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Motivation and Treatment Readiness of Those Participating in Correctional Educational Programming

Kelly Eileen O'Bryan
Walden University

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Walden University

College of Psychology and Community Services

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Kelly Eileen O'Bryan

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the review committee have been made.

Review Committee

Dr. Danielle McDonald, Committee Chairperson,
Criminal Justice Faculty

Dr. Sean Grier, Committee Member,
Criminal Justice Faculty

Chief Academic Officer and Provost
Sue Subocz, Ph.D.

Walden University
2024

Abstract

Motivation and Treatment Readiness of Those Participating in Correctional Educational

Programming

by

Kelly Eileen O'Bryan

MS, Walden University, 2019

MA, University of Arkansas, 2014

BS, University of Arkansas, 2012

Dissertation Submitted in Partial Fulfillment

of the Requirements for the Degree of

Doctor of Philosophy

Criminal Justice

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Abstract

This study examined what motivated male inmates in a private Oklahoma prison to participate in *general education diploma* or the Microsoft Office Specialist certification program. Research questions explored, what factors motivated program participants to participate in educational programs while incarcerated? Next, whether those who were eligible to participate in the program exhibited treatment readiness? Finally, were those who exhibited higher levels of treatment readiness and motivation more likely to participate in and complete the program? A survey was used to collect demographic information and assess treatment readiness and motivation through the Corrections Victoria Treatment Readiness Questionnaire for 48 inmates. Correctional and educational staff also participated in focus group interviews to discuss treatment readiness, motivation, and what they observed when working with participants in these educational programs. Findings suggested younger inmates were more likely to participate in and complete the education program, non-Hispanic/Latino inmates were more likely to take accountability for their offending, and being married was found to be a good source of motivation. Focus group interviews provided support for participation in educational programming as a necessary tool to assist with successful reentry into society. In addition, there is a continued need to expand, develop, and financially fund more educational programs within the prison system. Based on these results, if programs are improved, positive social change can be achieved when inmates have an increasingly successful reintegration into society.

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Dedication

To my wife, Dawn, from the moment you walked me through the front door of NWACC 20 years ago, to the last word of this dissertation, you have been there. I am endlessly grateful for your love, commitment, and encouragement throughout the challenges of my PhD journey and life. You have always mattered, and I love you. You can finally say you married a doctor.

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At last, to my mother, as promised, I have finished. I love and miss you every day. Now you can rest.

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Chapter 1: Introduction to the Study

Prior research assessing recidivism has consistently found that the combination of limited education, lack of job training, and felony status make it difficult to secure a job. Those who remain unemployed typically have higher rates of recidivism or committing a crime after release from criminal justice supervision (National Institute of Justice, 2014). Prior literature has examined the importance of educational programs in the correctional setting in helping returning citizens to find and secure stable employment. However, little focus has been given to the motivational factors that influence the offender to seek out and participate in correctional educational programming and the impact of treatment readiness on this decision. This is particularly important as those in correctional settings may require more intense motivational strategies to successfully reintegrate back into their communities (Ashcroft, 1999).

Background

In the late 1980s and early 1990s, multiple bills were passed as part of the “war on drugs” and “get tough on crime” movements that were intended to deter people from wanting to commit crimes by making the punishment outweigh any benefits one would gain from committing the crime. This meant longer sentences for nonviolent crimes such as drug possession and the removal of incentives for inmates to participate in treatment and educational programs. For instance, the 1994 Violent Crime Control and Law Enforcement Act overturned the provision of the 1965 Higher Education Act that had expanded Pell grants to those who were incarcerated. This meant that Pell grants could no longer be used by inmates to offset the cost of higher education in prison and were now

viewed by legislators and the public as a luxury rather than a tool to increase job prospects and decrease recidivism (Ubah, 2004). However, the barriers inmates face once released from prison, lack of job skills and stability are significant (Vacca, 2004). Lack of education and social structure not only contribute to criminal behavior but enhance the degree to which crime is committed (Siegel, 2000).

Recidivism can be reduced significantly through a readiness model that incorporates the offender's needs and risks (Ward et al., 2004). If a readiness tool is applied it will offer more engagement in correctional rehabilitation and provide greater outcomes in treatment. It is important to have a rehabilitation framework that motivates and assists offenders to make informed decisions about their willingness to participate in programs (Birgden, 2002). Inmates who received basic adult education programming during their incarceration period are more prepared and more successful in their reintegration process (Cho & Tyler, 2010) and are at a lower risk of reoffending or recidivating (Davis et al., 2013; Hall, 2015; Nally et al., 2012). They also were more likely to have stable employment and higher earnings when compared with those who did not complete their programs.

Returning citizens carry a stigma even though they fulfilled their court mandated obligations and have attempted to make positive life changes such as educational obtainment (Copen Haver et al., 2007). Offenders who have the mindset of owning their problems and want to receive help in making cognitive and behavioral change will have an understanding of the benefits of the treatment, interest in receiving help, and distress about their current situation (Day et al., 2010). During incarceration, these characteristics

help to serve as motivation for participation in programs. For example, in a study of those with alcohol problems who sought treatment, 77% of those who abstained from drinking for 1 year or longer were self-motivated without seeking professional help (Sobell et al., 1996).

Problem Statement

Nearly 600,000 people are released from state and federal prisons each year, including nearly 8,000 returning citizens released in the state of Oklahoma (Oklahoma Department of Corrections, 2015). Those who are incarcerated and do not receive the skills needed to help them become successful upon reentry are more likely to recidivate. In Oklahoma, for instance, 26% of inmates who were released from criminal justice supervision returned to prison, and the most common reason cited for their recidivism was their inability to secure a stable job and safe housing (Oklahoma Department of Corrections, 2015). It is difficult to obtain permanent employment and housing with a felony conviction. However, 1 in 12 Oklahoma residents had at least one felony conviction on their record.

Prior studies have demonstrated that ex-offenders are more likely to recidivate if they are under-educated and lack job skills. Oklahoma has attempted to address the educational and employment skills of those incarcerated within the state. However, not everyone who is offered the opportunity to participate in educational and treatment programs in prison takes advantage of this opportunity. Some offenders justify their non-participation citing that they are too old to change their ways, or they do not perceive how the program will be a benefit to them personally (Sobell et al., 1996). Getting people

to participate in programming occurs after there is an appreciation by the offender of the circumstances that led them to criminal behavior and a desire to seek change within themselves (Day et al., 2010).

Purpose of the Study

For nearly three decades, a substantial body of research has assessed the correctional system's ability to provide programming, and the tools needed to be successful upon reentry (James, 2015). Many studies have identified various programs provided to offenders who are incarcerated that have reduced recidivism and prepared returning citizens on how to be successful after reentry (Lewis, 2006). Some are motivated to participate in correctional programming to acquire the needed skills and knowledge to be successful in their communities, while others participated after succumbing to peer pressure from other inmates (Manger et al., 2010). Additionally, criminal offenders often have an ego-centered perspective when addressing their own criminal behavior (Serin & Kennedy, 1997). Therefore, they are not necessarily concerned about their criminal actions but rather accept the consequences without concern for how to create change. Nevertheless, those who want to change their behavior will gravitate toward professionals who can help facilitate and bring about change (DiClemente & Procjaska, 2004). However, none of these studies discuss treatment readiness or the motivational factors of inmates' participation in corrections-based educational programs. Therefore, the purpose of this study was to address a gap in the research by providing a better understanding of what factors motivated inmates to participate in educational programs while incarcerated and the impact their level of

treatment readiness had on participation and completion. The findings from this study impact social change by providing an example that can be generalized to other male private medium security facilities to improve participation in educational programs and awareness of treatment readiness.

Research Questions

The following research questions were addressed in this mixed-methods study:

1. What factors motivated program participants to participate in educational programs while incarcerated?
2. Were those who were eligible to participate in the program exhibiting treatment readiness?
3. Are those who exhibited higher levels of treatment readiness and motivation more likely to participate in and complete the program?

It had been hypothesized that those who were participating in educational programs would exhibit treatment readiness, while the null hypothesis suggested those participating in educational programs would not exhibit treatment readiness

Theoretical Foundation

Bandura's theory on self-efficacy was used as the theoretical framework for this research study. Bandura's theory is based on four sources of efficacy that are used to overcome challenges including mastery experiences, vicarious experiences, verbal persuasion, and emotional/physiological states (Bandura, 2000). Bandura (1997) suggested that mastery experiences are a primary source of self-efficacy, where direct experiences in mastering a task through perseverance enable individuals to build

resilience in daily life obstacles. Although prisons are typically viewed as institutions of punishment (Chang & Huang, 2011), some correctional institutions have been moving toward a rehabilitative model in which offenders are encouraged to spend more of their time during incarceration focused on improving themselves for the eventual return to their respective communities (Satterberg & Walkinshaw, 2015). Bandura's theory compliments this rehabilitative model by suggesting inmates learn through vicarious experiences or from seeing what happens to people similar to themselves in similar situations. Verbal persuasion and encouragement from correctional staff also builds confidence and strengthens an inmate's ability to overcome obstacles during incarceration (Bandura, 1997). Finally, the theory suggests that emotional and physiological states are obtained as children through parental encouragement, peer support, and the accomplishments experienced as we mature (Bandura, 2000; Nally et.al, 2012). When applying Bandura's theory to males who are incarcerated, an offender may have had little to no parental encouragement or positive peer support, which made it more difficult to achieve socially acceptable accomplishments and fed into their criminal behavior. Prior research, for instance, suggests that offenders who enter into the correctional system often lack self-efficacy, education, and have a compromised view of life (Case et al., 2005). During incarceration, the Department of Corrections could fill this need and serve as a system of support for this population. It is important that while corrections are punitive in following through with sentencing, they also offer support and direction so inmates are making informed decisions regarding program participation and their needs (Birgden, 2002).

Nature of the Study

This study quantitatively and qualitatively assessed treatment readiness and the motivational factors that influenced an inmate's participation in educational programming, while in a private medium-security prison in Oklahoma. I collected data through surveys conducted with inmates participating in or on the waitlist for general equivalence diploma (GED) courses or Microsoft Office Specialist (MOS) certification to better understand treatment readiness and if there were differences between those on the waitlist and in the program. Focus group interviews also were conducted to provide an understanding of what correctional and educational staff who worked in the GED and MOS programs observed happening with motivation and the impact of treatment readiness on participation and completion. Quantitative data for this mixed-methods study were obtained from surveys distributed by educational programming staff to those participating in or on the wait list for GED courses or MOS certification. Focus group interviews were conducted with correctional and educational staff who worked directly with those in the GED and MOS certification programs.

Limitations

This study sought to close the gap in the literature regarding treatment readiness and what motivational factors influenced an inmate's participation in educational programming. However, this research study also had limitations. For instance, the facility used in this study was an all-male facility. Therefore, results should not be assumed to apply to women in educational programs in prison. In addition, this research study focused on a medium-security private prison, and the results may not be generalizable to

those housed in minimum or maximum-security facilities or state or federally funded facilities.

Significance

Prior research studies on motivation and correctional treatment have focused on substance abuse programs that have not separated treatment readiness from motivation (Cunningham et al., 1993). There also have not been any research studies that have examined motivation to participate and treatment readiness for educational programs in correctional facilities. This research study addressed why inmates participated in educational programs and how their treatment readiness impacted their ability to participate and complete the program. Therefore, the significance of this research study was its focus on treatment readiness and what factors motivated inmates to participate in educational programming while incarcerated. This information has been shared with the correctional staff at the facility and beyond to provide a basis of knowledge that can assist in guiding correctional staff and administrators when implementing educational programming.

Summary

Correctional education programs can be used to help returning citizens transition from prison to the community by providing the skills needed to obtain employment. However, not everyone who has the opportunity to participate in correctional education programs takes advantage of this opportunity. This research study sought to understand what motivated offenders to participate in correctional education programs while incarcerated and how treatment readiness impacted participation and completion.

Chapter 2: Literature Review

The number of Americans incarcerated within the United States has steadily increased over the last three decades. Currently, there are over 2 million Americans incarcerated within the United States due to criminal justice policies that have focused on “getting tough on crime” and “locking them up” instead of treatment and rehabilitation (Brazell et al., 2009; Sawyer & Wagner, 2020). This shift in focus from treatment to punishment also has led to overcrowding and high recidivism rates with a sizable portion of the population returning to prison. Ninety-five percent of all those who are incarcerated will be released back to the community with more than half returning to prison (Hall & Killacky, 2008; James, 2015; Sawyer & Wagner, 2020). The high recidivism rates of ex-offenders then further contribute to the number of incarcerated people continuing to strain the prison system’s resources along with the criminal justice system more broadly. The lack of stability upon release from prison sets the foundation on how to implement social change within correctional systems (James, 2015).

Lack of education prior to incarceration and while incarcerated creates an additional barrier to achieving a successful life once released, especially when combined with the felon status that is placed on them from the moment of adjudication. Those who are incarcerated tend to have low education levels, with only 41% of inmates having a high school diploma or GED when entering the prison system (Bender, 2018). The Vera Institute of Justice (2017) also reported that 64% of federal and state inmates are eligible for post-secondary education programs in prison. However, only 9% of all inmates participate in a post-secondary education program (Vera Institute of Justice, 2017). Serin

and Kennedy (1997), for example, found that offenders tend to be more ego-centered, do not care about their criminal behavior, and are mostly focused on the consequences of that behavior for them. This mindset then leads to offenders idly wasting or “doing” their time and waiting for their notification of discharge rather than participating in rehabilitation programming while incarcerated. Many offenders justify not participating by giving excuses such as they are “too old” or they do not need help with their future stability (Sobell et al., 1996). However, some researchers have found some offenders will consider their futures and naturally seek programming that can help provide the necessary tools for change (DiClemente et al., 2004). This study sought to understand why some offenders were motivated to participate in educational programming while others were not.

Chapter 2 discusses previous research that sets the foundation for this study addressing the factors that motivate inmate participation in educational programming along with a more concrete understanding of treatment readiness, program participation, and success. Although this study focuses on Oklahoma’s incarcerated population, these concerns are not unique to Oklahoma and are occurring nationwide. This chapter begins with a discussion on recidivism, its measurement, and what recidivism looks like nationally and how it is viewed in Oklahoma. Next, information is presented discussing the barriers that inmates face upon release along with studies comparing the outcomes for offenders who receive treatment and those who do not. Research also is presented that examines prison educational programs offered both in Oklahoma and nationally. Then, research discussing the prison community and its dynamics both physically and socially

leads to a discussion regarding treatment readiness and motivation. This study sought to better understand what factors motivated inmates to participate in education programs while incarcerated, so correctional staff can utilize this knowledge to recruit and retain education program participants.

