differences on the LOCS. Since all the differences were in the anticipated direction, i.e., showed stronger gain score for the experimental group that received the training, these findings provide some limited evidence of a sustainable impact from the combined training. (There was also evidence from the rated session tapes (staff counseling inmates or parolees) of improvement in the experimental groups' MI skills).

In a separate study with the OR Department of Corrections, PMI and JSAT, the impact from a series of training events in a fuller model of Mindfulness-Based Wellness & Resiliency (MBWR) staff training was assessed with identical survey tools as in the previous study. This study for OR DOC was also a pre-post, with comparison group design with correctional officers being the primary subjects. Officers assigned to the experimental group either volunteered or were encouraged to participate by their supervisors, due to concerns regarding burnout. The dosage for staff training, in addition to meditation training, was focused on four keys to self-care: 1) physical fitness; 2) mental fitness; 3) emotional fitness; and, 4) spiritual fitness, and four competencies for correctional shift readiness: 1) Self-Awareness; 2) Self-Management; 3) Social Awareness; and, 4) Relationship Management. On average, staff participants in the experimental condition received well over 40 hours of training and coaching in this corrections-specific mindfulness-resiliency model.

At one year follow-up, the OR DOC pre-post survey comparison indicated that the though the experimental group began with significantly lower scores on the FFMQ at baseline, at follow-up, their scores were significantly higher than both the general controls and another group of matched controls (deliberately matched on demographics education, age, gender, race and experience). Similar to the RI DOC, the LOCS showed no significant pre-post differences yet the FFMQ and the AES both indicated significant differences in both pre-post gains but also in comparison of gain scores with

both control groups. Thus it appears that while staff mindfulness training interventions may be capable of impacting staff self-awareness, self perceptions and emotional awareness, they may not be sufficient to effect less subjective and more pervasive conditions, such as staff perceptions of organizational climate or culture.

The results from the two previous staff mindfulness projects suggest that out of the tools used, the FFMQ is most sensitive in detecting change over time in staff participants. In terms of future applications with wellness and staff mindfulness programs a logical next step would be to learn and understand how scales on the FFMQ co-vary with measures of corrections staffs' stress and burnout, as well as wellness.

Community Corrections Workshop & Brief Research Study Results

Investigators from JSAT and Center for Mindfulness in Corrections contacted a Colorado County Community Corrections system provider in June 2015 and established a scope of work to provide a half-day workshop on mindfulness and wellness. In addition to the half day training the arrangements included the administration of pre-post surveys, providing informed consent existed from staff. The CEO of the two facilities was open but non-committal regarding a possible follow-up series of mindfulness/wellness workshops. So minimally, the 'dose' of training for participants is the one day, introductory workshop.

Method:
On July 7, 2015, twenty-eight (28) community corrections staff participated in a four-hour workshop that provided an introduction mindfulness meditation practice. The training including several opportunities for guided mindfulness meditation practice with and emphasis on mindfulness of body and mindfulness breathing, including a guided body scan, as wells as practice with several self-regulation breathing techniques. In addition participants, were provided an overview on trends and findings in neurobiology related to mindfulness and the "Mindfulness-Based Wellness & Resiliency Model for correctional staff. The latter model consists of four elements of resiliency: 1) physical fitness; 2) mental fitness; 3) emotional fitness; and, 4) spiritual fitness, along with four facets of shift readiness: 1) self-awareness; 2) self-management; 3) social awareness; and, 4) relationship management.

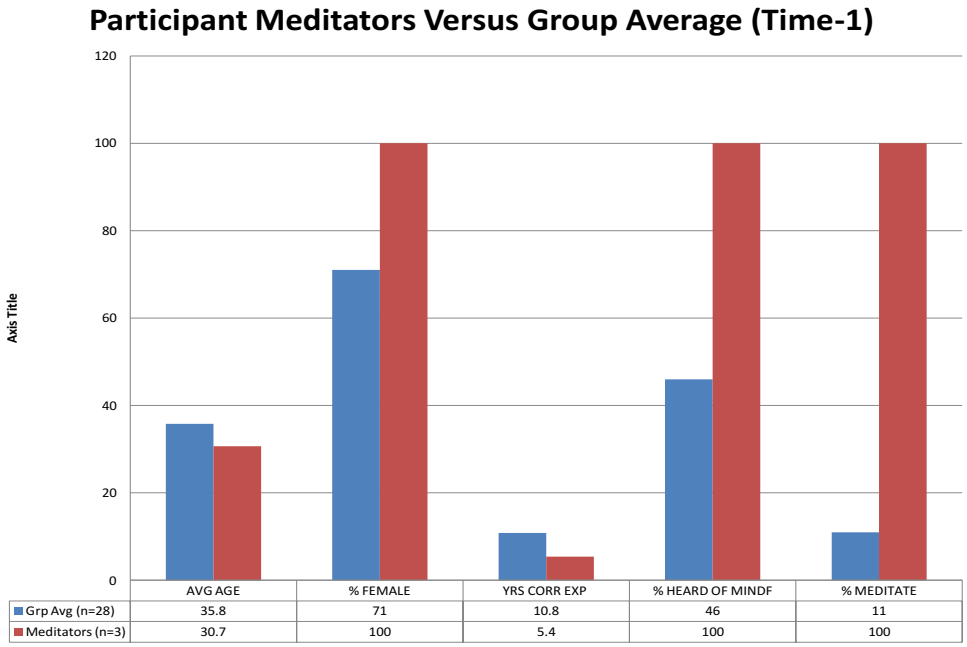
The above workshop was 'sandwiched' with 15 minutes upfront, where participants signed releases giving informed consent and then completed some demographic and background questions re: current work-related stress at home, health-impacting stress, and experience and awareness regarding meditation. The participants also completed two surveys: the Brief Resiliency Scale (BRS) and the Five Facet Mindfulness Questionnaire (FFMQ). Just before the conclusion of the workshop participants were asked to complete a post-workshop form that included Likert type rating (1-5) items on

