

A Qualitative Program Evaluation of a Digital Peer Support Group for Formerly Incarcerated People

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ABSTRACT:

Objectives: A qualitative program evaluation of the Formerly Incarcerated Peer Support (FIPS) group, a peer-led mutual support group for formerly incarcerated people, was conducted to understand participant perceptions of 1) digital delivery via Zoom, 2) curriculum content, 3) roles of group participants, and 4) therapeutic value of FIPS group as it relates to traumatic experiences in prison and ongoing challenges after release.

Methods: Using a community-based participatory action research approach, a qualitative evaluation was conducted with participants in either the 2020 or 2021 curriculum. Semi-structured interviews were conducted via Zoom, transcribed, de-identified, coded and analyzed via Applied Thematic Analysis and results reviewed with participants.

Results: Of 75 formerly incarcerated participants, 20 interviews were conducted and recorded (n=20). All participants were male, 85% were Black, and the average age was 54.8 years old. Zoom delivery was not preferred, but feasible. Most appreciated the comprehensive and holistic curriculum that enabled peers to gain practical and emotional social support in different areas of life after release. The facilitator's experience with prison programs and relationships within peer networks was essential for recruitment and retention. Participants described 1) feelings of acceptance, 2) examples of teaching and learning from peers' improved insight, trigger management, response modification to stressors, and 3) improved understanding within relationships with those who have not been incarcerated.

Conclusions: Digital delivery of peer-led psychosocial support groups for formerly incarcerated people is feasible and impactful. Future research can further characterize the lingering impacts of institutional traumas and quantify changes.

KEYWORDS: Prisoners, Power sharing, Program Evaluation, Mental Health, Mental Health Services, Self-help groups, Psychosocial support systems,

Introduction

At any given time, nearly 2 million people are incarcerated in the United States, and around 600,000 people are released from jails and prisons each year.¹ There are alarming and well-documented disproportionate rates of morbidity and mortality associated with mental illness among currently and formerly incarcerated people (FIP). For example, those with diagnosed mental illness are 50% more likely to receive jail sentences for misdemeanors.² Suicide is the leading cause of death in jails, and from 2001 to 2019, the number of suicides increased 85% in state prisons.^{3,4}

Increasing attention has been paid to the role of trauma before, during and because of incarceration as a driver of these outcomes. Around half of those who are incarcerated have experienced trauma prior to incarceration, including abuse during childhood.⁵ Lifetime rates of traumatic experiences are nearly universal among incarcerated people, with an estimated 30-60% of incarcerated individuals having experienced subsequent post-traumatic stress symptoms, a prevalence 10 times greater than the general population.⁶⁻⁸

Incarceration is a unique stressor that exposes people to trauma, which can cause or exacerbate mental illnesses. Piper and Berle found that potentially traumatic events in prison are associated with subsequent symptomology of post-traumatic stress disorder (PTSD).⁷ A 2021 meta-analysis of the associations between different forms of trauma and mental disorders among prisoners and ex-prisoners revealed that trauma during incarceration was associated with successive mental disorders.⁹

Finding theoretically driven, yet pragmatic, solutions to promote mental health among FIP is imperative to improve the lives of those impacted by the criminal-punishment system.

Promoting Social Support for Incarcerated and Formerly Incarcerated Populations

Fostering social support is a critical strategy to address psychiatric consequences of trauma among FIP. Social Support Theory and Differential Coercion Theory posit that social support prevents criminalized behaviors and facilitates rehabilitation.^{10,11} Social support has been identified as the most important coping process for preventing mental disorders among incarcerated and FIP.^{9,12-14}

Peer support groups may be particularly well-suited for justice-involved populations. There is substantial evidence demonstrating that peer support during the reentry process significantly lowers the odds of recidivism, has a protective impact on substance use, and is associated with improved life satisfaction.¹⁵⁻¹⁷ It has also been shown to improve self-reported mental and physical health and reduce behaviors associated with substance use disorders (SUD).¹⁸

Many peer support services, such as forensic peer support specialists, are initiated and sustained by carceral institutions.¹⁹ Though conducted by peers, involvement of carceral institutions in these groups could confound positive effects. Indeed, the evidence strongly indicates peer delivery is preferred to professional delivery.²⁰ Thus, finding methods to develop prison-independent programs owned and operated by those with experience inside prisons may enhance the already established effectiveness of peer support interventions.