Literature Search Strategy

The literature search for this research was first focused on what was published for the last 5 years. However, due to the limited availability of research conducted on the topic of treatment readiness, motivation, and correctional education programming, the literature search was extended beyond the 5-year focus. The articles and resources selected for this study provide a foundation for this research. Key terms guiding this search were *correctional education; correctional effectiveness; correctional rehabilitation; educational obtainment of incarcerated; evidence-based practices in corrections; inmate barriers; inmate motivation; mental health of inmates; offender treatment; prison programs; recidivism; and treatment readiness.*

During the literature search, various publication formats were included, such as journal articles, books, and special reports. The references utilized for this literature review were found using the EBSCO host along with online resources such as Google Scholar, the Bureau of Justice Statistics, and the Oklahoma Department of Corrections. Each resource utilized provided insight into the many barriers faced by our correctional institutions and the population they served, with a focus on educational obtainment and the reintegration processes. In addition, these findings provided insight into various research methods, both qualitative and quantitative, supporting this mixed-methods

research study.

Theoretical Foundation

Bandura (1977) proposed that self-efficacy is not a characteristic that some people have, and others do not. Instead, he suggested it is a concept that all humans can work toward regardless of their current social status or environment (Bandura, 1982). Thus, self-efficacy can be a cognitive factor in motivation and performance in treatment processes (Bandura, 1997, 2000). For instance, offenders who do not express personal accountability for their actions or see the importance of investing in their future will be less likely to engage in treatment or reluctant to complete the treatment process. This research seeks to utilize Bandura's theory as a framework and discuss how his approach can offer insight into offender correctional education programming and how this theory complements the multifactor offender readiness model. The focus was on the theory's elements of performance accomplishments (mastery of experiences), vicarious experience (role model observation), verbal persuasion (mentor selection), and physiological states (emotional management) to strengthen self-efficacy and effectively handle stressful life events (Bandura, 1977).

Self-Efficacy of Accomplishments

Bandura (1997) suggested that the experiences of loss or failure should not be viewed as a negative outcome, but instead viewed as an opportunity to make a cognitive change and treated as a learning experience with the ability to try again until the task is mastered. Some offenders serving sentences may perceive their incarceration as a failing moment in their life. In contrast, others may look at it as an opportunity to make a life

change or a “turning point” where the action (getting caught) may pull them away from future criminality and provide them an avenue to make a cognitive decision to desist from crime and approach life from more legitimate means (Bandura, 1997; Laub & Sampson, 2003). Correctional programming, much like educational programs, requires that the participant have the cognitive mindset to accomplish the task of working to reach the desired learning outcomes or program completion.

Self-Efficacy of Vicarious Experiences

Bandura also suggested that part of enhancing self-efficacy and reaching personal goals is individuals’ interaction and or observation of others (role models) doing what they desire to do in their lives. For instance, schools seek qualified teachers who not only can teach but also who will serve as a positive role model for their students by modeling positive and expected behaviors (Bandura et al., 1996). In the correctional setting, offenders are often situated in settings with other offenders who are lacking in self-efficacy, failure mind sets, and a lack of commitment to taking their life experience and viewing it as an opportunity for change. As suggested by Bandura (1982), it is an integral part of self-efficacy enhancement to surround ourselves with those who model the behavior we desire to emulate. Therefore, it is important that employees, volunteers, and program facilitators be aware of this and provide a positive environment where they model appropriate behavior and decision making skills for those who are incarcerated.

Self-Efficacy of Verbal Persuasion

Prior research has shown that emotions often dictate physical actions and judgment, which ultimately impacts individuals’ impression of self-efficacy (Bandura,

1977; Clore & Huntsinger, 2007). Bandura (1982) suggested that it is normal for an individual to feel discouragement, but one's ability to return from that physiological state is what impacts self-efficacy. In a correctional setting, one must consider the adverse effects of incarceration and how this can influence an offender's emotional state.

Incarceration leads to loss of freedom and limited physical mobility, which can play a role in an offender's willingness to participate in correctional programming (Andrews & Bonta, 2003). Offenders may have a lower perception of the criminal justice system, while their own perception of goal accomplishment may be altered due to incarceration. But correctional programs can be developed to help potential participants become motivated and ready for treatment by engaging the offender in self-efficacy enhancement. Providing a positive role model and an environment that enhances their physical and personal emotional state may provide an avenue for offenders to have a more goal-oriented and positive attitude toward treatment and program completion (Bandura, 1977; Ward et al., 2004). Utilizing correctional programs to address and process the emotional factors associated with incarceration can impact the overall success of program completion, enhance self-efficacy, and promote a positive environment for both the staff and offenders (Roth et al., 2016).

Self-Efficacy of Physiological States

A primary influence on perceptions of self-concept is self-efficacy (Bandura, 2004). Self-efficacy plays a role in allowing individuals to make interpretations of prior accomplishments, feedback from social peers, and life experiences (Stevens et al., 2004). Prior research has suggested that self-efficacy is created early on in our life-course

through interactions with family and friends, eventually moving into more public venues such as a church, school, and the workplace (Staples et al., 1984). For those who are incarcerated, these interactions and the environment in which these interactions occur are limited and often structured in a way that does not present an opportunity for one's self-efficacy to be enhanced. Correctional institutions are often chaotic, loud, and violent (Kuhlman & Ruddell, 2005). The offender's limited mobility also can create a complex environment for treatment, programming, and self-efficacy.

Self Efficacy and Correctional Populations Research

Research has suggested that educational programs were a positive experience in the offenders' lives (Allred et al., 2013). Similar research suggested that participating in an educational program had a positive influence on self-efficacy for both math and self-regulated learning (Roth et al., 2016). This was particularly true for those who had no previous convictions as they demonstrated the highest levels of self-efficacy in math and self-regulated learning as well as in information and communications technology. However, those who had served longer portions of their sentence perceived themselves to be less competent in information and communications technology and scored lower in self-efficacy.

Literature Review Related to Key Variables and Concepts

Recidivism, Barriers to Reentry, & Treatment

Researchers and practitioners working within the criminal justice field have examined the term "recidivism" from multiple perspectives ranging from a behavioral approach that focuses on "the tendency for one to relapse into a previous condition or

mode of behavior” to the more criminalistics view of “relapsing into prior criminal habits, especially after punishment” (Blumstein & Larson, 1971, p. 127). Recidivism also can be measured by merely using the terms success or failure. Although the importance of success cannot be underestimated, as it is often tied to program funding. Other studies have defined recidivism as returning to prison after being released from the institution for some time, as an arrest after release from the criminal justice system, or a probation or parole violation (Durose et al., 2014). Although this research is not advocating for a new definition of recidivism to be developed, it is imperative to propose a base definition from which to cultivate the larger focus of this work. Therefore, a broader definition of recidivism will be used for this study that includes “reengaging in criminal behavior after receiving a sanction or intervention,” where recidivism will be measured by the number of offenders who return to prison by either a revocation of one’s probation/parole or because of a new crime (Elderbroom & King, 2014, p. 2).

Regardless of the definition, recidivism or ex-offenders returning to the prison system is a problem across the United States. In a 9-year follow up study on recidivism, Durose et al. (2014) assessed patterns of prisoners released in 2005 in 30 states and collected data regarding their recidivism rates through 2010. The authors found that of the 401,288 inmates released, 1,994,000 were rearrested at various times over the nine-year period averaging five arrests per inmate (see also Alper et al., 2018). In Oklahoma, the Department of Corrections (2015) releases approximately 8,000 inmates each year with 26.4% of those released eventually returning to prison. Although Oklahoma’s recidivism rate is relatively low in comparison to other states, it is important to note that

1 in 12 Oklahomans has at least one felony conviction on their criminal record and those who returned to prison most commonly cited their return was due to their inability to successfully reintegrate back into their communities (Chown & Davis, 1986; Oklahoma Department of Corrections, 2015).

To understand why so many ex-offenders recidivate and return to prison, their background prior to entering prison must be taken into consideration. For instance, many offenders before incarceration are found to be at an educational disadvantage due to low educational attainment, a lack of access to quality education, and poor family structure (CopenHaver et al., 2007). It is estimated that about 40% of state inmates, 27% of federal inmates, 47% of those incarcerated in local jails, and 31 % of those under some form of criminal justice supervision have not acquired a high school diploma or GED prior to incarceration and/or supervision (Harlow, 2003).

In addition to the lack of an education, other issues such as mental health and homelessness often play a role in why offenders are incarcerated. The National Alliance of Mental Illness (2018), for instance, found that those with a predisposition to mental illness are more likely to encounter the criminal justice system than receive the mental health and medical help they need. They found that roughly 15% of men and nearly 30% of women who reside in correctional facilities have serious mental health conditions that are often not treated properly (NAMI, 2018). Without treatment and proper care, these individuals often fall prey to victimization and worsening mental health. In addition to mental health, homelessness was found to be an issue for the correctional population prior to and post time served. For instance, those who were formerly incarcerated were

ten times more likely to be homeless than the public (Couloute, 2018).

In a study conducted by the Brookings Institute, IRS tax returns for inmates before prison and after their release were used to assess labor market trends (Looney & Turner, 2018). This study found that 49% were employed prior to incarceration earning an annual average of \$6,250, while within the first year after release 55% were employed and earning on average \$10,090 per year. Although slightly more ex-offenders were employed after release and their income increased, they are still earning below the poverty line with slightly less than half still unemployed. Visher, Debus, and Yahner (2008) also studied employment after release and found that within two months of their release, 43% of the 740 former prisoners in Illinois, Texas, and Ohio were employed. However, only 31% were able to maintain their employment beyond two months and wages varied widely from \$2 to \$80 per hour depending on the job (Visher, Debus, and Yahner, 2008).

Once convicted, the stigma of being labeled a felon is attached and continues upon release back into the community. For instance, the felon label inhibits one's access to good paying jobs (CopenHaver, Edwards-Wiley, and Byers, 2007). However, employment is important. Cho and Tyler (2010) found ex-offenders were less likely to re-offend if they were able to obtain and maintain a job with higher wages. A study conducted by the Society for Human Resource Management (2018) found that due to low unemployment rates, employers were more likely to hire those with a felony conviction. However, employers were most likely to hire those with a consistent work history, which was not typical for most of those incarcerated.

Bush, Harris, and Parker (2016) suggested that offenders were often trapped in a cycle of thought that does not allow them to think about alternative outcomes for a life beyond incarceration upon their release. For example, ex-offenders returning to the community will state they plan to focus on obtaining a new life or a fresh start. However, they lack the knowledge and skills required to do so through legitimate means making their goal unobtainable (Bush, Harris, & Parker, 2016). Becker (1963) suggested the criminal justice system needed to take the time that offenders were spending incarcerated and “better equip” them for life on the outside through rehabilitation programs. However, due to continuous budget cuts, correctional facilities offer limited treatment and programming to prepare inmates for the reentry process. This lack of funding has further contributed to the barriers ex-offenders face upon their release. Therefore, it is not surprising that so many ex-offenders eventually return to the prison system. As noted by the Oklahoma Department of Corrections (2015), there is a need to reexamine how correctional facilities can help with reintegration. Without the necessary skills and training, incarcerated men and women will return to their communities unprepared and eventually find themselves in the “cycle of recidivism” costing the state of Oklahoma more money to reincarcerate them once again.

Educational Programming in Prison

In 1965, the Higher Education Act extended Pell grants to inmates allowing them to access higher education while they were incarcerated to improve their chances of success upon release. This extension of the program was based on previous research that had suggested education was a strong predictor in reducing recidivism. However, in 1994

the Violent Crime Control and Law Enforcement Act was passed as part of the get tough on crime movement and stated those in prison could no longer access Pell grants to fund their education while incarcerated. This meant that when the 1994 Higher Education Reauthorization Act was implemented it no longer contained a provision to provide Pell grants to inmates, which directly impacted their ability to access an education in prison (Ubah, 2004).

However, prior to 1994, inmates were afforded the opportunity to obtain a higher education to provide them with an advantage upon release at finding a job and stability. These opportunities became available after President Johnson asked Congress to consider the research on education and recidivism and to extend the already implemented Higher Education Act to offer post-secondary education to individuals during their incarceration (Ubah, 2004). Johnson and many of his supporters felt access to education would offer a means to avoid future criminality for those who took advantage of the opportunity. However, as more and more inmates began utilizing these resources, non-supporters grew uneasy and sought out political alliances to advocate for new policies that would restrict, if not eradicate this educational assistance (Ubah, 2004).

For several decades, numerous bills were presented to remove access to Pell Grant programs for inmates. These attempts were all rejected until 1994 when the “war on drugs” and “tough on crime” movements began to lead many American voters to believe people who were incarcerated were not worth educating (Mallory, 2015). The 1994 Violent Crime Control and Law Enforcement Act along with the 1994 Higher Education Reauthorization still continue to restrict access to Pell Grants for those who are

incarcerated today (Wilson & Petersilia, 2011). This is incredibly problematic as research conducted by the RAND organization found that inmates who participated in any kind of educational program were 43% less likely to recidivate upon release than those who did not attend any educational programming (RAND, 2016).

Today there are still education programs available in prisons, but there are significantly fewer programs due to the lack of money, space, and staffing support. However, those programs that are operating within corrections continue to help ex-offenders obtain skills that later help them find jobs and stay out of the prison system. For example, vocational training programs where participants are taught a trade such as plumbing, welding, cosmetology, or electrician provide an opportunity to learn one's trade through an apprenticeship. The opportunity to participate in this hands-on training provides the participant with experience and work history, which increases their chance of getting a job upon their release (Seiter and Kadela, 2003). This is consistent with the findings of Gordon and Weldon (2003) who examined the recidivism rates of inmates housed at the Huttonsville Correctional Center in West Virginia who participated in vocational training from 1999 to 2000. The researchers found that those who completed vocational training were less likely to recidivate (8.75%) than those who did not complete the program (26%) (Gordon & Weldon, 2003). The researchers also noted that those who participated in the GED program and the vocational training program had the lowest recidivism rates (6.71%). These findings suggested that correctional education programs work, and education is a "change agent" that will bring about reduced recidivism and increased safety for communities when ex-offenders are released (Gordon & Weldon,

2003, p. 207).

Cho and Tyler (2010) sought to examine the effect of prison education after release with a focus on adult basic education and the Florida labor market. Adult basic education programming for their study's purposes was education provided to inmates who had a reading level below the ninth grade. By merging data sets from the Florida Department of Law Enforcement and the Florida Education and Training Placement Information Program, they drew from a sample of 5,172 male inmates (Cho & Tyler, 2010). The total number of inmates participating and completing the adult basic education programming was 2,267 whereas, the remaining failed to complete the program due to relocation, program interruption, or personal choice. Although their findings did not suggest a reduction in recidivism rates, they did find an increase in earnings and employability.