each participant's interest in maintaining a future mindfulness practice. Thus baseline participant data was collected in a perfunctory manner as a function of the workshop.

Sample:

The workshop participants represented a complete cross-section of staff in two residential community corrections facilities. The most commonly held position was case manager, followed by security technician. In addition clerical, administrative and clinical staff attended as well as contract psychologists and a couple of local parole officers.

The average age of participants was 36, and it ranged between 23 and 51. Approximately 2/3 of the participants (71%) were female, and the average years of experience in corrections was 10.8 years, ranging between .4 to 27.1 years. Almost half (46%) of the participants reported that they had previously heard of mindfulness and three (11%) indicated that they currently practiced meditation.

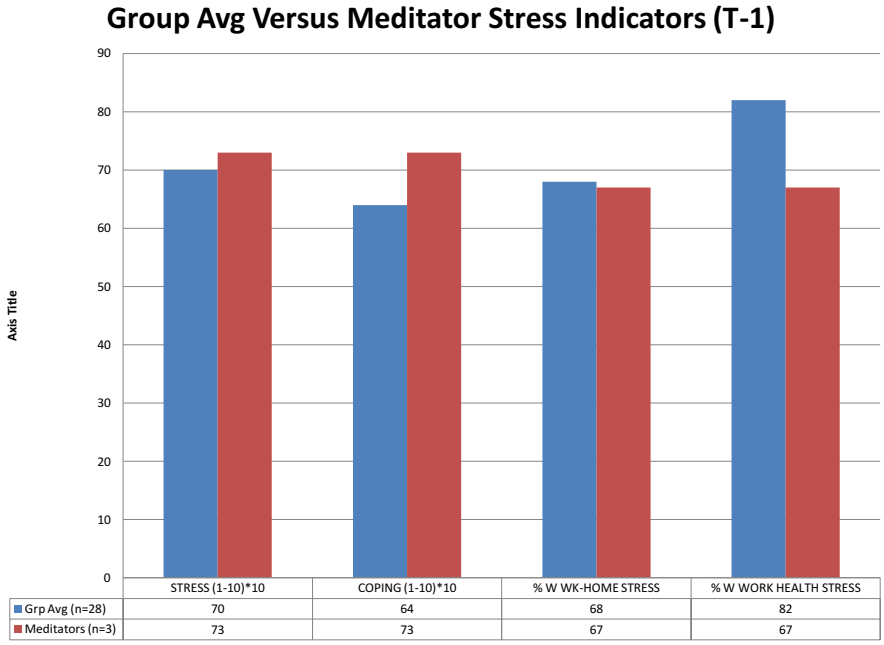


	AVG AGE	% FEMALE	YRS CORR EXP	% HEARD OF MINDF	% MEDITATE
Grp Avg (n=28)	35.8	71	10.8	46	11
Meditators (n=3)	30.7	100	5.4	100	100

When compared to the overall group average, the small group (n=3) of staff reporting that they currently meditate were younger, female (100%) and had fewer years of correctional experience.

Other baseline measures that distinguished the staff meditators from the overall group were self-reported *coping* skill ability (self assessed on a 1-10 scale, with 10 being the highest coping abilities) and *work health stress*. The STRESS and COPING measures in the figure below were multiplied by 10 in order to bring them to scale with the two other measures (HOME STRESS and HEALTH STRESS) both of which percentage response rates, where participants essentially affirmed the latter types of stress experience were currently present in their lives. Because the sample size for meditators is so small, testing how significant the latter differences are would not be productive.