Community-based Participatory Research with Formerly Incarcerated Populations

Peer support programs lend themselves well to community-based participatory research (CBPR), an orientation to research methodology that emphasizes collaboration between community members, organizational representatives, and researchers in all aspects of the research process.²¹ CBPR has been suggested as a way to foster community with those who have been

incarcerated and better understand their experience in the interest of systemic changes.²²⁻²³ They may also address the limitations and distrust of institutionally-oriented peer services. However, there has been limited investigation into the feasibility of community-based psychosocial peer support groups for FIP.

This paper seeks to examine the feasibility of the digital delivery of a peer support group curriculum for FIP.

Methods

Present study

In 2015, a peer-led mutual support group was started by FIP for FIP to address the unmet mental, emotional, and social support needs of those coming home from prison in New Orleans, Louisiana. In 2019, FIPs, academic researchers, clinicians, advocates, and student volunteers engaged in a CBPR-informed process to develop a formal curriculum to guide the group.²⁴ As detailed previously elsewhere, the FIPS curriculum development process involved identifying and listing the biggest challenges facing people coming home from incarceration. The initial list of topics was wide-ranging, given the numerous struggles FIP face upon reentry. Teams of FIP, medical and public health students identified and prioritized topics. After regrouping with the larger research team, a final list of topics, depicted in Table 1, was reached. Topics range from navigating family dynamics to substance use, to processing the “culture shock” of returning to homes and new communities after decades of incarceration.

[TABLE 1: FIPS CURRICULUM]

The resulting 12-unit curriculum of the Formerly Incarcerated Peer Support (FIPS) Group was piloted in 2020, with the goal of addressing the lingering and persistent psychological, behavioral, and emotional effects of incarceration on everyday life. Units were delivered in two-hour sessions. The first two units of the 2020 iteration of the curriculum were conducted in person, and then transitioned to Zoom for the rest of 2020 and 2021 during the COVID-19 pandemic. The curriculum was delivered to completion twice, once in 2020 and once in 2021. Each session included a facilitated discussion of the intended topic utilizing prompts developed by FIPs, student volunteers, academics, and clinicians. Sessions were led by a certified peer support specialist who was incarcerated for over two decades. Friends, family, or other guests were allowed to attend at the invitation of FIP participants.

The current qualitative evaluation of the 2020-2021 curriculum seeks to build on the previous evaluation work by understanding participant perceptions of 1) digital delivery via Zoom, 2) curriculum content and structure, 3) roles of group participants, and 4) the value of FIPS group as it relates to traumatic experiences in prison and ongoing challenges after release.

Interview Guide Development

FIP facilitators and student researchers developed a semi-structured interview guide that aimed to elicit participant perceptions of program feasibility, content, and group participation. Though we were unable to directly compare feedback from in-person delivery to digital delivery, respondents were asked about the perceived difference between delivery modalities if they had previously attended group during in-person delivery.

Recruitment

Researchers emailed a virtual survey and directly contacted 75 participants of the 2020-2021 curriculum via phone call to gauge interest in evaluation participation and to confirm preferred methods of communication. Team members then followed up with each interested participant using their preferred method.

Interview Process, Transcription, and Identification

Between November 2021 to February 2022, four team members, including FIP and graduate students, reached out to 23 interested participants, and conducted and audio-recorded 20 semi-structured interviews over Zoom. Participants were provided with an electronic consent script along with a Zoom link for the call. At the beginning of each interview, the interviewer reviewed the informed consent script using the Share Screen tool on Zoom and through the chat feature for the participant's review.

Following consent procedures, interviews were recorded using Zoom's audio-only recording function and stored in a restricted access folder on a shared drive. These recordings were then transcribed by a professional transcription service and subsequently quality-checked and de-identified by research team members. Personal identifiers were redacted from interview transcriptions, and each interview was assigned a unique code. After transcription, audio recordings were permanently deleted from all electronic storage. This protocol was reviewed and deemed exempt by the Institutional Review Boards of both Tulane University and Louisiana State University Health Sciences Center New Orleans (LSUHSC IRB#1956, Tulane IRB#2021-030)

Qualitative Analysis

Per Guest et al 2012, we employed Applied Thematic Analysis as our approach to codebook development and data analysis.²⁵ An initial codebook was constructed of a priori codes based on the structure of the interview guide. It was decided that two graduate student team members would independently perform blinded coding of 10% of interviews using Dedoose software and modify initial inductive codes or add new deductive codes through this process. They then merged coded transcripts to identify and reconcile areas of discrepancy in coding, remove redundant codes, as well as expand and collapse codes, as necessary, to create the final codebook. The two team members then independently coded the remaining transcripts, while regularly repeating this process for quality assurance and validity.