Davis et.al. (2013) utilized meta-analysis techniques to analyze multiple studies to assess the impact of correctional education on recidivism along with offender employability post release. The researchers concluded that inmates who took advantage of correctional education programming had a 43% lower risk for recidivating than those who did not. They also concluded when comparing those who participated in vocational programming to those who participated in non-vocational correctional education programming, that those who completed vocational training were 28% more likely to obtain employment than those who had not participated in vocational programs (Davis, Bozick, Steele, Saunders, & Miles, 2013).

Another study conducted in Texas examined the impact of prison education on

offender reintegration (Fabelo, 2002). This study analyzed inmates on first-time release from 1997 to 1998 who also qualified for and completed educational programming while incarcerated. The researcher found that inmates with higher education levels could find employment at higher wages and were more likely to desist from criminal activity. Those who completed the education program also saw a reduction in recidivism of 11% compared to inmates who did not qualify or participate in educational programming during their incarceration time (Fabelo, 2002).

Robinson (2001) assessed Project Horizon in Utah, a nonprofit organization that provided voluntary education and work skills to inmates to prepare them for reintegration. Project Horizon partnered with the Department of Work Force and Mental Health Services to establish funding for inmates to participate in correctional education for future success. Robinson found that parolees participating in Project Horizon had lower recidivism rates (18-20%) than non-participants (Robinson, 2000).

Hall (2015) examined ten empirical studies on correctional education published from 1995 to 2010 to better understand potential risk factors such as the offender's age, race, gender, marital status, and education. The analysis confirmed previous research findings regarding the relationship between education and recidivism leading Hall (2015) to conclude that schooling could be utilized as a tool to reduce recidivism rates (Ubah, 2004; Vacca, 2004).

Bozick et al, (2018) through 37 years of research (1988-2017) sought to answer if education while incarcerated reduced recidivism and provided more opportunities for employment stability. Inmates who participated in education programs were 28% less

likely to reoffend than those who did not participate, which is consistent with prior research (Bozick, Steele, Davis, and Turner, 2018).

Treatment Readiness & Motivation

Today, there are fewer treatment programs available and fewer incentives to participate in treatment while incarcerated. In addition, many facilities struggle with budgetary issues thus having to decrease correctional programming that an offender would find of interest or worthwhile (LoBuglio, 2001). However, this was not always the case. Before the “get tough” on crime movement, inmates were motivated to participate in treatment programs because if they did so they could report to the parole board they were getting the help they needed and were ready to be released back to the community under parole supervision. However, part of the get tough on crime movement involved moving away from parole and towards offenders serving their full sentences. The belief was that if a potential offender knew they would receive a long sentence that they would be required to complete, then they would be deterred from committing the crime. This led to the passage of acts such as Truth in Sentencing where an offender is required to serve at a minimum 85% of their sentence and mandatory minimum sentencing where an offender once convicted for the crime is required to serve the full sentence that had been determined by their legislators (Ditton & Wilson, 1999).

In Oklahoma since 1988, offenders have been provided the opportunity to earn good time credit based on their level of security classification within the prison system. According to the Oklahoma Department of Corrections website, inmates classified at a level one status were not allowed to receive earned credits towards an early release

because they were serving a life sentence or were considered to be at a higher risk for violence or escape. However, those who have been classified as level two through four can earn anywhere from 22 to 60 credited days based on good behavior, program participation, and meritorious status (Oklahoma Department of Corrections, 2015).

Although the good-time credit policy in Oklahoma does not offer a significant reduction in one's sentence, it does provide inmates with an incentive to participate in programming to help them reintegrate back into society. Yet, many inmates do not take advantage of these opportunities, while those who do participate do not always complete the program because they experience setbacks such as disciplinary issues that keep them from finishing (LoBuglio, 2001). Not all offenders are ready to address the issues that put them behind bars. Once incarcerated, offenders experience feelings of anger, hopelessness, and frustration while also accepting their loss of freedom. These emotions and experiences will drive some to want to participate in treatment, but others will not be interested. Most prison treatment programs were designed around a participant's desire for change and assumed that those coming into the system would be motivated and ready for change (Stewart & Picheca, 2001). However, not everyone is motivated and prepared to participate in prison programming. Many justify their lack of participation by stating they are "too criminal to change" or do not see how they could personally benefit from participation (Sobell, Cunningham, and Sobell, 1996).

It is essential for offenders who have access to educational programming to participate. As the research on correctional education has shown, those who participate in and complete educational programming were more likely to overcome the unemployment

barrier upon release, making it significantly less likely they returned to prison. Therefore, understanding an offender's motivational factors for participating in or not participating in a prison-based educational program will help correctional and educational staff assist offenders in becoming ready to participate in treatment.

To better understand what motivates someone to participate in treatment, we must examine how ready they are to participate in treatment or their treatment readiness.

Treatment readiness occurs when one is ready to engage in their treatment and invest in their own success. Andrews and Bonta (2003), for example, found an offender's risks, needs, and responsivity impact their decision-making skills and treatment readiness (Andrews & Bonta, 2003). Although this research found these factors can arbitrate the effects of treatment, the effectiveness of these risk reduction techniques were questionable as correctional staff may not understand their impact or how to utilize them (Day, Casey, Ward, Howells, & Vess, 2010). A research study conducted in a Norway prison also found that treatment readiness was at least partially responsible for treatment program completion during incarceration. For instance, those who were ready to participate in treatment were two times more likely to complete treatment than those who were not ready for treatment (Bosma, Kunst, Reef, Dirkzwager, & Nieuwebeerta, 2014).

Serin and Kennedy (1997) concluded that offenders' needs were not monolithic, where some responded to various treatments and others did not. Further, Howells and Day (2003) identified multiple factors that may limit the effects of anger management treatment that can be applied more broadly to an offender's motivation and treatment readiness. For example, Howells and Day (2003) suggested offenders with mental illness

may not be ready to participate in correctional programs due to their inability to acknowledge their need for intervention. They also recommended that consideration be given to the setting where the program was conducted. For instance, institutional settings such as prisons often inhibit the effectiveness of program outcomes due to their location and the restrictions placed on the location. The authors also concluded that treatment readiness and motivation can be factors impacted by an offender's perception of whether he or she is being coerced or mandated to engage in these programs (Howells & Day, 2003). The authors stated that not considering these factors could impact the facility and the offender through the cost of implementing ineffective programs and not correctly preparing offenders for their release.

Utilizing Howells and Day's findings, Ward et al. (2004) expanded their concepts of internal and external factors of effectiveness in anger management programs. They proposed the multifactor offender readiness model (MORM), which is an offender-specific treatment readiness model. This model suggests that an offender's treatment readiness is directly linked to external (triggers) and internal variables (experiences) as well as their characteristics and provides a specialized treatment plan based on the individual's readiness level (Ward et al., 2004, p. 648). As discussed by Alemohammad et al. (2017), this model when utilized correctly provides the ideal treatment environment and techniques needed to reduce the risk an offender will experience the effects of attrition in their rehabilitation.

This research study will utilize the definition of treatment readiness as defined by Ward, Day, Howells, and Birdgden where treatment readiness is defined, "as the presence

of characteristics (states or dispositions) within either the client or therapeutic situation, which are likely to promote engagement in therapy and which, thereby, are likely to enhance therapeutic change” (Ward, et al., 2004, p. 650). This definition of treatment readiness was derived from the multifactor offender readiness model. Next, the model’s key components, such as internal and external treatment readiness conditions are examined.

Internal Readiness Conditions

Internal readiness refers to the experiences the offender has had that impacted their thoughts on cooperating and complying with treatment, such as cognitive factors, affective factors, behavioral factors, volition, and personal identity (Ward et al., 2004). For instance, each potential program participant will bring with them different decision-making styles, attitudes, and beliefs that could inhibit one’s ability to engage in treatment. Therefore, it is imperative to acknowledge and address one’s individual needs to ensure each participant is engaged in the treatment process.

Client expectations combined with role expectations also were important cognitive factors. Ward et al. (2004) found that offenders who had a negative preconceived notion of treatment based on personal experiences with other interventions were more likely to fall into the mindset that treatment will not work and may take a non-participatory role in the treatment process. However, if the participant was approached by staff with a positive attitude and a strong expectation for positive outcomes, the offender may be more accepting of treatment and take an active role in their treatment process (Ward et al., 2004).

Affective factors such as generalized distress, shame, and guilt also impacted treatment readiness and must be considered (Ward et al., 2004). For example, there is a fair amount of stress that one experiences after they are adjudicated and enter the criminal justice system with additional stressors for those who also are mentally ill or addicted to substances. Ward et al. (2004) examined the affective component of a person's emotional reaction to not only their offense but the title of "offender." They concluded that for some this label was not an emotional trigger, while others experienced anger, remorse, guilt, and shame making it difficult for them to participate in treatment.

In the multifactor offender readiness model, three types of behavioral factors influence treatment readiness among offenders - acknowledging the criminal behavior, seeking help for the criminal behavior, and participating in behavior modification. Ward et al. (2004) caution that offenders may be motivated to change some parts of their behavior but may be unclear on how to make these necessary changes. Therefore, many offenders need assistance with volition or the "intention to pursue a certain goal and the development and subsequent implementation of a plan to achieve the desired goal" (Ward et al., 2004, p.657). This can be addressed through assessment by identifying the conduct that is considered undesirable, helping the offender to recognize the issue, and assisting them with seeking help (DiClemente, Schlundt, & Gemmell, 2004).

It also is imperative that offenders can communicate effectively and have strong social skills to participate fully in their treatment. Ward et al. (2004) suggest that programs incorporate one-on-one along with group activities and discussions that allow offenders to express their thoughts and feelings to address these behavioral factors. This

contributes to a positive personal identity, which is essential for treatment readiness as the participant needs to have a strong sense of self-worth and see themselves as worthy of change (Ward, Day, Howells, & Birgden, 2004).

External Readiness Conditions

Next, Ward et al. (2004) identified external readiness conditions that comprise part of the multifactor offender readiness model: circumstance, location, opportunities, resources, support, and programs. The events under which an offender agrees to participate in a treatment program can directly impact treatment readiness. For instance, whether the offender was mandated to participate, or participation was voluntary (Ward et al., 2004).

External readiness conditions such as location and opportunity also are pertinent to an offender's treatment readiness (Ward et al., 2004). A program's location can determine how close one is to family support systems or if one can practice the skills they are learning. If an offender is serving time in a halfway house, for instance, they will have the opportunity to practice the skills they learn in a less restrictive environment. However, a prison environment naturally has an atmosphere of restriction, low mobility, and suspicion that does not create an atmosphere where a person would feel comfortable sharing their feelings and expressing emotion (Ward et al., 2004).

Time also can be an opportunity or a barrier when examining treatment readiness. As noted by Ward et al. (2004), offenders may feel they have plenty of time and multiple opportunities to engage in treatment. However, treatment readiness and motivation can be impacted if offenders wait until the end of their sentence to participate in treatment. If an

offender chooses to delay program participation until the end of their sentence, for example, they may ultimately decide not to participate because there is not enough time left to complete the program. Others may choose not to participate in prison programming because they plan to seek community treatment upon release. However, there are few community treatment programs available and not participating in treatment programs within the prison becomes a lost opportunity.

Another external issue the multifactor offender readiness model identifies is whether there are enough resources available at the facilities where they are housed as well as support factors, such as family that often provide the motivation for treatment completion. As Ward et al. (2004) noted it is important for facilities to provide quality treatment programming for inmates and have trained professionals to oversee these programs along with the offenders' progress. In addition, they found that whether an inmate decided to stay and successfully complete a treatment program was largely influenced by the support the individual felt they had from family and friends along with facility and professional staff (Ward, Day, Howells, & Birgden, 2004).

The last external factor discussed is timing and whether this is the right program for the offender. Bush et al. (2016) found that offenders who desire change sought help when they felt there were no other solutions. This finding is consistent with the research conducted by Ward et al. (2004). However, Ward et al. (2004) further suggests there is a "collateral" effect from informal supports (i.e., family, friends) and formal supports (psychologists, psychiatrists) who come together and drive the selection of programming and timing.

Research Conducted on Multifactor Offender Readiness Model

In assessing the suitability for offender rehabilitation, Casey, Day, Howells, and Ward (2007) reported on the development and effectiveness of a self-report measurement tool to assess offender treatment readiness in a cognitive skills program. Using the Corrections Victoria Treatment Readiness Questionnaire (CVTRQ), they were able to predict the likeliness of an offender's engagement in the program (Casey, Day, Howells, and Ward, 2007). Applying this type of assessment to educational programming would allow the researcher to determine if an offender is ready to cognitively engage themselves in educational programming and predict their success in obtaining the needed skills for reintegration back into their communities. Utilizing research containing these cognitive assessments will also allow correctional staff and program facilitators to have a better understanding of the mental state of those offenders who wish to participate in educational programming and the opportunity to create individual treatment plans that address the needs of each participant.

Bosma et al. (2014) examined risk factors and treatment readiness to better understand what influenced offender participation and completion for male offenders in a prison-based rehabilitation program in the Netherlands. They found that treatment readiness explained program completion as those who were ready for treatment were the most likely to participate in and complete the programming (Bosma, Kunst, Reef, Dirkzwager, & Nieubeerta, 2014).

In a study assessing why offenders fail to attend or complete treatment programs, Sturgess et al. (2016) determined that offenders who lacked self-efficacy, had negative

perceptions regarding treatment, an inability to stabilize emotions, and felt a lack of personal control could not attend or complete treatment programming (Sturgess, Woodhams, & Tonkin, 2016). The authors also noted that offenders felt there was a lack of opportunity to participate in professionally designed and monitored programming along with a lack of support from staff encouraging engagement in programs (Sturgess, Woodhams, & Tonkin, 2016).

Summary

This chapter began with a brief overview of correctional education to provide an understanding of the importance of correctional education. Next, a review of the literature on treatment motivation and treatment readiness were examined to provide an in-depth understanding of how these terms have been used in prior research studies in correctional settings. Bandura's theory of self-efficacy also was outlined and proposed as a complementary theory for understanding treatment motivation and readiness.

Chapter 3 provides an overview of how this study was conducted utilizing a mixed-methods approach. The first phase of this research study was quantitative and included a survey distributed to inmates who were participating in correctional education programs or on the wait list. The second phase of the research was qualitative and involved focus group interviews conducted with correctional and educational staff who worked with those involved in the correctional education programs. This chapter also examined how the study population was sampled and plans for data analysis.

Chapter 3: Research Method

The purpose of this study was to utilize a mixed-methods research approach to explore the motivation and treatment readiness factors contributing to an inmate's decision to participate in or not participate in educational programming while incarcerated. This research study focused on educational programs in a medium-security private prison for men in the state of Oklahoma. This chapter explains the mixed methods research design used in this study, including participant recruitment, data collection, and data analysis.

