

CHAPTER V

Outcomes

This chapter will outline the demographics of the participants involved in the program and the outcomes of the program gathered from each outcome measure, beginning with the outcomes from the Coping Self-Efficacy Scale, followed by the outcomes from the Mini Self Check-In Survey, and ending with the outcomes from the Occupational Questionnaire.

Participant Demographics

As previously stated, the doctoral candidate ran twelve group treatment sessions over the six weeks of program implementation (two sessions per week). While recruitment initially yielded ten participants, three participants did not complete the program due to unforeseen discharge from the New Jersey Reentry Corporation Community Resource Center program. Their pre-program data was discarded and not included in the final analysis.

The program retained seven participants ($N=7$), one female ($n=1$) and six male ($n=6$). Participants ranged in age from 25 to 62, and identified themselves as Caucasian, Black, African American, and/or Puerto Rican. On average, the participants spent 27 months incarcerated, with a range of three months to eight and a half years (102 months). On average, the participants were released from prison 29 months prior to this program, with a range of five months to 12 years (144 months).

Throughout the program, one client attended 11/12 group sessions, one client attended 10/12 group sessions, three clients attended 9/12 group sessions, one client attended 8/12 group sessions, and one client attended 6/12 group sessions. As the program progressed, the doctoral

candidate allowed other New Jersey Reentry Center clientele to join in group sessions as “drop-in” clients but did not collect data on these participants.

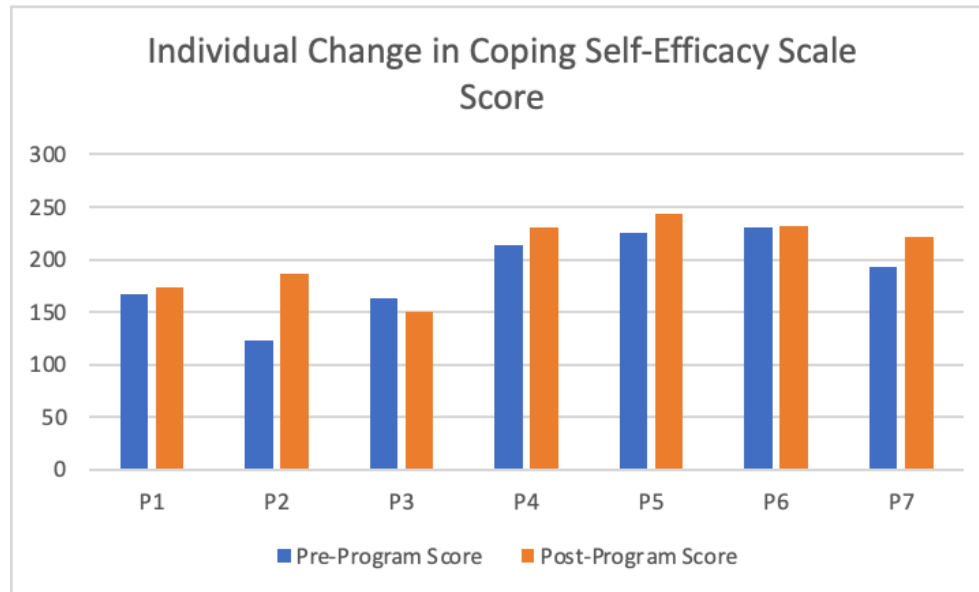
Coping Self-Efficacy Scale Outcomes

The Coping Self-Efficacy Scale (see Appendix F) was administered to the participants both before and after the program as part of clinical documentation related to occupational therapy services provided, but also with intent to measure the impact of the programming as related to the program outcomes. The group's mean score on the Coping Self-Efficacy Scale prior to the program was 187.85, while the group's mean score on the Coping Self-Efficacy Scale following the program was 205. About 85% of the participants (6/7) displayed an increase in their perceived ability to effectively cope with life stressors from the beginning of the six-week program to the end of the six-week program (refer to Figure 1). One client's perceived ability to effectively cope with life stressors decreased by 13 points - this same client also attended the least amount of sessions throughout the six-week program (6/12 sessions). The average change in perceived ability to effectively cope with life stressors was 17.4 points, with a range from an increase of 63 points to a decrease of 13 points.