Following the coding of each interview, the two team members reviewed all coding, summarized each interview, discussed these summaries, and met to discuss the major themes and subthemes that they identified in the data. One researcher used codes to extract quotations from the transcripts that best illustrated the major themes and sub-themes. The other team member then reviewed all quotes to verify accuracy and fit with the themes identified.

Following this process, the coding and themes were reviewed by the research team. From there, we presented the themes during a Zoom meeting of the whole FIPS Group to gain impressions on the research team's findings. Attendees offered comments and general approval. No major modifications were offered, and attendees felt the findings were accurate.

Results:

Demographics and Descriptive Statistics

Of 23 respondents who indicated interest in participating, a total of 20 interviews were recorded (n=20). As depicted in Table 2, the average age of participants was 54.8 years old, with

a range from 35 to 70. All participants identified as male, and 85% of participants identified as Black or African-American, 10% identified as white, and 5% identified as biracial. Of those who disclosed their incarceration history, the average amount of time spent incarcerated was 22.4 years, ranging from 12.5 to 39 years. The average number of years since release was 11 years, ranging from 2 to 20 years.

Most participants had been involved in FIPS Group prior to the development of the curriculum. The average number of years involved with FIPS Group was 4.1, ranging from 8 months to 7 years, when it was first organized. Regarding attendance in the 2021 curriculum, the average number of units attended was 5.3, ranging from 0 to 11. Those who had not attended the 2021 series had participated in the 2020 curriculum, part of which was virtual as noted above.

[TABLE 2: DESCRIPTIVE STATISTICS]

Benefits and Challenges of Zoom and In-Person Program Delivery

Of those who expressed a clear preference, most participants preferred in-person delivery of FIPS Group. Those in favor of in-person delivery expressed better understanding of peers' perspectives through non-verbal communication, better peer dynamics and camaraderie, and better conversation flow. Those who indicated preference for Zoom delivery reported the convenience and accessibility afforded by those who must work during scheduled meetings, as well as for those who live outside of New Orleans. However, those who preferred in-person delivery conceded that Zoom was a vital means of maintaining a safe way to conduct FIPS Group through the COVID-19 pandemic. Going forward, it was expressed that having some means of integrating both delivery methods to maintain the "best of both worlds" would be ideal. Participants suggested programmatic

features include “tech support”, where volunteers walk through setting up Zoom on participant’s devices.

[TABLE 3: BENEFITS AND CHALLENGES OF PROGRAM DELIVERY MODALITY]

Curriculum Feedback

All participants identified the curriculum as a positive development in program delivery. Many cited the topics discussed as comprehensive, covering issues pertinent to those recently released who would benefit from the experience of other peers. Units cited as particularly useful included “Culture Shock”, “Parenting and Family”, “Dating and Relationships”, “Jobs and Conflicts with Authority”, and “Substance Use and Abuse”. One reason cited for the personal significance of these units included better understanding of how peers may experience reentry. For example, participants found “Culture Shock” relevant, especially for those who spent long periods incarcerated, because it validated their own experiences with drastic changes in the world they left behind while in prison and the way it changed in their absence. Conversely, the least useful content cited by participants included “Stigma and Profiling.” One participant indicated that carceral stigma is not as salient of a stigmatized identity as being Black in America. “Poverty and Money Issues” was cited by most participants as one of the most useful.

Regarding the sequence of the units, some participants suggested that for those coming home, the order of topics mirrors the steps necessary to do well upon release. *“If you had a stroke, you got to reteach how to talk, how to walk, the basics...That's why culture shock is literally the first one”* Many participants appreciated how the curriculum was “dynamic”, where it could

connect the intended discussion topic to other areas in the curriculum. When asked if any discussions in the group had changed their views or behavior, several mentioned specific units.