Setting

This research study was conducted at a medium-security private prison in Oklahoma established in the late 1990s. The facility is managed and operated by CoreCivic, which is the largest private corrections company in the United States. The prison serves as an all-male facility with the ability to house 1,650 inmates at full capacity. This study focused on participants enrolled in or waitlisted for the two most popular educational programs currently provided by the facility for those interested in continuing their education with a GED and MOS certification. Annually, there are approximately 70 individuals who participate in and complete the GED program. Those who have acquired a GED or a high school diploma also are eligible to complete a program to become certified as an MOS. The prison is a Certiport Authorized Testing Center (CATC), which allows those who complete the program to become a certified MOS specializing in Microsoft applications such as Word, Excel, PowerPoint, Access, and Outlook. Currently, each MOS cohort consists of 45 students with approximately 100

additional students on the waiting list. After the first year of implementation, the MOS program had produced 13 digital literacy certifications, 17 MOS certifications, and two master designations working toward associate certifications (Bird, 2019).

The inmates participating in the GED and MOS educational programs along with those on the waiting list were surveyed to better understand their motivation for participating in educational programming and their treatment readiness. Qualitative data were collected through focus group interviews with correctional and educational staff who interacted with the inmates participating in the facility's educational programs.

Research Design and Rationale

This study sought to understand what motivated inmates to participate in educational programs and how treatment readiness impacted this decision. Previous research on the impact of correctional education programs has shown that those who complete the program are less likely to recidivate when returning to their communities (Andrews & Bonta, 2003; Cho & Tyler, 2010; Davis et al., 2013; Fabelo, 2002; Gordon & Weldon, 2003; Robinson, 2001; Ubah 2004; Vacca, 2004). Therefore, it is essential to understand the impact of treatment readiness and motivation on correctional education to improve recruitment and completion rates. The following research questions were examined: What factors motivated program participants to participate in educational programs while incarcerated? Were those who were eligible to participate in educational programs exhibiting treatment readiness? Did those who exhibited higher levels of treatment readiness and motivation more likely to participate in and complete the program?

This mixed-methods research design that utilized both quantitative and qualitative data was chosen because the addition of qualitative data provides a deeper and more meaningful understanding of what the quantitative data represents (Molina-Azorin, 2016). The first phase of this research study was quantitative and consisted of a survey distributed to 115 inmates who were enrolled in GED courses or the MOS certification program. The survey also was distributed to the inmates who were on the wait lists for the GED courses and MOS certification program. The survey included demographic variables such as race, ethnicity, age, and educational attainment before prison along with educational programs enrolled in, on the waitlist, or completed. The CVTRQ also was included. The CVTRQ utilizes 20 items that measure treatment readiness within correctional treatment programs based on the MORM (Ward et al., 2004). The survey results were used to understand Research Question 2: “Are those who were eligible to participate in educational programming exhibiting treatment readiness?” Quantitative data collection and analysis occurred first as the results from the data analysis allowed for me to ask more informed follow-up questions during the focus group interviews.

The second phase of the research study was qualitative and consisted of focus group interviews conducted with educational and correctional staff. The goal of these focus groups was to better understand the staff’s experiences with motivation and treatment readiness when working with those participating in the GED and MOS classes. The first five focus group questions were used to better understand research question one and what factors motivate program participants to participate in educational programs while incarcerated. The next five focus group questions focused on answering Research

Question 3 and whether those who exhibited higher treatment readiness and motivation were more likely to participate in and complete the program while incarcerated.

Role of the Researcher

The researcher's role was limited during the quantitative phase of the research study. A short presentation on the research study was given to those who were on the waitlist or participating in the GED or MOS program. This presentation covered the informed consent form, what participation in the study would include, and how to withdraw from the study. At the end of the presentation, all those in attendance were given a copy of the consent form, the survey, and an envelope. Potential participants were instructed to take some time after the recruitment session and reflect on whether they would like to participate. I emphasized that their decision to participate or not participate did not impact them in any way. Potential participants were informed that if they chose to participate, they needed to complete the survey within the next two weeks. Those who chose to participate were asked to keep the consent form, so they had Walden University's contact information should they decide they no longer wanted to participate. I also asked those who completed the survey to return it in the sealed envelope by placing it in the locked drop box in the prison's business office. After 2 weeks, I was contacted by the facility business personnel that the surveys were ready for retrieval. Upon arrival at the facility, the envelopes were removed from the lock box by the prison administration and handed to me.

Next, focus group interviews were scheduled with key correctional and educational staff to gain insight into their perceptions of offender motivation and

treatment readiness based on their experiences working with this population. Before starting the focus group interviews, I reviewed the informed consent form with the participants to discuss why the research was being conducted and how their responses would be used. In addition, I let them know their participation was voluntary, and they could withdraw from the study at any time. I did not have any personal or family relationships with the correctional or administrative staff or any individuals incarcerated at the facility. I also do not work or volunteer at the correctional facility.

Methodology

Participant Selection Logic

Survey participants were selected using purposive sampling (IRB Approval Number 03-03-23-0598610), which allows for non-probability-based selection from a specific population due to the study's objective and the participants characteristics (Burkholder, Cox, Crawford, & Hitchcock, 2019). Participants in the first quantitative phase of the study were selected using the criteria of men who were currently incarcerated at a private medium-security prison in Oklahoma who also were enrolled in or on the wait list for the GED or MOS program offered within the facility. Using purposive sampling, GED and MOS Program Directors identified inmates within the institution who met these criteria and were eligible for the research study. Those who were identified as potential participants were brought into a room, where the GED director, MOS director, and the researcher explained they had been selected to participate in a research study. The researcher and program directors presented and reviewed the consent form, the research study's purpose, confidentiality, the voluntary nature of the

study, and their right to withdraw from the study at any time as a participant. Those who volunteered to participate in the study were given two weeks to complete the survey, which covered demographic variables such as race, ethnicity, age, educational attainment before prison, and what program(s) they were enrolled in, along with the 20 questions from the CVTRO questionnaire.

In the second qualitative phase of the research study, snowball sampling was used to locate correctional and educational staff who worked with the GED and MOS programs and were interested in completing a focus group interview. Snowball sampling is a technique that is used when it is difficult to recruit participants because the researcher does not have access to the population (Burkholder, Cox, Crawford, & Hitchcock, 2019). Prison administrators identified staff who worked directly with those involved in these programs and sent a recruitment email to them on behalf of the researcher. This recruitment email explained the study's nature, how and why focus groups would be used, confidentiality, the voluntary nature of the study, and that participants have the right to withdraw from it at any time.

After this email was sent, a prison administrator provided the names and contact information of those identified as potential focus group participants to the researcher. The researcher contacted everyone identified as a potential participant via email to see if they would like to participate in a focus group interview. The email invitation explained the purpose of the research study, how the focus groups would proceed, confidentiality, participation is voluntary, and one can withdraw from the study at any time. The researcher asked if the participants had any questions or needed additional information.

Those who chose to participate were contacted to schedule the focus group interview.

Focus groups continued until saturation was reached and no new themes emerged (Ward, Day, Howells, & Birgden, 2004; Casey, Day, Howells, and Ward, 2007; Schutt, 2018).

Instrumentation

This research utilized a mixed methods approach to answer the research questions proposed. The first phase was quantitative and consisted of a survey that included demographic variables as a way of understanding the participants' differences such as race, ethnicity, age, educational attainment before prison, and what program(s) the participant was enrolled in, completed, or on the wait list as well as the Corrections Victoria Treatment Readiness Questionnaire (CVTRQ). Collecting these demographic variables allowed for a more thorough understanding of the participants' similarities and differences in the motivation factors and treatment outcomes. The survey was distributed to those currently enrolled in or on the wait list for the general education degree program (GED) or the Microsoft Office Specialist (MOS) programs while incarcerated at a private prison. The CVTRQ was developed by Dr. Sharon Casey, Dr. Andrew Day, Dr. Kevin Howells, and Dr. Tony Ward and was first published in 2007 when they assessed suitability for offender rehabilitation. It has been utilized to improve correctional programming for offenders while incarcerated by examining treatment readiness and their motivation to participate in programming (Day, Casey, Ward, Howells, & Vess, 2010). Also, the survey has been utilized in assessing treatment readiness in violent offenders, as well as looking at treatment engagement and behavior change through therapeutic communities in prison (Ward et al., 2004; Day, Casey, Ward, Howells, & Vess, 2010;

Sturges, Woodhams, & Tonkin, 2016).

The questionnaire has a total of 20 items that ask the participant to examine to what extent they agree or disagree with the proposed statement by indicating their responses on a five-point Likert scale (1 strongly disagree, 2 disagree, 3 unsure, 4 agree, or 5 strongly agree) with scores ranging from a minimum of 20 to a maximum of 100. It is important to note that this assessment asks the offender to make their choices based on their current feelings rather than reflecting on past feelings or future expectations. Reverse scoring was utilized on the questionnaire so that the higher one scores on the questionnaire, the higher their level of treatment readiness (Casey, Day, Howells, & Ward, 2007).

In the second phase of this research study, focus group interviews were conducted with educational and correctional staff who worked directly with those enrolled in the educational programs. The focus groups consisted of eight educational and correction staff participants total and group composition was based on their schedule and availability. Focus group questions allowed the researcher to examine treatment readiness and motivation from the staffs' perspective who worked directly with this group. These questions were based on the literature on treatment readiness and motivation and the data analysis of the surveys collected in phase one of the research study. Due to Covid regulations and participant availability, focus group interviews were conducted over zoom and recorded for later transcription and analysis. After each focus group session concluded, the researcher journaled to reflect on what had been observed while conducting the interviews (Schutt, 2018; Saldana, 2016).

Procedures for Recruitment, Participation, and Data Collection

The participants for the first phase of this study were selected from the population of male offenders who were incarcerated at a private medium-security prison in Oklahoma. Participants were enrolled in or on the wait list for a correctional education program within the facility. Educational Program Directors identified this population and asked them to attend a research presentation where they could decide whether to participate. During this presentation, GED and MOS Program Directors assisted the researcher by helping the prospective participants go over the informed consent form with those in attendance to explain the study's nature, what will happen to the data collected, and their rights as a research participant. Those who decided to participate in the study were given two weeks to complete the survey, which covered demographic variables along with the CVTRQ questionnaire.

Focus groups consisted of both educational and correctional staff, and the focus group's make-up was based on the participants' schedules and availability. Each focus group consisted of three to five participants and lasted approximately sixty minutes. Focus group interviews were recorded using zoom for later transcription and analysis.

Once the researcher completed the study, a letter was sent to all participants from both phases one and two to thank them for their participation and let them know the research has ended. In addition, participants were informed of how to receive a copy of the research results that includes a summary of the key findings upon successful completion of the oral defense.

Data Analysis Plan

The data collected from the surveys from the first quantitative phase have been used to address research question 2, “Are those who were eligible to participate in educational programming exhibiting treatment readiness?”

To better understand whether those who were eligible to participate in the educational programs exhibited treatment readiness, data collected from the surveys included demographic variables such as race (0=White, 1=African American/Black, 2 = Asian/Pacific Islander, 3=Native American/Indigenous, 4= multiple races, 5=other), ethnicity (0=Non-Hispanic/Latino, 1=Hispanic/Latino), age (enter age in years on day take survey), educational attainment prior to prison (0=8th grade education or less, 1 = some high school, 2 = high school graduate/GED, 3 = some college/technical training, 4 = college/trade school graduate), and what program(s) they are enrolled in (please list the programs you are currently enrolled in or select none), completed (please list the programs you have completed in this prison or select none), or on the wait list (please list the programs you are on the wait list for in this prison or select none) as well as the results from the CVTRQ have been coded and entered into a software management system called the Statistical Package for Social Sciences (SPSS).

First, percentages were examined to better understand how many research participants fell into each demographic category for those enrolled in the GED and MOS educational programs along with those on the waiting list. Next, cross-tabulations and bivariate correlations were examined to see if there were any differences between those on the waiting list and those enrolled in the program based on race, ethnicity, age,

educational attainment before prison, and programs one is enrolled in, on the waiting list, or completed. A t-test was used to test for significance (Burkholder, Cox, Crawford & Hitchcock, 2019).

The data collected from the focus group interviews was used to answer question one – what factors motivated program participants to participate in educational programs while incarcerated and question three – did those who exhibited higher treatment readiness and motivation more likely to participate in and complete the program. The focus group questions were based on prior research on treatment readiness and motivation and the survey results from the first phase of the research study.

The qualitative data obtained from focus group interviews with correctional and educational staff was transcribed from the zoom recordings. The focus group transcripts along with the researcher's journal were entered into NVIVO, which is a qualitative software package that allows the researcher to code for and analyze themes that emerge from the focus group interviews (Schutt, 2018; Saldana, 2016; Burkholder, Cox, Crawford & Hitchcock, 2019).

Threats to Validity

As with any research study, consideration must be given to threats of internal and external validity. Internal validity refers to whether some other factors or explanations can be given for the research outcomes (Drost, 2011). In private prisons there is a high turnover rate for staff, which could impact the focus group interviews. Fortunately, all participants were still employed by the facility suggesting there was no need for the researcher to reach back out to the prison administration to get additional names for focus

group interviews.

External validity suggests that research study outcomes should consider the extent that one study can be generalized to other similar populations (Drost, 2011). This study focused on the incarcerated population, specifically incarcerated males in a medium-security prison. Therefore, the outcomes of this study can be generalized to other male inmates housed in similar environmental conditions and surroundings. However, caution should be used when attempting to generalize the findings from this research to female inmates or male inmates in minimum- or maximum-security prisons.

Issues of Trustworthiness

In consideration of internal validity, the researcher must address the credibility of the findings to ensure they are valid, truthful, and believable. During the qualitative phase, the technique of saturation was used so that focus group interview continued until no other themes emerged and the data was exhausted (Drost, 2011). The use of technology such as zoom and software such as NVIVO also assisted with ensuring the focus group interviews were carefully transcribed and coded. Journaling also allowed the researcher to reflect on personal observations that surfaced during the interview process

To ensure that issues of internal validity were assessed completely, the implementation of triangulation was used. As suggested by Denzin (1978), the utilization of triangulation allows for the researcher to make sure that any bias that can come from a single observer, method, or theory can be alleviated through multiple approaches (Denzin, 1978). Denzin (1978) proposed that multiple forms of triangulation can be used in a study, where personal analysis can be used to bring about a better understanding of

the findings and create a more meaningful narrative of what the data outcomes present (Denzin, 1978).

Also, external validity allowed for a careful examination of the generalizability. The researcher utilized very descriptive language regarding the focus group participants and the environmental factors. This creates a more effective study that can be considered dependable, retestable, and offers confirmability in its findings (Drost, 2011).