Nevertheless, the differences are in alignment with what is generally found re: mindfulness and health.



The Measures:
As mentioned above, the primary psychometric tools used in this pilot are the Brief Resiliency Scale (BRS) and the Five Facet Mindfulness Questionnaire. Both tools have been previously validated on different populations and can be completed in less than five minutes.

The BRS, created in 2008 (Smith, et al) is a single dimension scale based on six Likert type items (1-5 pts each) that has been validated on college students, heart patients and chronic pain clients. The BRS was created to assess an individual's ability to bounce back from stress and how such stress management might be related to health outcomes. A high average score of 4-5 indicates above average resiliency.

The FFMQ was created by a group of investigators (Baer, et al, 2006) specifically to explore variation in mindfulness resulting from meditation practice. The FFMQ has 39 items from which five subscales are derived that align with certain competencies related to mindfulness:

Ability to:

1. Observe (one's thinking)
2. Describe (one's thoughts and feelings)
3. Act (with awareness)

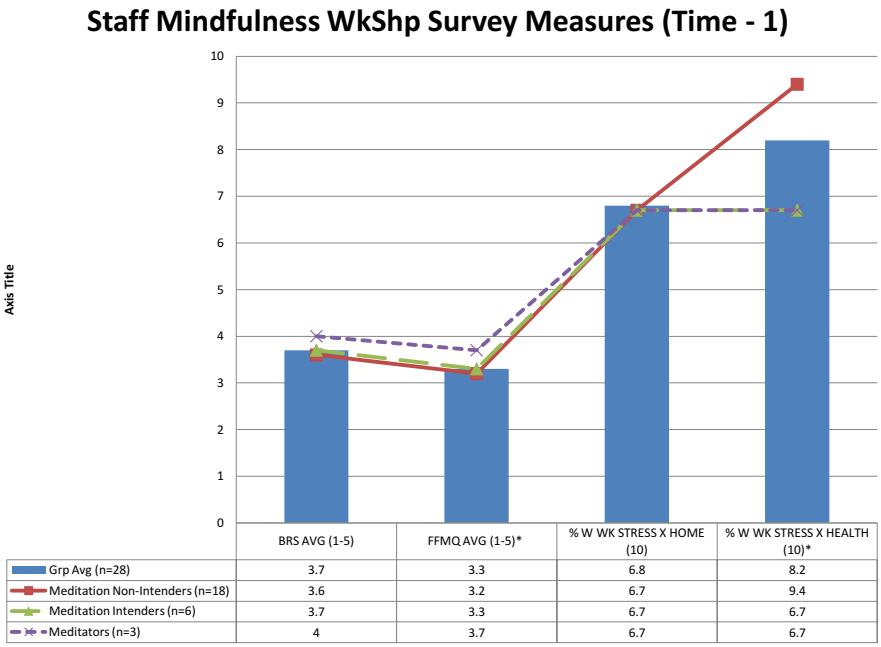
4. Nonjudge (suspending judgments)
5. Nonreact (detachment)

The five subscales or facet scores can be averaged to provide a composite or total score on the FFMQ. Similar to the BRS, high subscale or total average scores on the FFMQ of 4-5 would reflect above average awareness and sensitivity.

At the conclusion of the mindfulness/ meditation workshop participants responded to several questions pertinent to the training. One of these questions was whether as a result of workshop (or not) they were likely to begin or maintain a meditation practice. Not unexpectedly, all three currently meditating participants gave five (5) ratings (Strongly Agree) to this item. However, six other participants who reported no prior meditation experience also rated this item a five (5). We therefore split the participant data, and created a new variable with three rank-ordered categories: 1 = Meditation Non-Intenders (n=18); 2 = Meditation Intenders (n=6); and Meditators (n=3). And thus we were able to examine whether any significant differences existed between these three categories of participants.

Using T-tests, we found statistically significant differences between the above participant categories on one of the scales and one of the stress measures, though all measures were in the anticipated direction. The *Meditators* had significantly higher scores on the FFMQ than either the *Intenders* or the *Non-Intenders*. And the *Non-Intenders* reported experiencing significantly higher levels of work-related stress impacting their health than either *Intenders* or *Meditators*. While merely preliminary findings, these differences do provide some support plausibility of the measures used. These data also clarify and suggest a testable hypothesis in the subsequent follow-up to this workshop:

> ***The greatest gain scores in pre – post measures with the BRS and FFMQ measures will take place for the Intenders, and within that category, those that report successfully initiating and maintaining a meditation practice will have the highest average gain scores.***



	BRS AVG (1-5)	FFMQ AVG (1-5)*	% W WK STRESS X HOME (10)	% W WK STRESS X HEALTH (10)*
Grp Avg (n=28)	3.7	3.3	6.8	8.2
Meditation Non-Intenders (n=18)	3.6	3.2	6.7	9.4
Meditation Intenders (n=6)	3.7	3.3	6.7	6.7
Meditators (n=3)	4	3.7	6.7	6.7

Convergent Validity for an Emerging Model

Though not all the relationships between the key measures discussed above were determined to be statistically significant, they were all in the anticipated, common sense direction. For example the correlation between the BRS AVG and Work Stress (brought home) was -.234, indicating the greater one's resilience to stress, the lower the level of stress brought home from work. With a Phi of .115, this relationship doesn't reach significance (.05 or under) but the direction of this relationship is logical. Many – almost half of the inter-correlations – however, are significant.