A related-samples Wilcoxon signed rank test was run via SPSS to determine whether the change in pre-program and post-program scores was statistically significant against a significance level of .05. While overall the majority of the participants showed an increase in their Coping Self-Efficacy Scale score, the change ($p=.063$) was not statistically significant.

Figure 1

Individual Change in Coping Self-Efficacy Scale Score



Note. P1 stands for Participant 1, P2 stands for Participant 2, etc...

Mini Self Check-In Survey Outcomes

Participants completed the Mini Self Check-In Survey (see Appendix G) before and after each group session as a form of quality control and a way for the doctoral candidate to assess immediate change in perceived arousal level and self-control. Questions #1 and #2 were stated as followed:

1.) *I feel calm.*

2.) *I feel in control of my thoughts, emotions, and actions.*

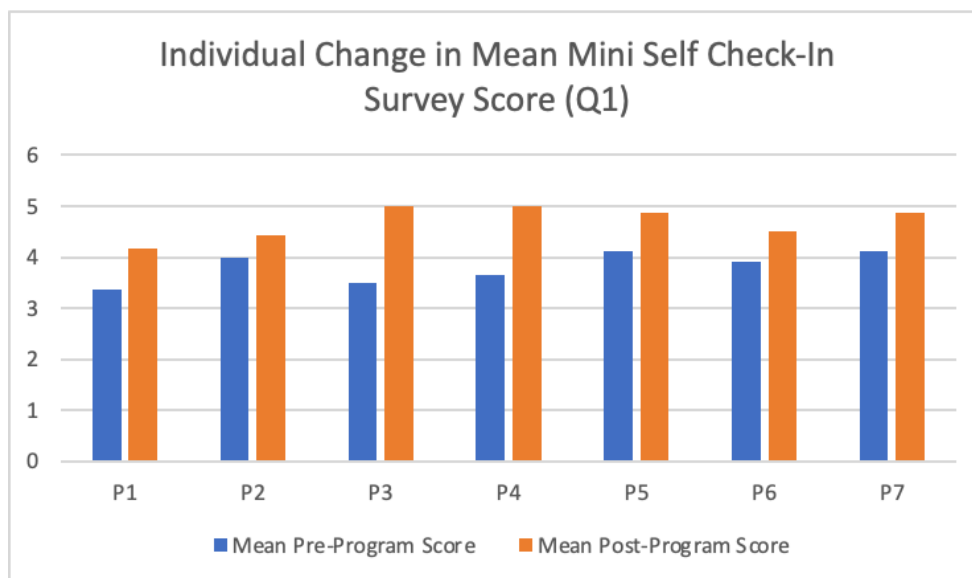
For questions #1 and #2 the participants used a five-item likert scale, with “1” corresponding to “not at all” and “5” corresponding to “very much so.” The mean of each pre-score and each post-score for all participants’ questions #1 and #2 was found. One hundred percent of the participants showed an increase in their mean score for questions #1 and #2 (see Table 6 and Table 7), corresponding to their increased feeling of calmness and ability to feel in control of thoughts, emotions and actions. The average change in score for the group for question #1 was

0.89, with a range from an increase of 1.5 to an increase of 0.44. The average change in score for the group for question #2 was 0.60, with a range from an increase of 1.12 to an increase of 0.11.

Two related-samples Wilcoxon signed rank test were run via SPSS to determine whether the change in pre-program and post-program scores for question #1 and question #2 were statistically significant against a significance level of .05. Both question #1 and question #2 had a p-score of 0.018, indicating that the change for both questions were statistically significant.