Opportunities for growth cited by participants included caution against over-formalizing conversation with the curriculum and not being overly “clinical”. Additionally, there were suggestions that to get the most out of FIPS Group required continued participation, but also that even those who attended relatively fewer sessions shared that they benefited from the content received.

[TABLE 4: CURRICULUM FEEDBACK]

Role of Facilitator

Respondents identified the lived experience of incarceration, credibility among peer network, and formal training in peer group facilitation as important legitimizing factors for the facilitator. One participant described how FIPS Group would not function without the lived experience of the facilitator: “*You want to hear it from somebody who went through the hell and made it...*” Additionally, some respondents identified the facilitator’s credibility, through interpersonal history and reputation, even among those with shared experience as an important factor. A few identified training as important for being able to properly guide discussion. This reasoning is implied in why participants suggest that though all peers should contribute, not all may be suited to facilitate.

The facilitator used his existing relationships with peers to recruit, used their knowledge of the prison programs to emulate that environment, and his knowledge of peers to elicit different perspectives. Almost all participants identified the facilitator as the reason they got involved in

FIPS Group. They were variously recruited by outreach over social media, at community events, or word of mouth. Many noted the facilitator’s knowledge of peers and their history in his method of calling on people as useful to promote conversation. These techniques were identified as familiar, like the Substance Abuse Clinic at Louisiana State Penitentiary (also known as Angola). Finally, extracurricular conversations between the Facilitator and participants were identified as enhancing the impact of the group. These relationships were described as bidirectional: “*Players coach to coaches too.*”

[TABLE 5: ROLES OF FACILITATOR]

Personal Impact

Three principal themes emerged from participant views on how FIPS Group has impacted their lives and what role it plays: (1) FIPS Group is a space where those with a common bond forged by incarceration can convene comfortably and vulnerably, (2) FIPS Group is a space to learn from other FIP and give back, and (3) FIPS Group has impacted participants’ relationships with loved ones and the public. An overlying thread throughout all three themes was FIPS Group’s impact on undoing the persistent psychological and emotional effects of incarceration on life after release.

Theme 1: “Common Bond”

The theme of having a “*common bond*” appeared in most interviews, as participants often referred to each other or formerly incarcerated men in general as “*brothers*”, referred to a common struggle that they face together both in life during and after incarceration, or described a

“*camaraderie*” due to their shared experience of incarceration. This common bond is formed by feeling accepted and understood when sharing relatable experiences of incarceration. Many participants talked about going “*through something together*” (drawing parallels between FIP and veterans), while others pointed towards the sheer amount of time FIPS spent around each other (e.g., “*we kinda grew [up] together*”). This common bond is contrasted by challenges relating these experiences with those who have not had them. One participant explains, “*people who’s out now can actually talk to other people who’s out. And sometimes it’s hard when you try to speak to, like, even your family. Sometimes they don’t really understand. It’s like people who go to the military, you know? They have a common bond.*”

FIP build this sense of acceptance by sharing relatable experiences during group, which cements the common bond. When hearing that other people experience similar issues to their own, one participant explained that it made him feel “*not alone*”. Meanwhile, another said it helps people identify with them and put their own experiences into words: “*Some people may not know how to explain what they're going through, but when they hear somebody else talking about it gives them a better idea of, ‘Oh yeah. man, I experienced that too.’*” Others described the ability to just exist comfortably among others as therapeutic in itself.

In addition to forming a common bond among participants, the freedom to be vulnerable without judgment was a major draw of the group. Participants shared not only about their experience of incarceration, but of life after it. This included discussing institutionalized behaviors and attitudes they carried home with those who understood, such as quick reactions to facing disrespect or difficulty communicating with significant others. As further explained in Theme 2, participants find fulfillment in helping others unpack institutionalized behaviors and recognizing their own.

Peers in the group are bonded not only by validating common challenges they face, but also in their triumphs and joys. A few participants said just seeing other peers surviving outside of prison is inspiring: “...It's good to see good people out here that's still living and getting fat and getting more gray hair in their face.” Several participants pointed out specific times they felt proud of or motivated by their peers’ personal successes, such as getting married, starting a business, or buying land (“You [are] just happy to see them making it”, “It turns on a light in me”). One participant explained the importance of this motivation in the context of society’s otherwise negative stigma of FIP - “It kinda motivates me... to change the outlook for the next guy” because “the news...they don’t ever say a lotta good things about people that have come home...” Thus, because of their common bond, an individual’s win is the group’s win.