Ethical Procedures

There can be varied ethical issues that arise through the recruitment process of selecting participants for a research study. Since this study was focused on a protected population (incarcerated) it was important for potential participants to understand what the research was, why their participation was valuable, and that their participation was completely voluntary. The researcher engaged in a conversation with both the facility representatives and participants to answer any questions they had and to ensure they understood the answers they received.

If one or more participants from the special population or the facility staff focus group decided they no longer wanted to continue, they could withdraw from the study. All documentation provided to the participants included the study's description, the participants' role, and the withdrawal process. Forms to withdraw from the study were kept at the site with the program's supervisor. If there was a need for a participant to withdrawal, they could fill out the form and submit it to the program director, who would then forward it to the supervisor.

As suggested by Molina-Azotin (2016); in order to maintain confidentiality in a

mixed-method research study, each participant was assigned a number. This allows research participants to remain anonymous to protect their identity (Molina-Azorin, 2016). All data collected, including focus group recordings obtained by the researcher, have been maintained by the researcher, stored on a password secured computer, and backed up on an external hard drive that is stored in a locked cabinet.

Summary

Chapter three examined this research study's proposed mixed-methods research design, data collection, and data analysis. The research was conducted in two phases. The first quantitative phase consisted of surveys distributed to inmates participating in or on the wait list for the GED or MOS programs. These surveys gave the researcher a better understanding of this population's demographics and treatment readiness. The second qualitative phase consisted of focus group interviews conducted with correctional and educational staff who worked directly with those in the GED and MOS programs. In the next chapter, this study's results, including details of the collection process, formal analysis and statistical findings are examined.

Chapter 4: Results

The purpose of this mixed method research study was to explore the motivation and treatment readiness factors that contributed to an inmate's decision whether to participate in educational programming while incarcerated. The first phase of this research utilized surveys distributed to inmates who participated in or were waitlisted in GED or MOS programming to quantitatively understand the demographics of the population as well as their treatment readiness. In the second phase of the research study, I utilized focus groups consisting of correctional and educational staff that worked with the inmates in the GED and MOS programming to provide an understanding of the environment and the dynamics of the setting.

Data Collection

In Phase 1, 115 surveys were distributed to the inmates who were currently enrolled in or waitlisted for the GED or MOS certification course. Each of the participants was given the consent form and survey. The consent form was read out loud to those who had been selected to participate, so they had an understanding as to why the study was being conducted and how the data would be used. All participants were given a copy of the consent form and survey. The survey consisted of five demographic variables including age, race, ethnicity, marital status, and educational attainment prior to incarceration. The survey also contained 20 questions that were used in previous research (CVTRQ) that measured the respondent's treatment readiness for program participation based on the MORM (Ward et al., 2004). 48 surveys were collected from the facility for analysis using SPSS. The survey results were used to address Research Question 2 "Are

those who were eligible to participate in educational programming exhibiting treatment readiness?”.

In Phase 2, focus groups were scheduled with correctional and educational staff who worked directly with the inmates surveyed in the GED and MOS programs. Invitations to participate in the focus groups were sent to 15 correctional and educational staff. Focus group questions centered on their perceptions of what corrections meant to them, the importance of educational programming for inmates, and barriers to participation in educational treatment. A total of eight correctional and educational staff agreed to participate in the focus groups. Those who agreed to participate could not meet at one time due to work obligations. Therefore, two focus groups sessions were held via Zoom, each group containing four members plus me asking questions. Outcomes from the focus groups addressed Research Question 1, “What factors motivated participants to participate in educational programs when incarcerated?” and Research Question 3, “Did those who exhibited higher levels of treatment readiness and motivation more likely to participate in and complete the program?”

Demographics

This research study utilized a mixed-method research approach exploring motivation and treatment readiness factors and their impact on an inmate’s decision to participate in educational programming while incarcerated. In the first phase of the research study, participants who were housed in a male medium-security private prison in the state of Oklahoma and enrolled or waitlisted for the GED or MOS program were asked to participate in a survey. A total of 48 participants completed the survey. The

majority of survey participants were between the ages of 36-45 ($n = 22$; see Table 1). The majority of survey participants reported their race as White ($n = 23$), followed by Black or African American ($n = 15$). Most survey respondents reported their ethnicity as non-Hispanic and non-Latino ($n = 40$). Slightly more than half of all survey respondents reported they had completed high school ($n = 27$). The majority of those who completed the survey were not married ($n = 34$).

Table 1*Demographics of Participants*

Valid	Frequency	%	Valid %	Cumulative %
Age				
26-35 years old	17	35.4	35.4	35.4
36-45 years old	22	45.8	45.8	81.3
46-55 years old	7	14.6	14.6	95.8
56-65 years old	2	4.2	4.2	100.0
Total	48	100.0	100.0	
Race				
White	23	47.9	47.9	47.9
Black/African American	15	31.3	31.3	79.2
American Indian/Alaskan Native	6	12.5	12.5	91.7
Other	4	8.3	8.3	100.0
Total	48	100.0	100.0	
Ethnicity				
Hispanic/Latino	8	16.7	16.7	16.7
Non-Hispanic/Latino	40	83.3	83.3	100.0
Total	48	100.0	100.0	
Highest level of education				
Some High School	13	27.1	27.1	27.1
High School	27	56.3	56.3	83.3
Bachelor's Degree	2	4.2	4.2	87.5
Trade School	6	12.5	12.5	100.0
Total	48	100.0	100.0	
Relationship status (Married/Not married)				
Yes	14	29.2	29.2	29.2
No	34	70.8	70.8	100.0
Total	48	100.0	100.0	

Results**Quantitative**

In order to determine the impact of the demographic variables on one's treatment readiness and motivation, each demographic variable was crossed with each question from the CVTRQ using bivariate analysis and examining the Chi-Square for significance. Also known as a test of association, the Chi-Square is a nonparametric test that determines if there is an association between categorical variables (Burkholder et al., 2019). The results of these outcomes were examined starting with age and then moving

on to ethnicity, marital status, and educational attainment prior to incarceration. Note there were no significant findings when analyzing race and the CVTRQ questions. Corresponding tables associated with data outcomes are presented at the end of each narrative.

Age

For this research, 48 respondents were categorized into four age groups: 26-35, 36-45, 46-55, and 56-65 years of age (see Table 2). The age groups of the participants and the question, “Treatment programs are rubbish” was found to be significant during bivariate analysis ($p = .013$). Respondents between 36 and 45 years of age were more likely to report that they strongly disagree or disagree with this statement. For example, 72.8% of those between 46 and 55 years of age and 71.4% of those between 46 and 55 years of age stated they strongly disagree or disagree with this statement. Therefore, age does impact their response to this statement: “treatment programs are rubbish.”

Table 2*Crosstab: Age * Treatment programs are rubbish*

Age of participant	Percent within "Question"	Strongly Disagree	Disagree	Unsure	Agree	Strongly Agree	Total
26-35 years old	"Age of participant"	35.3	0.0	41.2	11.8	11.8	100.0
	"Treatment programs are rubbish"	40.0	0.0	58.3	50.0	50.0	35.4
	Total	12.5	0.0	14.6	4.2	4.2	35.4
36-45 years old	"Age of participant"	36.4	36.4	22.7	4.5	0.0	100.0
	"Treatment programs are rubbish"	53.3	61.6	41.7	25.0	0.0	45.8
	Total	16.7	16.7	10.4	2.1	0.0	45.8
46-55 years old	"Age of participant"	0.0	71.4	0.0	14.3	14.3	100.0
	"Treatment programs are rubbish"	0.0	38.5	0.0	25.0	25.0	14.6
	Total	0.0	10.4	0.0	2.1	2.1	14.6
56-65 years old	"Age of participant"	50.0	0.0	0.0	0.0	50.0	100.0
	"Treatment programs are rubbish"	6.7	0.0	0.0	0.0	25.0	4.2
	Total	2.1	0.0	0.0	0.0	2.1	4.2
Total	"Age of participant"	31.3	27.1	25.0	8.3	8.3	100.0
	"Treatment programs are rubbish"	100.0	100.0	100.0	100.0	100.0	100.0
	Total	31.3	27.1	25.0	8.3	8.3	100.0

The age group of the participant and the question, "I am not able to do treatment programs" also was found to be significant during bivariate analysis ($p = .004$). The majority of those between 36 and 45 years of age (77.3%) and 26-35 years of age (53%) either strongly disagreed or disagreed with the statement "I am not able to do treatment". This suggests that those who were younger were more likely to believe they could do treatment programs (see Table 3).

Table 3*Crosstab: Age * I am not able to do treatment*

Age of participant	Percent within "Question"	Strongly Disagree	Disagree	Unsure	Agree	Strongly Agree	Total
26-35 years old	"Age of participant"	41.2	11.8	41.2	5.9	0.0	100.0
	"I am not able to do treatment"	43.8	16.7	50.0	50.0	0.0	35.4
	Total	14.6	4.2	14.6	2.1	0.0	35.4
36-45 years old	"Age of participant"	40.9	36.4	22.7	0.0	0.0	100.0
	"I am not able to do treatment"	56.3	66.7	35.7	0.0	0.0	45.8
	Total	18.8	16.7	10.4	0.0	0.0	45.8
46-55 years old	"Age of participant"	0.0	28.6	14.3	14.3	42.9	100.0
	"I am not able to do treatment"	0.0	16.7	7.1	50.0	75.0	14.6
	Total	0.0	4.2	2.1	2.1	6.3	14.6
56-65 years old	"Age of participant"	0.0	0.0	50.0	0.0	50.0	100.0
	"I am not able to do treatment"	0.0	0.0	7.1	0.0	25.0	4.2
	Total	0.0	0.0	2.1	0.0	2.1	4.2
Total	"Age of participant"	33.3	25.0	29.2	4.2	8.3	100.0
	"I am not able to do treatment"	100.0	100.0	100.0	100.0	100.0	100.0
	Total	33.3	25.0	29.2	4.2	8.3	100.0

The age group of the participant and the statement "Treatment programs don't work" was found to be significant ($p=.007$). All the respondents in the 56-65 age group strongly agreed that "treatment programs don't work", while 76.5% of the respondents in the 26-35 age group and 72.8% in the 36-45 age group reported that they strongly disagree or disagree with the statement. For those respondents in the age group of 46-55, disagreed or strongly disagreed at 85.7%, while 14.3 remained unsure. Thus, suggesting that a participant's age impacts whether they believe treatment programs work or do not work (see Table 4).

Table 4*Crosstab: Age * Treatment programs don't work*

Age of participant	Percent within "Question"	Strongly Disagree	Disagree	Unsure	Agree	Strongly Agree	Total
26-35 years old	"Age of participant"	41.2	35.3	17.6	5.9	0.0	100.0
	"Treatment programs don't work"	46.7	30.0	37.5	100.0	0.0	35.4
	Total	14.6	12.5	6.3	2.1	0.0	35.4
36-45 years old	"Age of participant"	27.3	45.5	18.2	0.0	9.1	100.0
	"Treatment programs don't work"	40.0	50.0	50.0	0.0	50.0	45.8
	Total	12.5	20.8	8.3	0.0	4.2	45.8
46-55 years old	"Age of participant"	28.6	57.1	14.3	0.0	0.0	100.0
	"Treatment programs don't work"	13.3	20.0	12.5	0.0	0.0	14.6
	Total	4.2	8.3	2.1	0.0	0.0	14.6
56-65 years old	"Age of participant"	0.0	0.0	0.0	0.0	100.0	100.0
	"Treatment programs don't work"	0.0	0.0	0.0	0.0	50.0	4.2
	Total	0.0	0.0	0.0	0.0	4.2	4.2
Total	"Age of participant"	31.3	41.7	16.7	2.1	8.3	100.0
	"Treatment programs don't work"	100.0	100.0	100.0	100.0	100.0	100.0
	Total	31.3	41.7	16.7	2.1	8.3	100.0

The age group of the participants and the statement "Others are to blame for my offending" was found to be significant ($p=.012$). The majority of those between 26-35 (81.7%), 36-45 (90.9%), and 46-55 (71.5%) years of age either strongly disagreed or disagreed with the statement "others are to blame for my offending". However, 100% of those between 56-65 years of age strongly agreed that "others were to blame for their offending". This seems to suggest that those who are younger are less likely to believe that "Others are to blame for their offending" (see Table 5).

Table 5

*Crosstab: Age * Others are to blame for my offending*

Age of participant	Percent within "Question"	Strongly Disagree	Disagree	Unsure	Agree	Strongly Agree	Total
26-35 years old	"Age of participant"	52.9	29.4	11.8	0.0	5.9	100.0
	"Others are to blame for my offending"	37.5	33.3	100.0	0.0	16.7	35.4
	Total	18.8	10.4	4.2	0.0	2.1	35.4
36-45 years old	"Age of participant"	59.1	31.8	0.0	0.0	9.1	100.0
	"Others are to blame for my offending"	54.2	46.7	0.0	0.0	33.3	45.8
	Total	27.1	14.6	0.0	0.0	4.2	45.8
46-55 years old	"Age of participant"	28.6	42.9	0.0	14.3	14.3	100.0
	"Others are to blame for my offending"	8.3	20.0	0.0	100.0	16.7	14.6
	Total	4.2	6.3	0.0	2.1	2.1	14.6
56-65 years old	"Age of participant"	0.0	0.0	0.0	0.0	100.0	100.0
	"Others are to blame for my offending"	0.0	0.0	0.0	0.0	33.3	4.2
	Total	0.0	0.0	0.0	0.0	4.2	4.2
Total	"Age of participant"	50.0	31.3	4.2	2.1	12.5	100.0
	"Others are to blame for my offending"	100.0	100.0	100.0	100.0	100.0	100.0
	Total	50.0	31.3	4.2	2.1	12.5	100.0

The age group of the participant and the statement "When I think about my sentence, I feel angry with other people" was found to be significant ($p=.007$). The majority of those between 26-35 (76.5%), 36-45 (81.8%), and 46-55 (71.4%) years of age either strongly disagreed or disagreed with the statement "when I think about my sentence, I feel angry with other people". However, 100% of those between 56-65 years of age strongly agreed that "when I think about my sentence, I feel angry with other people". This seems to suggest that those who were younger are less likely to feel angry with others when thinking about their sentence (see Table 6).