Figure 2

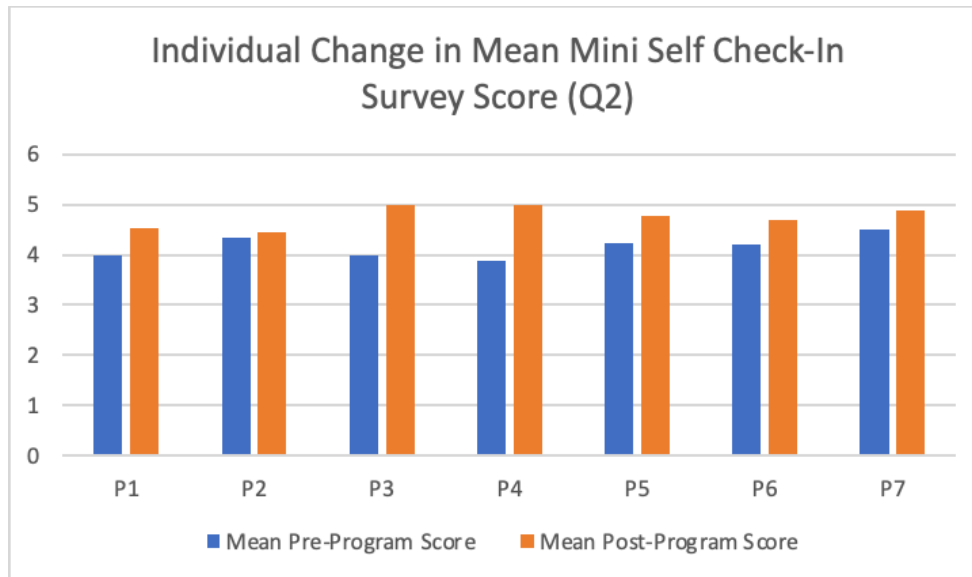
Individual Change in Mean Mini Self Check-In Survey Score (Question 1)



Note. P1 stands for Participant 1, P2 stands for Participant 2, etc...

Figure 3

Individual Change in Mean Mini Self Check-In Survey Score (Question 2)



Note. P1 stands for Participant 1, P2 stands for Participant 2, etc...

Questions #3 and #4 were stated as followed:

3.) *Yoga techniques help me to feel relief from symptoms of stress, depression, and/or anxiety.*

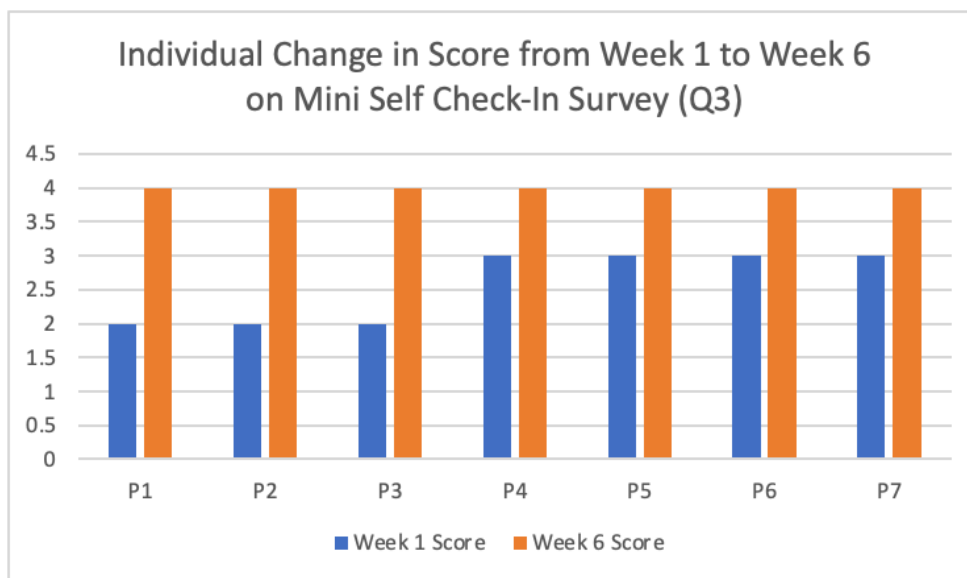
4.) *I plan on incorporating yoga techniques into my daily routine beyond this program.*

For questions #3 and #4 the participants used a four-item likert scale, with “1” corresponding to “*strongly disagree*” and “4” corresponding to “*strongly agree*.” Questions #3 and #4 were only responded to by each participant following each group session. Participant responses to questions #3 and #4 from Week 1 of the program were compared to their responses from Week 6 of the program. One hundred percent of the participants showed an increase in score for questions #3 and #4 from Week 1 to Week 6 of the program (see Table 8 and Table 9). The average change in score for the group for question #3 was 1.43, and the average change in score for the group for question #4 was 1.72, indicating positive responses regarding feeling relief from symptoms and incorporating yoga techniques into their daily routine.