[TABLE 6: COMMON BOND]

Theme 2: Peers Teaching and Learning

The second theme among those who described the personal impact of the FIPS Group was how it provided opportunities for peers to teach each other and learn from one another. For example, participants commonly identified FIP as a source of practical support to meet their primary needs. Whether it was places to look for a job, resource navigation, or technology assistance, peers describe FIPS Group as a “network [of] people... that can help you.” FIP recognize both FIPs’ immediate material needs as well as their agency to become independent. Thus, FIP will often use their own resources or positions at their jobs to invite other members to join. Another participant talked about educating other members to become entrepreneurs themselves after he started his own business.

In addition to resource navigation, participants provide insights that allow peers to learn more about themselves. For example, one participant suggested to another that the source of his relationship problems could be that he can't help but *"rebel if anytime you... feeling like you are being locked up again"*. Many participants spoke about learning to undo the *"machismo"* or *"pride"* they formed in prison that caused conflicts with some of their bosses or with romantic partners on the outside. For example, one participant recalled discussing a FIPS Group member's conflict with their boss one night and then faced a conflict with his own boss the next day, which drew attention to how his own *"hot temper"* isn't useful *"out here"*.

A common terminology used among respondents both in FIPS Group and in interview responses relates to trauma and PTSD. For example, several respondents used the word *"trigger"* to describe instances of heightened emotion related to feelings in the present that resembled those in prison. Trigger identification and response modification was another part of group conversations that promoted adaptive self-understanding: *"...So when [FIPS members] talk to each other, we...help each other see where all this came from and give you a better understanding of how to deal."*

Other peers view FIPS as an altruistic opportunity to give back to less-established peers. Some identified the peer network that FIPS Group is a part of as filling the gaps left by severed social connections among family and friends while participants were incarcerated.

Peers who have had more time since their release back in the community recognize how they are well-positioned to help others in the group and find several motivations to do so: FIPS may view their fellow members' successes as their own, as discussed in Theme 1. Other peers said helping others makes them feel useful or like an *"asset to the brothers"*. The process itself may also be personally therapeutic: *"I was able to... really concentrate on someone else... it actually"*

helps me clear up the ball of confusion that I had going on within myself.” The same participant also points out the value in the group’s ability to help each other independently from systems that have stigmatized and worked against FIP: *“We’re not asking for any help. We’re doing it on our own.”*

[TABLE 7: TEACHING AND LEARNING]

Theme 3: Changing Relationships with those who Have Not Been Incarcerated

Regarding the role of people who haven’t been incarcerated in group sessions, participants saw their inclusion as a positive. Respondents differentiated the benefits of involvement for loved ones from academics, volunteers, or other visitors.

Reasons cited for including loved ones were the ability to educate them about the experience of those who have been incarcerated. Inclusion of these loved ones in FIPS Group was a way of communicating both their experience and feelings. This conveyance was also bidirectional: *“I think it’s a good thing because you can get an idea or understanding what the formerly incarcerated is going through. And the formerly incarcerated can get a good idea that what the family went through...”* This improved understanding not only serves to bring participants closer to their loved ones but may also help loved ones recognize triggers and when to intervene: *“I think that it’s important that family members...notice... an incarcerated type of reaction...Even advise them to seek counseling, you know, if they see certain things.”*

Participants described the inclusion of those who aren’t peers in FIPS Group as an opportunity to educate the public, reframe negative depictions of FIP, and inform the practice of academics and clinicians. One participant noted how the group can combat stigma: *“I like*

people...to...see that side of us: the good instead of hearing about on the news, the bad, you know?” They also saw a need for professionals to better understand the struggles of life after incarceration to better serve them: *“...How they going to learn- understand what's going on- if they're not part of the conversation?”*

Some participants expressed that involving professionals enhances discussion: *“..It's more questions. It keeps things more flavorful.”* Others envisioned a role for clinicians to provide professional counseling or mental health services during group sessions or in-between: *“....you need somebody professionally to actually give them a solution. You know a possible alternative to react or give them a better understanding from what they hear from their knowledge.”* However, one participant stressed the importance of prefacing and introducing clinical personnel into the group to avoid stifling conversation meant to be led by peers.