Table 6*Crosstab: Age * Thinking about my sentence, I feel angry*

Age of participant	Percent within "Question"	Strongly Disagree	Disagree	Unsure	Agree	Strongly Agree	Total
26-35 years old	"Age of participant"	35.3	41.2	23.5	0.0	0.0	100.0
	"When I think about my sentence, I feel angry with other people"	37.5	35.0	80.0	0.0	0.0	35.4
	Total	12.5	14.6	8.3	0.0	0.0	35.4
36-45 years old	"Age of participant"	40.9	40.9	4.5	4.5	9.1	100.0
	"When I think about my sentence, I feel angry with other people"	56.3	45.0	20.0	50.0	40.0	45.8
	Total	18.8	18.8	2.1	2.1	4.2	45.8
46-55 years old	"Age of participant"	14.3	57.1	0.0	14.3	14.3	100.0
	"When I think about my sentence, I feel angry with other people"	6.3	20.0	0.0	50.0	20.0	14.6
	Total	2.1	8.3	0.0	2.1	2.1	14.6
56-65 years old	"Age of participant"	0.0	0.0	0.0	0.0	100.0	100.0
	"When I think about my sentence, I feel angry with other people"	0.0	0.0	0.0	0.0	40	4.2
	Total	0.0	0.0	0.0	0.0	4.2	4.2
Total	"Age of participant"	33.3	41.7	10.4	4.2	10.4	100.0
	"When I think about my sentence, I feel angry with other people"	100.0	100.0	100.0	100.0	100.0	100.0
	Total	33.3	41.7	10.4	4.2	10.4	100.0

Finally, the age group of the participants and the statement "treatment programs are for wimps" was found to be significant ($p=.003$). The majority of those between 26-35 (65.7%), 36-45 (59.1%), and 46-55 (57.1%) years of age strongly disagreed with the statement "treatment programs are for wimps". However, those 56-65 years of age were split, with 50% stating they strongly disagreed and the other 50% reporting they strongly agree. This seems to suggest that those who were younger were less likely to believe that treatment programs are for wimps (see Table 7).

Table 7*Crosstab: Age * Treatment programs are for wimps*

Age of participant	Percent within "Question"	Strongly Disagree	Disagree	Unsure	Agree	Strongly Agree	Total
26-35 years old	"Age of participant"	64.7	29.4	5.9	0.0	0.0	100.0
	"Treatment programs are for wimps"	37.9	33.3	33.3	0.0	0.0	35.4
	Total	22.9	10.4	2.1	0.0	0.0	35.4
36-45 years old	"Age of participant"	59.1	31.8	9.1	0.0	0.0	100.0
	"Treatment programs are for wimps"	44.8	46.7	66.7	0.0	0.0	45.8
	Total	27.1	14.6	4.2	0.0	0.0	45.8
46-55 years old	"Age of participant"	57.1	42.9	0.0	0.0	0.0	100.0
	"Treatment programs are for wimps"	13.8	20.0	0.0	0.0	0.0	14.6
	Total	8.3	6.3	0.0	0.0	0.0	14.6
56-65 years old	"Age of participant"	50.0	0.0	0.0	0.0	50.0	100.0
	"Treatment programs are for wimps"	3.4	0.0	0.0	0.0	100	4.2
	Total	2.1	0.0	0.0	0.0	2.1	4.2
Total	"Age of participant"	60.4	31.3	6.3	0.0	2.1	100.0
	"Treatment programs are for wimps"	100.0	100.0	100.0	0.0	100.0	100.0
	Total	60.4	31.3	6.3	0.0	2.1	100.0

Ethnicity

For this study, the responding population (N=48) was asked to identify their ethnicity as either Hispanic/Latino (n=8) or Non-Hispanic/Latino (n=40). The ethnicity of the participant and the statement "I am to blame for my offending" was found to be significant ($p=.017$). Those who reported their ethnicity as Hispanic/Latino were equally divided, with 50% of respondents reporting they strongly disagreed and 50% reporting they agreed. However, the majority of those who reported their ethnicity as Non-Hispanic/Latino (77.5%) agreed or strongly agreed with the statement "I am to blame for my offending". These findings seem to suggest that one's ethnicity does impact whether they believe they were to blame for their offending (see Table 8).

Table 8

*Crosstab: Ethnicity * I am to blame for my offending*

Ethnicity	Percent within "Question"	Strongly Disagree	Disagree	Unsure	Agree	Strongly Agree	Total	
Hispanic/Latino	Count	4	0	0	4	0	8	
	"Ethnicity of participant"		50.0	0.0	0.0	50.0	0.0	100.0
	"I am to blame for my offending"		57.1	0.0	0.0	18.2	0.0	16.7
	Total		8.3	0.0	0.0	8.3	0.0	16.7
Non-Hispanic/Latino	Count	3	5	1	18	13	40	
	"Ethnicity of participant"		7.5	12.5	2.5	45.0	32.5	100.0
	"I am to blame for my offending"		42.9	100.0	100.0	81.8	100.0	83.3
	Total		6.3	10.4	2.1	37.5	27.1	83.3
Total	Count	7	5	1	22	13	48	
	"Hispanic/Latino-Non-Hispanic/Latino"		14.6	10.4	2.1	45.8	27.1	100.0
	"I am to blame for my offending"		100.0	100.0	100.0	100.0	100.0	100.0
	Total		14.6	10.4	2.1	45.8	27.1	100.0

Relationship Status

For this study, survey respondents were asked their relationship status as either Married (n=14) or Not Married (n=3.4). The respondent's relationship status and the statement "when I think about my last offense, I feel angry with myself" was found to be significant (p=.047). The majority of those who stated they were married (57.1%) strongly agreed or agreed with the statement along with the majority of those who were not married (55.9%). Over a quarter of those who were not married (26.5%) strongly disagreed or disagreed with the statement. This seems to suggest that relationship status does have an impact on how one responds to the statement "when I think about my last offense, I feel angry with myself" (see Table 9).

Table 9

*Crosstab: Married Status * Thinking-my last offense, I feel angry*

Status: Married	Percent within "Question"		Strongly Disagree	Disagree	Unsure	Agree	Strongly Agree	Total
Yes	Count	0		5	1	7	1	14
	"Status of relationship: Married"		0.0	35.7	7.1	50.0	7.1	100.0
	"When I think about my last offense, I feel angry with myself"		0.0	55.6	14.3	43.8	9.1	29.2
	Total		0.0	10.4	2.1	14.6	2.1	29.2
No	Count	5		4	6	9	10	34
	"Status of relationship: Married"		14.7	11.8	17.6	26.5	29.4	100.0
	"When I think about my last offense, I feel angry with myself"		100.0	44.4	85.7	56.3	90.9	70.8
	Total		10.4	8.3	12.5	18.8	20.8	70.8
Total	Count	5		9	7	16	11	48
	Married/Not Married		10.4	18.8	14.6	33.3	22.9	100.0
	"When I think about my last offense, I feel angry with myself"		100.0	100.0	100.0	100.0	100.0	100.0
	Total		10.4	18.8	14.6	33.3	22.9	100.0

Educational Attainment (Prior to Conviction)

Educational attainment prior to incarceration also was examined and found to be significant when crossed with the statement "I am upset about being a corrections client" ($p=.045$). The majority of those with a high school diploma (63%) and trade school degree (66.7%) along with half of those with a bachelor's degree strongly agreed or agreed with the statement "I am upset about being a corrections client". The only groups to report they were unsure were those with some high school (38.5%) and those who completed trade school (33.3%). This seems to suggest that those with more education were more likely to agree or strongly agree with the statement "I am upset about being a corrections client" (see Table 10).

Table 10

*Crosstab: Education * I am upset about being a corrections client*

Education	Percent within "Question"	Strongly Disagree	Disagree	Unsure	Agree	Strongly Agree	Total
Some High Sch	Count	2	1	5	1	4	13
	"Highest level of education completed"	15.4	7.7	38.5	7.7	30.8	100.0
	"I am upset about being a corrections client"	50.0	14.3	50.0	5.6	44.4	27.1
High School	Total	4.2	2.1	10.4	2.1	8.3	27.1
	Count	1	6	3	14	3	27
	"Highest level of education completed"	3.7	22.2	11.1	51.9	11.1	100.0
Bachelors Degree	"I am upset about being a corrections client"	25.0	85.7	30.0	77.8	33.3	56.3
	Total	2.1	12.5	6.3	29.2	6.3	56.3
	Count	1	0	0	0	1	2
Trade School	"Highest level of education completed"	50.0	0.0	0.0	0.0	50.0	100.0
	"I am upset about being a corrections client"	25.0	0.0	0.0	0.0	11.1	4.2
	Total	2.1	0.0	0.0	0.0	2.1	4.2
Total	Count	0	0	2	3	1	6
	"Highest level of education completed"	0.0	0.0	33.3	50.0	16.7	100.0
	"I am upset about being a corrections client"	0.0	0.0	4.2	6.3	2.1	12.5
Total	Total	0.0	0.0	4.2	6.3	2.1	12.5
	Count	4	7	10	18	9	48
	"Highest level of education completed"	8.3	14.6	20.8	37.5	18.8	100.0
Total	"I am upset about being a corrections client"	100.0	100.0	100.0	100.0	100.0	100.0
	Total	8.3	14.6	20.8	37.5	18.8	100.0

The respondent's educational status prior to incarceration and the statement "Treatment programs are for wimps" was found to be significant ($p < .001$). Those with some high school (84.6%), completed high school (91.3%), and trade school (100%) strongly disagreed or disagreed with the statement "treatment programs are for wimps". Those with a bachelor's degree were split with 50% strongly agreed and 50% strongly disagreed. This seems to suggest that educational attainment prior to incarceration does impact feelings toward treatment programs being perceived as wimpish (see Table 11).

Table 11*Crosstab: Education * Treatment programs are for wimps*

Education	Percent within "Question"	Strongly Disagree	Disagree	Unsure	Agree	Strongly Agree	Total
Some High Sch	Count	2	1	5	1	4	13
	"Highest level of education completed"	76.9	7.7	15.4	0.0	0.0	100
	"Treatment programs are for wimps"	34.5	6.7	66.7	0.0	0.0	27.1
	Total	20.8	2.1	4.2	0.0	0.0	27.1
High School	Count	1	6	3	14	3	27
	"Highest level of education completed"	55.6	40.7	3.7	0.0	0.0	100
	"Treatment programs are for wimps"	51.7	73.3	33.3	0.0	0.0	56.3
	Total	31.3	22.9	2.1	0.0	0.0	56.3
Bachelors Degree	Count	1	0	0	0	1	2
	"Highest level of education completed"	50	0.0	0.0	0.0	50	100.0
	"Treatment programs are for wimps"	3.4	0.0	0.0	0.0	100	4.2
	Total	2.1	0.0	0.0	0.0	2.1	4.2
Trade School	Count	0	0	2	3	1	6
	"Highest level of education completed"	50.0	50	0.0	0.0	0.0	100.0
	"Treatment programs are for wimps"	10.3	20.0	0.0	0.0	0.0	12.5
	Total	6.3	6.3	0.0	0.0	0.0	12.5
Total	Count	4	7	10	18	9	48
	"Highest level of education completed"	60.4	31.3	6.3	0.0	2.1	100.0
	"Treatment programs are for wimps"	100.0	100.0	100.0	0.0	100.0	100.0
	Total	60.4	31.3	6.3	0	2.1	100.0

Qualitative

Those who volunteered for phase two of the research study completed a focus group interview. The focus groups consisted of educational programming staff and corrections officers who worked with those who were surveyed in phase one of the research study. This population was selected to better understand from their perspective what characteristics inmates exhibited who were successful in educational programming as well as what factors motivated inmates to participate in and complete programming. Although demographic questions were not asked during the focus group interviews, there were slightly more females (n=5) who participated in the focus groups than males (n=3). The focus group participants together had a combined 172 years of experience working in corrections or a similar field, which suggests the focus group participants would be

considered experienced professionals within their field.

The focus groups responses were entered into NVIVO for analysis, which yielded four themes including: what the term corrections means to the individuals working in the field, the importance of education and treatment programs to the corrections process, barriers to program completion, correctional staff support to the process, and summary of what correctional staff see as the future of corrections.

What does the term “Corrections” mean to you?

All of the correctional and educational staff came to work for the department corrections for a variety of reasons. For some, it was because family members already working in the field provided a way for easy access to a position “My father worked as a correctional officer (CO), and it always provided a way for us to have a good life and benefits; and I want the same for me and my family” (participant 1). Others expressed that it was a “sure thing” (participant 3) or a “guaranteed job, because there is always going to be crime” (participant 4); establishing that the job market was always looking for people in the field.

One of the participants had “been on the other side of the bars” (participant 8) and had served time for previous criminal behavior. Their perspective was different than the rest of the focus group participants. They stated that “corrections” means a “second chance” and taking that chance to “right the wrongs” by providing an opportunity for someone to reset themselves in a controlled environment and become a productive citizen.

Others viewed corrections as financial stability or “a paycheck” (participants 4

and 5), while others noted they were waiting for a better opportunity to come along. Several participants noted it was hard to establish correctional processes that were consistent because of staff turnover.

How Important is Education and Educational Programming to the Correctional Process?

Overall, there was a consensus that education and educational programming was key for inmates to have while they are incarcerated. Correctional staff noted that those inmates who were currently participating in the GED and MOS programming, “Feel better about themselves, and that there is hope for them to be better when out” (participant 2). Educational staff stated they often find those who start the MOS program have a general interest in learning but feel sometimes that they still may not be taken serious upon their release because it was a certificate program rather than a true college degree. As stated by participant 3, “They act like they are focused and ready to really accomplish something, but when some of them leave and then come back they said it (certification) was only valuable while in here (prison)”.

As stated by participant 4, “we can always hope that each individual will take something that they learn here and be able to apply it out there”. However, one concern that was raised was there were “just not enough programs educational or not” for each person to participate in even if they wanted to (participant 5). Correctional staff, particularly those that were officers, noted the importance that education and educational programming had on the overall morale of the inmate and their behavior while participating, “they don’t want to mess around and lose the opportunity to be able to

attend their programs” (participant 1). Suggesting that behavior issues that can arise in the facility were experienced less by those enrolled in the GED program and the MOS program. One staff member concluded by saying, “If we don’t try to give them tools or help them learn something while they are here, then what good was their time spent?” (participant 8). Noting that many of the staff stated they see the excitement and appreciation the inmates have when they finish a task or section of their program. “We are a part of their success, and it is great when they talk to their family and share with them that they have completed a class or received a certificate” (participant 3). This appears to suggest that support systems, such as correctional staff and family were an important part of the treatment process.

Are There Barriers that Keep People from Participating in Educational Programming?

As previous research suggested, there were barriers to fully participating in the educational programs because they were in a prison. Each focus group participant highlighted several common barriers, some were inmate perpetuated and others were not. Focus group participants noted that on occasion within the prison events such as physical fights or contraband found on a unit made it, so program members were not able to participate in programming. One participant noted, “They know if they mess up on my watch the first thing, I am going to do is put them back in their cell” (participant 1). This seems to suggest the ability to attend class and participate is a privilege not a requirement and was the stance that most officers took. It was also alluded to that the inmates know which staff will follow through with the threat of cell confinement versus allowing them to attend programming even though they are exhibiting undesired behaviors. Participant 8

reflected on his own experiences stating, “Programming is all you really have, I know that if certain officers hadn’t encouraged me to do more for myself, I probably would have never attended college when I got out; and that is why I try to really get these guys out of their cells and into a program”.