Two related-samples Wilcoxon signed rank test were run via SPSS to determine whether the change in pre-program and post-program scores for question #3 and question #4 were statistically significant against a significance level of .05. Question #3 had a p-score of .015 and question #4 had a p-score of .016, indicating that the change for both questions were statistically significant.

Figure 4

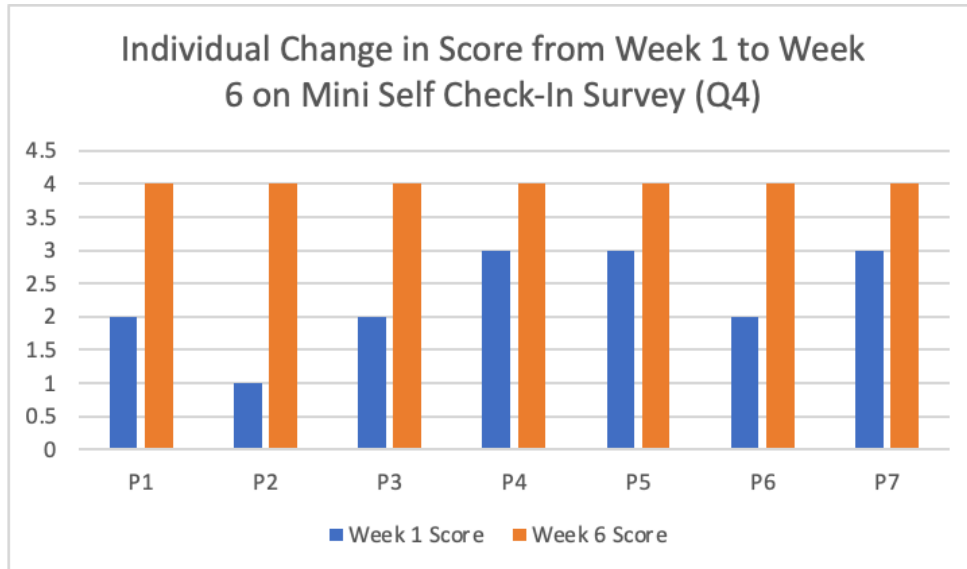
Individual Change in Score from Week 1 to Week 6 on Mini Self Check-In Survey (Question 3)



Note. P1 stands for Participant 1, P2 stands for Participant 2, etc...

Figure 5

Individual Change in Score from Week 1 to Week 6 on Mini Self Check-In Survey (Question 4)



Note. P1 stands for Participant 1, P2 stands for Participant 2, etc...

Occupational Questionnaire Outcomes

The Occupational Questionnaire (see Appendix E) was administered both before and after the program as a means to gather whether or not the participants incorporated one or more of the techniques learned and practiced throughout the program into their daily routines. Prior to the program, only one participant indicated that they already have incorporated one of the techniques that would be taught and practiced throughout the program (meditation) as part of their daily routine and considered this activity to be “*daily living work*” rather than “*work*”, “*recreation*”, or “*rest*”. Following the program, about 43% of the participants (3/7) indicated that they practiced one or more of the techniques learned and practiced throughout the program in their daily routine and considered this activity to be “*daily living work*” on the Occupational Questionnaire. These techniques included breathwork, yoga asanas, and/or meditation. After further discussion with the four participants who did not indicate practicing one or more of the techniques learned and practiced throughout the program, 75% of them (3/4) indicated that they

did not include this in the post-program Occupational Questionnaire because they practiced one or more of these techniques “*weekly*”, “*a few times per week*”, and “*always*” rather than on a daily basis. These techniques also included breathwork, yoga asanas, and/or meditation. One participant did not incorporate one or more of these techniques in their daily routine on the Occupational Questionnaire, nor did they verbally indicate that they incorporated one or more of these techniques into their daily routine.