[TABLE 8: CHANGING RELATIONSHIPS WITH THOSE WHO HAVE NOT BEEN INCARCERATED]

Discussion

The present evaluation demonstrates the feasibility and impact of community-based participatory development of a digitally delivered support group for FIP. This is, to our knowledge, the first evaluation of a peer-developed, peer-organized, and peer-led support group for formerly incarcerated people. By adopting a CBPR approach, FIPS Group has avoided many of the pitfalls of some institution-led or clinical support groups, such as lack of trust with participants or limiting focus to only one area of reentry, as opposed to addressing reentry challenges holistically.

Though most FIPS Group participants in this evaluation preferred in-person delivery, delivery via Zoom facilitated greater attendance and program reach than would have been otherwise possible. Thus, the present evaluation is the first to demonstrate the feasibility of digital delivery of a social support group for formerly incarcerated people.

Regarding the curriculum content, participants appreciated the holistic and comprehensive approach to discussing the challenges of life after prison. This was a deliberate strategy in program development, where FIP organizers recognized that many of the challenges facing FIP are entangled.

This observation reflects the documented complex and interconnected stressors facing FIP as a population. Past histories of incarceration and substance use have a negative impact on employment and produce economic instability after release.²⁶⁻²⁸ This financial instability can be a source of tension and friction between FIP and their loved ones who are providing or expecting material support, and whose relationships may already be strained from incarceration.^{29,30} This stress may in turn contribute to substance use for those living with family.³¹ Though these associations are complex and well-documented, participant observations on their interrelatedness suggest that to truly address the numerous challenges facing those after release, and prevent their return to prison, requires a comprehensive suite of economic, social and psychological interventions, potentially analogous to those offered to veterans.³²

One of the most important findings among the themes of FIPS Group's personal impact on participants is the large role the social support from FIP, loved ones and visitors had on "institutionalization". Peers in FIPS are drawn to the group because they can understand each other's struggles, celebrate each person's successes, and find understanding and vulnerability within each other because they can contextualize these experiences within a shared identity.

Whether they referred to institutionalization as the struggle they all experienced, a setting in which they all grew up, or an obstacle they proudly overcame, participants formed a “common bond” over it. Theme 2 displays institutionalization as a maze that FIPS Group provides an opportunity to either help or be helped, to navigate. Finally, Theme 3 views institutionalization as an issue on which FIP must educate loved ones, society, and clinicians to better support their population. Importantly, participants indicated that inclusion of family was one of the primary values of FIPS Group, suggesting that a holistic, inclusive view of social support in the context of peer-led interventions could be key to its impact on adjustment.

Many participants described conflicts with employers, significant others, and family members rooted in self-described institutionalized behaviors. The implications for such phenomena, if better characterized, may offer a lens on under-characterized drivers of poor social adjustment after release, as well as mental health outcomes. Future research may focus on quantifying the impact of FIPS Group on social support, mental health outcomes and self-efficacy indicated by participants as key to its personal impacts.

Implications for Policy and Practice

The present study has implications for the future directions of FIPS Group. Regarding delivery modality, given that most respondents preferred in-person delivery, and abiding with COVID-19 safety precautions, the group will be returning to in-person delivery. A hybrid or parallel digital delivery will be explored to maintain engagement and involvement with out-of-state participants. Regarding outreach and recruitment, FIPS Group will be advertised in more local community calendars and held in common community spaces for convenience and access.

Many participants identified the structure and execution of FIPS Group as like that of prison group spaces. Some participants identified this familiarity as facilitating their ability to become comfortable and vulnerable in group sessions. One policy implication is that investing in prison programming that encourages peer relationships could support engagement in similar programming post-incarceration such as FIPS Group. Educational programming may be one avenue to promoting such networks and improving employment outcomes and recidivism.³³

FIPS Group would not be possible if the facilitator role had the restrictions that many extant peer support specialists have, such as not being on probation or parole or being sober for a given period. These restrictions exclude major swaths of FIP who want to contribute to their communities, and are a part of a larger exclusion of FIP from employment that contributes to poverty and recidivism.^{26,28,34} Policy changes, such as removing disclosures of criminal histories, widening professional credential eligibility for FIP, centering lived experience in participatory policymaking, and competitive reimbursement for peer-led services through Medicaid could offer a way to address social exclusion and increase employment opportunities.