All the focus group attendees said they were concerned about what corrections would look like in the years to come because funding and other resources were limited when it came to the Department of Corrections. One staff member related, “there is no room in the budget for it” (participant 6). Meaning that most facilities under the operation of the Oklahoma Department of Corrections do not have staff that were hired to do programming. In fact, the participants articulated that most of their time spent working with the program was on a volunteer basis. Those who moderated the GED courses, for instance, were officers who took time during their shifts. Volunteers from outside religious organizations also made the time to conduct study sessions and classes, so the program participants were able to complete the requirements for testing. Participant 5 stated, “we do what we can to help them, but we also have jobs to do and not every one of these guys are interested”. The same is true for the MOS program, which ran when a community volunteer was certified to come to the facility to conduct classes. This made the certificate process difficult to complete. Participant 7 stated, “I went to get my own certification so I could assist the men with program completion, it’s not their fault”. This seems to suggest that since the educational programming was not formally implemented, participation and completion were not consistent.

One staff member, who also experienced programming while incarcerated, noted

that the barrier of inconsistency followed him to the outside too. Participant 8 stated, “It was hard to get people to come and give us anything, even just simple programs”. He also related the issue to his release as it was a factor in his returning to work for the Department of Corrections. Participant 8 conveyed, “When I got out, I tried to go to school, but because I was a felon, they wouldn’t let me.” He stated that after many attempts he was allowed to go to school and make positive network connections that eventually led him to working for the Department of Corrections with the sole purpose of providing options in programs for inmates. He said, “I tried to get certified in everything and anything so that when I got a job with the DOC, I would be able to help” (participant 8).

Summary

Although the overall feeling of the focus group was positive and the messages that were conveyed were full of hope, there was still an undertone of “it could be better” as one staff member related at the closing of the session. Research long ago showed the connection between education and incarceration, suggesting if we educate there is less recidivism (Vacca, 2004). The discussion from these correctional and education staff were consistent with these same research outcomes.

Chapter 5: Discussion, Conclusions, and Recommendations

This mixed-methods research study examined what motivated male inmates while incarcerated in an Oklahoma prison to participate in GED courses or in the MOS certification program and if those participating exhibited treatment readiness. The quantitative and qualitative data were analyzed to answer the research questions using the data collected from the CVTRQ and focus group interviews with correctional staff who worked directly with this population. Survey data were used to analyze whether those eligible to participate in the program exhibited treatment readiness. Focus group interviews were used to better understand what factors motivated program members to participate in educational programs while incarcerated, along with whether those who exhibited higher levels of treatment readiness and motivation were more likely to participate in educational programming and complete the program. In this chapter, the significant results discussed in Chapter 4 are summarized and connected to prior research. The chapter concludes with recommendations for future research and a recommendation to promote legislative and social change within the U.S. criminal justice system.

Summary of the Study

Many research studies have been conducted on recidivism and the barriers returning citizens face upon their release and reintegration back into society, noting specifically the compounded barriers of a felony status with a lack of education and job training (Ashcroft, 1999; Day et al., 2010). Building on previous research, this study aimed to bridge a gap in the literature by examining men's treatment readiness and

motivation to participate in educational programs in prison. First, quantitative data were examined by presenting the demographics of the study population, followed by an explanation of the results from the CVTRQ that were found to be statistically significant. Next, the results of the focus group interviews were explored.

Discussion of the Selected Participants

In the first phase of the research study, a total of 48 incarcerated men who had participated in the GED or MOS programs in an all-male facility in Oklahoma completed the survey. The men ranged from 26 years of age to 65 years of age and were categorized into four age categories (26–35, 36–45, 46–55, and 56–65). The racial composition of the participants incarcerated was predominately White ($n = 23$), followed by Black/African American ($n = 15$), American Indian/Alaskan ($n = 6$), and other ($n = 4$). The ethnicity of the population was categorized as Hispanic/Latino ($n = 8$) or non-Hispanic/Latino ($n = 40$) and with a marital status of married ($n = 14$) and not married was ($n = 34$). The highest level of education completed prior to incarceration was divided into four basic categories: some high school ($n = 13$), high school ($n = 27$), bachelor's degree ($n = 2$), and trade school ($n = 6$).

In addition to surveying the inmates, correctional and educational staff ($n = 8$) from the same facility participated in a focus group discussion. This population was chosen because of their hands on approach of working with the inmates as well as their unique perspectives on what characteristics were considered positive and successful behavior of an inmate, and what characteristics or actions appear to motivate offenders to participate in educational programming. Themes assessed from this study provided

support to the qualitative findings of this study and suggest the future of corrections has a lot to consider.

As noted in the results, the participants demographic variables (age, race, ethnicity, level of completed education and marital status) were analyzed and crossed with the results of the CVTRQ questions using bivariate analysis and Chi-Square to test for significance. The following is a discussion of the findings for each demographic variable that was found to have a significant outcome beginning with Research Question 2: “Are those who were eligible to participate in educational programming exhibiting treatment readiness?” Finally, themes from the focus group responses provide a narrative for Research Questions 1 and 3: “What factors motivated participants to participate in educational programs when incarcerated?” and “Did those who exhibited higher levels of treatment readiness and motivation more likely to participate in and complete the program?”

Discussion of Quantitative Findings

Age

Beginning with the demographic variable of age, responses to the question, “Treatment programs are rubbish” was found to be significant with a majority of respondents between 36 and 45 years of age as well as 46 and 55 years of age disagreeing or strongly disagreeing with the statement. This appears to suggest that inmates do find that treatment and educational programs have value. This finding is consistent with previous research conducted by Ward et.al. (2004), who found that those who engaged in correctional rehabilitation programming had more positive outcomes in treatment and

when reintegrating back into society. In addition, as stated by Stewart and Pichea (2001) most treatment programs in prison were designed around one's desire for change. This suggests that one's belief in treatment programs were relevant and contributed to their overall desire for change and better outcomes.

Next, the survey stated, "I am not able to do treatment programs," targeting perceptions about their own belief if they can effectively and successfully participate in treatment programs. Findings suggested that age does significantly impact one's perceptions regarding their ability to participate in treatment programs. The age groups of 26-35 and 36-45 disagreed or strongly disagreed with this statement. However, half of the respondents in the 56-65 age group indicated they agreed or strongly agreed. This suggests that as offenders age within the correctional system, they may feel they are too old to participate in programming or may no longer find value for them personally in correctional programming. Bandura (2004) suggested that self-concept is self-efficacy and is created early in our life. Age plays a significant role in how we interpret our accomplishments. Offenders can get trapped in a cycle of thought that does not exist beyond their incarceration (Bush et al., 2016). In addition, as previously noted in the literature review, treatment readiness and motivation were largely impacted when an offender was ready to invest in their own success (Andrews & Bonta, 2003).

When crossing age with the statement "Treatment programs don't work," those between 55-65 years of age strongly agreed that treatment programs do not work. However, those between 26-55 years of age disagreed with the statement, finding that treatment programs were working for those participating. This further validates and

supports that age can impact one's overall perspectives of treatment programming with those who are older being less likely to believe they work. As Andrews and Bonta (2003) mentioned, an offender's responsivity to treatment was impacted by their decision-making skills and feelings toward treatment. If potential participants feel they are too old to be treated or find benefit from educational programming, the department of corrections and community stakeholders may need to look at how to increase their perception of the importance of continuing education while incarcerated. To address this, some correctional facilities were adapting a more rehabilitative model. However, concern for self-efficacy and age should also be considered, as Bandura (1997) noted that direct experiences are often achieved through mastering a task or watching others master a task. For instance, older inmates could be moved to feel that programming works by seeing others who participate be successful.

Next, significance was noted when assessing the respondents age and the statement "Other are to blame for my offending" and "When I think about my sentence, I feel angry with other people." Those between the ages of 26-35 and 36-45 largely did not support this statement. However, those between the ages of 56-65 fully supported this statement. This finding seems to suggest that those who are older were more likely to hold others accountable for their incarceration and experiences. In the focus group discussion, one of the correctional staff suggested the older or "more seasoned" inmates were less likely to own up to what they have done, but rather blame it on a faulty system or bad lawyer or judge (Participant 1). This finding also was supported by Day et al. (2010), who suggested those who have the mindset of owning their problems and want to

receive help will make the necessary cognitive choice to do better and be more motivated to complete programming.

Finally, age was found to be significant when crossed with the statement “Treatment programs are for wimps.” Most of the respondents between 26 and 55 years of age and about half of the respondents between the ages of 56-65 strongly disagreed with the statement. This left only a small group that responded they strongly agreed. Although it seems pride may be a factor in this outcome, this research did not determine why a small portion of the respondents agreed. However, Bandura suggested that self-efficacy originates in one’s own cognition. It is possible that older inmate’s self-efficacy has been clouded because they did not have positive role-models of the same age or older that allowed their perceptions to be opened to the possibility of betterment (Bandura, 1997).

Race

Respondents were given four categories of race to choose from: white, Black/African American, American Indian/Alaskan Native, and other. The variable race was crossed with each of the statements on the CVTRQ. Only one statement when crossed with race was found to be significant – “Treatment programs are rubbish”. Those who identified as white strongly disagreed with this statement, while those who self-identified as American Indian/Alaskan Natives or other mostly disagreed. Black/African American respondents indicated they were unsure if treatment programming was rubbish. This is problematic since nearly one third of all respondents self-identified as Black/African American and Black men and women have higher rates of admission into

the criminal justice system (jail or prison) than other races or communities of color (Pew, 2023).

Ethnicity

Next, the variable ethnicity was crossed with each of the questions on the CVTRQ survey. Respondents could self-identify as either Hispanic/Latino or Non-Hispanic/Latino. The first significant outcome occurred when ethnicity was crossed with the statement “I am to blame for my offending”. Those who identified as Hispanic/Latino were equally divided between strongly disagreeing and agreeing with the statement, while the majority of those who identified as Non-Hispanic/Latino agreed or strongly agreed with the statement. Previous research conducted by Birgden (2002) found that taking ownership can serve as a motivator for participating in treatment, allows offenders to make better decisions about their rehabilitation, and increases willingness to participate in programs. However, it should also be noted that only 17% of all respondents self-identified as Hispanic/Latino.

The second significant outcome occurred when the variable ethnicity was crossed with the statement “When I think about my sentence, I feel angry with other people”. This statement was found to be significant for those who self-identified as Hispanic/Latino or Non-Hispanic/Latino with a majority of both groups disagreeing or strongly disagreeing with the statement. This further supports research conducted by Cho and Tyler (2010) that found inmates were more likely to participate in and effectively complete programming when the offender had taken responsibility for their crime and chose on their own to participate in programming.

Relationship Status

Respondent relationship status was analyzed as prior research had found one's desire to make change increased when there was a belief that they had peer and/or family support (Bandura, 2000). Relationship status was found to be significant when crossed with the statement - "When I think about my last offense, I feel angry with myself". The majority of respondents, whether married or not, agreed or strongly agreed with this statement. This is important given that prior research has found that taking accountability for one's actions indicates a cognitive change that creates a positive attitude toward correctional rehabilitation (Howells and Day, 2003).

Educational Attainment Prior to Incarceration

Educational attainment prior to incarceration was found to be significant when crossed with the statement - "I am upset about being a corrections client". Those with some high school education stated they were unsure or agreed/strongly agreed with the statement. However, over half of the population with a high school diploma agreed or strongly agreed with the statement. This is consistent with what was found by Gordon and Weldon (2003), where those who participated in education programs before prison had lower recidivism rates.

Educational attainment prior to prison was found to be significant when crossed with the statement, "Treatment programs are for wimps". A majority of respondents regardless of educational attainment disagreed or strongly disagreed with this statement. This is a positive result suggesting that participating in treatment is not viewed as harming one's perceived masculinity. This also supports previous research that education

can be considered a tool to reduce recidivism (Hall R. K., 2008).

Utilizing the CVTRQ for this research was beneficial in assessing educational program readiness for this population. Findings from this research were consistent with previous research findings by Casey, Day, Howells, and Ward (2007) that found it was important for correctional administrators to assess their populations and design educational programming. Utilizing this assessment tool, correctional staff can predict treatment readiness and motivation to participate and effectively complete educational programming while incarcerated and prepare individual treatment plans for release and reintegration (Casey, Day, Howells, & Ward, 2007). This finding was also supported by Bandura's theory of self-efficacy, where correctional staff and program participants can develop a course of action with the offender to prepare for the beginning of their sentence with the end in focus (Bandura A. , Exercise of Human Agency through collective efficacy, 2000).

Discussion of Qualitative Findings

The second phase of this research included focus group interviews with correctional and educational staff from the facility who worked directly with the inmates in the MOS or GED program. Outcomes from the focus groups addressed research question one, "What factors motivated participants to participate in educational programs when incarcerated?", and research question three, "Did those who exhibited higher levels of treatment readiness and motivation more likely to participate in and complete the program?". These focus groups also were used to further understand if support is offered by correctional staff to support offenders' self-efficacy, by enhancing the opportunities

for offenders to master an experience (education), be role models for them, and provide needed verbal persuasion while managing the offenders' emotions through their educational and incarceration experiences (Bandura A. , Self-efficacy: Toward a unifying theory of behavioral change, 1977).

The focus group discussions provided an understanding of treatment readiness and motivation from the perspective of the correctional and educational staff who worked directly with this population. Four major themes emerged from the focus group interviews that focused on what it means to be a correctional worker as well as how correctional workers contribute to the success and motivational factors of participants completing educational programming while incarcerated.

Theme 1: Meaning of Corrections

Consistent with research conducted by Allred, et. al (2013), one of the many important aspects of prison learning does come from the staff's willingness to not only serve and protect our community, but also act as steward in the correctional rehabilitation processes that offenders must complete while doing their time (Allred, Harrison, & O'Connell, 2013).

Several of the focus group participants came into the field of corrections due to previous exposure to the work environment as their parents or relatives were currently working or worked in the field which allowed for a connection and accessibility to an open position with suitable pay. In addition to a connection to the field, some stated it also was considered a more stable career. For instance, participant 2 suggested and others agreed that "there will always be a job, because there will always be a crime and a

criminal”. One focus group participant previously had served time in prison agreed, largely because for him prison was an option for growth and change because “nothing was working” for him in free society. For him, going to prison offered stability and a means to get resources for a “second chance” at trying to be a better citizen and contributing member of society.