In the chart below correlations with two asterisks denote moderate to strong correlations at levels not likely to occur randomly more than once in a hundred, minimally. There is a robust correlation (.729) between the FFMQ and the BRS, suggesting they are taping similar or related constructs (Mindfulness and Resiliency). The relationships between FFMQ and Job Stress →Home, Stress Experience (1-10) and Stress Coping (1-10) are all significant and in logical directions. To illustrate, higher FFMQ scores which are assumed to be a proxy for greater self-awareness and ability to be present, are found more often with participants who report lower levels of Job Stress →Health (-.376) and overall Stress (currently) experienced (-.528), but the FFMQ is positively correlated (.466) with Stress Coping. Taken together, any pattern of relationships this consistent provides strong evidence of convergent validity, i.e., that the measures are working well in picking-up on some shared patterns of participant perceptions.

Correlations Between Mindfulness Training Measures (T-1)

		FFMQ AVG	BRS_AVG	Wk Stress→ Home	Job Stress→ Health	Stress Exp (1-10)	Stress Cope (1-10)
FFMQ_ AVG	Pearson Correlation	1	.729(**)	-.135	-.376(*)	-.528(**)	.466(**)
	Sig. (1-tailed)		.000	.247	.024	.002	.006
	N	28	28	28	28	28	28
BRS_AVG	Pearson Correlation	.729(**)	1	-.234	-.229	-.605(**)	.219
	Sig. (1-tailed)	.000		.115	.120	.000	.131
	N	28	28	28	28	28	28
Wk Stress→Home	Pearson Correlation	-.135	-.234	1	.278	.373(*)	-.345(*)
	Sig. (1-tailed)	.247	.115		.076	.025	.036
	N	28	28	28	28	28	28
Job Stress→Health	Pearson Correlation	-.376(*)	-.229	.278	1	.229	-.171
	Sig. (1-tailed)	.024	.120	.076		.121	.192
	N	28	28	28	28	28	28
Stress Exp (1-10)	Pearson Correlation	-.528(**)	-.605(**)	.373(*)	.229	1	-.356(*)
	Sig. (1-tailed)	.002	.000	.025	.121		.031
	N	28	28	28	28	28	28
Stress Cope (1-10)	Pearson Correlation	.466(**)	.219	-.345(*)	-.171	-.356(*)	1
	Sig. (1-tailed)	.006	.131	.036	.192	.031	
	N	28	28	28	28	28	28

** Correlation is significant at the 0.01 level (1-tailed).
* Correlation is significant at the 0.05 level (1-tailed).

This pattern of plausible relationships extends across the other variables in the model, with Stress Coping abilities being negatively correlated (-.345) with Work Stress →Home and overall Stress Experience (-.356). And the Stress Experience, in turn, is positively correlated (.373) with Work Stress →Home. Consequently its now possible to infer that this same set of measures forms a model capable of telling an important story about the acquisition of staff mindfulness in corrections. By adopting longitudinal approaches that use multiple measures over time, it is possible can begin to pin-point who, how, where and why practitioners acquire mindfulness practices within corrections.

Conclusion/ Summary

This paper reports on only preliminary findings from a mindfulness training project for community corrections staff. The director the programs employing the participating staff community corrections staff in this study has indicated he wishes to engage the fuller ten-session (two full days of training bracketing eight weekly, 2-hour community of practice sessions) Mindfulness-Based Wellness & Resiliency (MBWR) model once he has hired and on-boarded new staff for a third facility – a long-term residential treatment program based on Acceptance and Commitment Therapy (ACT), a mindfulness-based EBP. This follow-up engagement with the current participants will enable a different kind of analysis of the FFMQ and BRS measures and how they co-vary with training dose

and subsequent outcomes. Aside from staff health, other outcomes of interest are performance outcomes such as sick days, staff retention and performance in engaging clients.

Having a reliable and readily transferable methodology for tracking mindfulness and related performance issues should provide a boon to other investigators focusing on training mindfulness in corrections. Furthermore, the latter research need not be limited to training correctional staff but also could be extended to training inmates and community corrections clients, assuming there are parallel findings for the measures.