The FIPS Group was an outgrowth of a pre-existing FIP peer network, catalyzed by multisector community building with FIP, academics, volunteers, and advocates. Future attempts at CBPR-oriented program development for those released from prison may do well to identify and encourage leadership among FIP in communities with high incarceration rates. Existing evidence, and the present study, indicate it may be easier and more effective to provide a FIP with peer specialist training, than to attempt to provide clinical peer specialists with insight into communities involved with the criminal-punishment system.²⁰ Such peer networks could be leveraged to promote similar peer-led interventions during pre-release reentry planning.

Limitations

Limitations on the present study include the small sample and lack of women in the sample, which may restrict the generalizability of the present findings. Additionally, many of the participants were involved in FIPS Group for many years prior to the implementation of the curriculum, and have existing relationships with the organizing team, introducing volunteer bias. The implications of this program for those with no relation to the current peer network remain an area of interest. Further, many of the participants in the present study, and in the larger group, were released years ago, which raises concern about whether the benefits ascribed to group participation may be seen if the intervention were piloted in those who are just being released. Another limitation lies in the fact that many participants are highly motivated, demonstrated by leadership roles in prison and by their roles in the peer network after release, as well as benefiting from other kinds of social support, possibly confounding potential psychosocial benefits. Lastly, retention in the group remains a challenge. As some respondents implied a dose-response relationship between time involved in the group and its perceived benefits, identifying, and developing retention strategies is a high priority for future program development.

Conclusion

The present study demonstrates the feasibility and psychosocial benefits of a digitally delivered and peer-led mutual support group for FIP. A CBPR approach to program development and evaluation with FIP may be a just, effective, and ethical approach to developing mental health resources. Future research can further characterize the lingering impacts of institutional traumas and quantify changes in similar programs.

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Table 1. List of curriculum topics in 2020 and 2021 FIPS Group

Unit	Description	Unit Goals
1. Culture Shock	Many FIP re-enter society as if they are emerging from a time capsule where they walk into a new world. Prison encompasses a culture FIP must <i>adapt to</i> when first incarcerated and then <i>adapt from</i> upon release. Thus, culture shock is entering a new culture and seeing it through a prison lens, or the “prison gaze.” The prison gaze, however, is not necessarily negative; it can provide a fresh and sometimes needed critique on the “free world” culture a FIP is entering. A FIP will also learn that many of the strengths, skills, and disciplines he or she learned inside can be applied on the outside as well.	<ul style="list-style-type: none"> • Examine experiences of culture shock upon re-entry • Ideate what could be done to ease culture shock after incarceration • Contrast participants’ experience of society before and after incarceration • Identify how participants’ specific experiences of incarceration have influenced their perceptions of culture and society
2. Poverty & Money Issues	FIP are disproportionately impoverished. The collateral consequences and collateral costs of incarceration take heavy tolls on economic mobility and reduce FIP to second class citizens upon reentry. In addition, incarceration effectively eliminates decision making – if participants’ life was dictated to you for 20 years, with no say in what you wore, where you went, or even if the lights were on or off, imagine coming home to a world of financial choices, and even obligations, such as bills and rent.	<ul style="list-style-type: none"> • Openly discuss struggle to become/stay financially stable • Identify common financial struggles among FIP • Name ways that a history of incarceration has caused fellow group participants money issues • Acknowledge the emotional stress that finances places on our minds/hearts
3. Jobs and Conflict with Authority	Spending time in a total institution subjects one to prescriptive ways of living, where work is dictated by authorities. There is a role-reduction process that happens as a part of prisonization: you are no longer a brain surgeon, mechanic, father, mother, son, or daughter, you are what the institution makes you to be. There may be options for agency in the form of jobs in prison, but the final decision on job placement was on the part of the institution. This can beget resentment toward authority as it relates to work, but also a sense of ineptitude and loss of purpose.	<ul style="list-style-type: none"> • Discuss career goals and steps to reach these goals • Understand job power dynamics and hierarchy • Identify signs of good and bad work culture • Practice assertive communication (lessons from prison) • Discuss the effects of incarceration on views/behavior towards authority
4. Goals, Planning, Time	When one is incarcerated for decades, planning and setting goals is essential, yet challenging.	<ul style="list-style-type: none"> • Discuss how incarceration has affected