Theme 2: Program Importance

Educational programming for the incarcerated population was considered a key necessity by the participants in the focus group. Although prison was considered a place of punishment, many of the correctional staff tried to encourage the inmates to participate in what programming was offered. Participant 7 stated the point of serving time is just that, “why not improve yourself”. There was a consensus among the focus group interviewees that this time could be used to obtain a skill or trade that would improve the likeliness of a successful reintegration, which also is supported by previous research conducted by Davis, et.al, (2013) and Fabelo (2022). Overall, the focus group participants expressed that the inmates seemed to be happier and felt like they were growing from their experiences, especially with those participating in the MOS and GED programming. This finding is consistent with research discussed by Vacca (2004) that found inmates were less likely to return to prison with an education because they have the means to get a job overcoming one of the main barriers to a successful reentry important to mention that although there was participation by offenders, not all offenders who complete have had success with employment as they did discuss a previous repeat offender that had completed the program, was released only to return claiming that the

certificant did nothing for them on the “outside”.

In discussion with focus group participants, another thought emerged suggesting the need for more programming was needed for offenders to participate in as a means to promote a more positive morale and better behavior of the offenders who participate. Having more programs available means more inmates will be able to participate, rather than having to wait for a spot to open or a new cohort to start. Having the ability to offer these programs keeps issues of bad or undesired behavior less. As the focus group highlighted that they (the inmates) will not want to do anything that puts them at risk of losing their privileges in attending programs because they get put on a lockdown for bad behavior. Consistent with Bandura’s theory of self-efficacy as applied to corrections, experiences of loss or failure should not be viewed as a negative outcome, but instead viewed as an opportunity to make a cognitive change and treated as a learning experience with the ability to try again until the task is mastered (Bandura, 1997).

Theme 3: Program Participation Barriers

Correctional and educational staff who worked in the department of corrections supervising offenders felt very strongly about using access to programming as both a reward for good behavior and a punishment for bad behavior. If there were behavioral issues such as fighting and insubordination for instance, program participants were not allowed to participate in programming. Staff viewed the opportunity to attend such programs as a privilege and not a requirement, even though focus group participants strongly supported programming. Previous research also has found that programming has been used an effective tool for correctional staff to maintain control of the correctional

environment (Day, Casey, Ward, Howells, & Vess, 2010). Having educational programs like the GED or the MOS within the prison benefits both program participants and staff alike. These programs serve as a resource for program participants and provide staff an opportunity to encourage and support program participants, which makes the staff a part of the overall rehabilitative process as mentors (Bandura A., *Self-efficacy: Toward a unifying theory of behavioral change*, 1977).

Focus group participants also were concerned about what the field of corrections would look like for future generations. There was a great deal of discussion focused on what correctional rehabilitation is and the need for more funding and resources. Budgetary issues also were a concern as more people were being placed in facilities for criminal behavior instead of private prisons. Since the COVID-19 pandemic, retirements for correctional staff has been at an all time high causing resources that could have been allocated for rehabilitation efforts to be used for recruitment measures and training (participant 6). Many rehabilitative programs within the facility were ran by volunteers associated with nonprofits or religious groups that were focused on reentry rather than education (Oklahoma Department of Corrections, 2015). Several members of the focus group also commented that they have assisted in tutoring for GED examinations or MOS certifications even though this was not a part of their regular duties because they felt strongly about supporting the inmates with their educational goals, even if it meant they needed additional training for themselves to do so. One of the focus group participants had been previously incarcerated and felt strongly about using his own experiences and passion for change to motivate and inspire others. He mentioned the prison environment

as a continued barrier, which was consistent with previous research findings that noted correctional institutions are often chaotic, loud, and violent and can create a complex treatment environment that is not consistent or safe for growth and self-efficacy (Kuhlman & Ruddell, 2005; Bandura A., Self-efficacy. The exercise of control., 1997).

Theme 4: Corrections and the Future

The term hope was widely used by focus group participants. They noted their primary focus was supervision, but they also believed they served a role within the rehabilitative process to prepare people for when they were released. The members of the focus group understood that what they did everyday for their jobs was a lot, but still felt it was important to support the program participants because there was room for improvement. Prior research also has noted the importance of staff working to model positive behavior for those who are incarcerated and have concluded that offenders need a positive role model and an environment that enhances their physical self, emotional self, and educational programs that will provide financial stability for a more productive reentry (Bandura, 1977; Ward, Day, Howells, & Birgden, 2004).

Recommendations

This research study has contributed to the growing discussion around the need for education within prisons, what motivates people to want to participate in treatment, and the barriers faced by inmates who are not ready to participate in programming. Findings from this research study were consistent with previous research that suggested education matters. However, only 9% of inmates have the opportunity to participate in educational programs while incarcerated even though research has found that education leads to jobs

and lower recidivism rates (Vera Institute of Justice, 2017). The lack of participation and access to educational programs in prison is a barrier to successful reentry that can be addressed.

As previous research highlighted in the literature review, offenders face multiple barriers upon their release into our communities when they have met the requirements for early parole or have served their sentence in its entirety (CopenHaver, Edwards-Willey, & Byers, 2007). The stress of release coupled with the stress of trying to adhere to supervision conditions often create more hardship than an individual faces during their incarceration (Day, Casey, Ward, Howells, & Vess, 2010). As suggested by Bender (2018) and Bozick, et.al. (2018), providing education to those who are incarcerated improves post release outcomes.

As noted in the focus group interviews, correctional staff serve as mentors to those who participate in the educational programs. This research study found that the more education one has prior to incarceration, the more likely they are to be motivated to participate in treatment during incarceration. Therefore, it is important for staff to understand program participants educational attainment prior to incarceration, so they have an understanding of program participants needs and can provide emotional support and encouragement to increase motivation.

Age also was found to be a significant variable when examining motivation and treatment readiness with younger program participants being more likely to view programming as valuable. This finding should be further examined as this difference could be based on older inmates' prior experiences. For instance, older inmates may not

feel as though the program was helpful in the end if they recidivated because they did not have access to the necessary support systems within their communities.

Conclusion

The purpose of this study was to explore the motivation and treatment readiness factors that contributed to the decision-making process of an inmate when deciding whether or not to participate in educational programming while incarcerated. Specifically, this study focused on an all male population housed in a medium-security private prison in Oklahoma who were participating in or waiting to participate in GED or MOS programming. Findings from this research study suggested that age was a significant variable to consider when examining treatment readiness and motivation with younger inmates being more likely to participate in and successfully complete educational programming. Ethnicity also was found to be a significant variable for treatment readiness. Those who identify as Non-Hispanic/Latino were more likely to report they were accountable for their offending, which suggests they will be more apt to take accountability for their own learning and program matriculation. However, it should be noted that this finding should be further examined as only 17% of all program participants self-identified as Hispanic/Latino. Relationships also were found to be a good source of motivation as those who reported they were married noted they were trying to improve for themselves as well as their loved ones. Finally, educational attainment prior to incarceration was found to be a motivating factor as those with educational attainment prior to incarceration were less likely to feel that programs were not valued or those completing them were not valued. Focus group interviews with

correctional and educational staff provided additional support that educational programming for inmates was key to a successful reentry to society, and there was a need to develop and provide financial support for the establishment of more programming within prisons.

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Appendix A: Recruitment Email

Re: Seeking Permission for Facility Utilization in Doctoral Research

Dear XXXXX,

Hello, my name is Kelly Henderson, and I am a doctoral student in the criminal justice program at University. Currently, I am working on my dissertation titled, *Factors Motivating Participation in Educational Programming in Oklahoma's Incarcerated*. I am emailing you to ask for your assistance in gaining access to your facility to complete this research project.

For my dissertation, I am trying to better understand what motivates some inmates to participate in and complete educational programming in prison. The end goal of this project is to share the research findings with your staff to help increase participation in and completion of educational programs within your facility and hopefully other similar prisons as well.

In order to complete this research project, I am requesting access to two populations at your facility. First, I would like to survey the inmates who are on the waiting list for or are participating in the GED and/or the Microsoft Office Specialist programs you offer. Those who are interested would voluntarily complete a brief 20 question survey called the *Corrections Victoria Treatment Readiness Questionnaire*. This survey describes how a person may feel when starting treatment or approaching problems in their lives and examines whether they are ready to effectively participate in treatment. To better understand treatment readiness and factors that motivate inmates to participate in treatment, I also would like to complete focus group interviews over zoom with small groups of staff and administrators who work directly with this population. The findings from these focus group interviews will allow me to better understand from the staffs' perspectives what characteristics a successful inmate exhibits during program participation.

I have attached my research proposal for your review. Please let me know if you have any questions about this project. Your participation is greatly appreciated as my goal long term is to help our Oklahoma prison system as well as add to a growing body of research in this field. If you would like to schedule a time to discuss this further, please let me know. I can meet with you in person or virtually as needed. Thank you in advance for your consideration,

Kelly Henderson
Doctoral Student

Appendix B: Invitation Email-Focus Group

Invitation email to get potential focus group participants.

Dear XXXXXX,

Hello, I hope you are well. I am reaching out to see if you could help me identify correctional staff and administrators who work directly with the GED and Microsoft Office Specialist programs. I am hoping to interview them in small focus groups virtually through zoom to better understand their perspective of inmate treatment readiness and motivation. Could you please send me a list of all those who work with this population that includes their names and email addresses, so I can invite them to participate in this study?

Thank you for considering this request. If you have any questions or concerns, please do not hesitate to reach out to me.

Sincerely,
Kelly Henderson

Appendix C: Invitation Email-Staff

Invitation email for participants (staff)

Hello, my name is Kelly Henderson, and I am a doctoral student at University pursuing my Ph.D. in Criminal Justice. Currently, I am working on my dissertation titled Factors Motivating Participation in Educational Programming in Oklahoma's Incarcerated.

I am reaching out to see if you would be willing to participate in a focus group interview to share your experiences working with inmates in the GED and Microsoft Office Specialist programs. The focus group would consist of you and a small group of correctional staff and administrators who also work directly with this inmate population. The focus group interview questions will focus on your perceptions of what factors motivate inmates to participate in and complete programming while incarcerated.

If you would like to participate in this study, please read the attached Informed Consent letter and return the consent form with your contact information and preferred days and times.

If you choose to participate, you will be asked to meet at a specified date and time virtually through Zoom, as not to interfere with your job.

Thank you for your time.

Sincerely,
Kelly Henderson
Doctoral Student

Appendix D: Readiness Questionnaire-Front

Re: Corrections Victoria Treatment Readiness Questionnaire

Please answer the following questions by circling the letter that best describes you.

1. How old are you?
 - A. 18-25 years old
 - B. 26-35 years old
 - C. 36 - 45 years old
 - D. 46-55 years old
 - E. 56-65 years old
 - F. 66-75 years old

2. Please select your race. Circle multiple races, if needed.
 - A. White
 - B. Black or African American
 - C. Asian
 - D. American Indian or Alaskan Native
 - E. Native Hawaiian or Pacific Islander
 - F. Other

3. Please select your ethnicity.
 - A. Hispanic or Latino
 - B. Non-Hispanic or Latino

4. What is the highest level of education you have completed?
 - A. Some High School
 - B. High School
 - C. Bachelor's Degree
 - D. Master's Degree
 - E. Ph.D. or higher
 - F. Trade School

5. Are you married or in a relationship with a significant other for more than a year?
 - A. Yes
 - B. No

Appendix E: Readiness Questionnaire-Back

Re: Seeking Permission for Facility Utilization in Doctoral Research

Each statement below describes how a person may feel when starting treatment or approaching problems in their lives.

Please read each statement completely and circle the answer that indicates how much you agree or disagree with each statement. Please make your choice in terms of how you feel right now, not what you have felt in the past or would like to feel.

There are FIVE possible responses to each of the items in the questionnaire:

1 = Strongly Disagree 2 = Disagree 3 = Unsure 4 = Agree 5 = Strongly Agree

		Strongly Disagree	Disagree	Unsure	Agree	Strongly Agree
Q1	Treatment programs are rubbish.	1	2	3	4	5
Q2	I want to change.	1	2	3	4	5
Q3	Generally, I can trust other people.	1	2	3	4	5
Q4	I am not able to do treatment programs.	1	2	3	4	5
Q5	I am to blame for my offending.	1	2	3	4	5
Q6	Treatment programs don't work.	1	2	3	4	5
Q7	When I think about my last offense, I feel angry with myself.	1	2	3	4	5
Q8	Others are to blame for my offending.	1	2	3	4	5
Q9	I am upset about being a corrections client.	1	2	3	4	5
Q10	Stopping offending is important to me.	1	2	3	4	5
Q11	I am well organized.	1	2	3	4	5
Q12	I feel guilty about my offending.	1	2	3	4	5
Q13	I have not offended for some time now.	1	2	3	4	5
Q14	I don't deserve doing a sentence.	1	2	3	4	5
Q15	Being seen as an offender upsets me.	1	2	3	4	5
Q16	When I think about my sentence, I feel angry with other people.	1	2	3	4	5
Q17	I regret the offense that led to my last sentence.	1	2	3	4	5
Q18	I feel ashamed about my offending.	1	2	3	4	5
Q19	I hate being told what to do.	1	2	3	4	5
Q20	Treatment programs are for wimps.	1	2	3	4	5

Appendix F: Focus Group Questions

Focus Group Questions

FGQ#1 – What does the term Corrections mean to you?

FGQ#2 – How important is education and educational programming to the correctional process?

FGQ#3 – What do you think are the key factors that motivate people to participate in correctional programming?

Follow up: Does the length of sentence impact motivation?

Follow up question: How does outside support, such as connections to family and community impact treatment readiness?

FGQ#4 – Are there barriers that keep people from participating in educational programming?

FGQ#5 - Treatment readiness is defined as a person being ready to participate in their programming and invest in their own success. What are your thoughts? Are those who participate in the MOS and GED programs treatment ready when they begin the program?

Follow up question: Do some people become treatment ready as they participate in the educational programming?

Follow up question: What does being treatment ready look like? Can you provide an example of a person you would consider to be ready for treatment?

FGQ#6 - How does a person's needs impact their treatment readiness?

Follow up question: Does mental illness impact a person's ability to ready to participate in educational programming?

Follow up question: How do feelings such as anger, remorse, and shame impact a person's ability to participate in educational programming?

FGQ#7 - How would you describe the relationship between staff who run the MOS and GED programs and those who participate in the programs?

FGQ#8 – Is there a perception by those who are incarcerated that they are being coerced to sign up for educational programming?

FGQ#9 – How do you engage with potential educational program participants to get them interested in the program?

FGQ#10 – Is there anything else you would like to add that you have noticed about the treatment readiness and motivation of those who choose to participate in the GED and MOS programs?