<p>management, and Responsibility</p>	<p>By focusing on goals for one’s time while incarcerated, such as plans after incarceration, one can stave off the monotony and hopelessness of “dead time.” However, the structure of American corrections limits one’s ability to determine how and when basic tasks are accomplished. In other words, setting individual goals is impeded by the institutions. Post-release responsibilities and rediscovered self-agency can feel overwhelming. One must re-learn how to budget participants’ own time, set goals, and manage obligations they potentially have not before.</p>	<p>participants’ ability to set goals, make plans, manage time</p> <ul style="list-style-type: none"> • Talk about participants’ goals set during and after incarceration • Discuss what prison habits have helped/hindered participants’ transition • Identify ways to improve staying on top of responsibilities
<p>5. Parenting & Family</p>	<p>Incarceration fractures functional family systems and communities. Incarcerated individuals and participants’ loved ones alike may face social, financial, and emotional strain while separated. Children of incarcerated individuals are particularly at-risk for negative cognitive and behavioral outcomes, and navigating these challenges proves difficult for participants’ caregivers even after one’s incarceration has ended. The individual experience of incarceration has a significant impact on how one views familial roles upon release. If one is released into the household of a loved one, conflict may arise about money or pitching into household income after a time. More positively, some may redouble participants’ efforts to build relationships with loved ones. Developing the ability to communicate the effects of one’s experience of incarceration to family is critical to reintegration.</p>	<ul style="list-style-type: none"> • Identify the impact of incarceration on participants’ family and family relationships • Discuss the experience of communicating with participants’ families about post incarceration syndrome and participants’ incarceration in general • Identify things they wish to improve/change with family relationships • (For people with children) Share what has helped or hindered participants’ parenting
<p>6. Dating & Relationships</p>	<p>Incarceration deprives people of intimacy and fulfilling romantic relationships, even for those who have partners on the outside. After coming home, finding a romantic partner and starting a family are common priorities for many FIP. However, addressing stigma and adjusting expectations is an unexpected and uncomfortable process that can pose unique challenges for FIP coming home. Sharing one’s emotions, thoughts, challenges, and successes relevant to romantic relationships in a comfortable environment may allow FIP to secure more fulfilling, healthy partnerships.</p>	<ul style="list-style-type: none"> • Discuss a range of relationships (dating, fling, marriage, etc.) • Identify qualities of healthy vs. unhealthy relationships • Identify difficulties and successes with relationships after incarceration • Discuss the impacts of incarceration on relationships • Discuss the experience of communicating with

		participants' partner about incarceration
7. Stigma & Profiling	There are multiple layers of stigma associated with incarceration. This includes higher rates of stigmatized mental health and substance use disorders, racial discrimination and disparate treatment, and the many forms of legally sanctioned social exclusion due to being formerly incarcerated, such as being barred from public political participation. FIP may face these different layers of stigma at every step of reintegrating into society. Whether it's while dating, reforming family connections, or trying to tie down stable housing or employment, formerly incarcerated folks find themselves having to work to shed stigma.	<ul style="list-style-type: none"> • Share participants' experiences with stigma • Discuss the collateral consequences of incarceration and stigma (housing, employment) • Discuss how they have coped with stigma • Discuss if/how stigma has affected participants' self perceptions • Ideate ways to change and reduce stigma
8. Substance Use vs Abuse	The criminalization of drug possession is a major driver of mass incarceration in the US. While it is crucial to recognize how criminalization of drugs has perpetuated trauma and injustice, it is also essential to acknowledge the tragic harms that many have experienced from licit and illicit drug use itself. Discussing each person's experiences and perspectives on drug use can allow FIP to develop a framework for understanding what a healthy relationship with substance use looks like for any individual in a nonjudgmental space.	<ul style="list-style-type: none"> • Define substance use vs. substance abuse • Discuss the effects of incarceration on participants' substance use • Share experiences with addiction, before, during, and after incarceration • Understand different forms of addiction (selling, using)
9. Spirituality & Meaning	Practicing spirituality or religion can play a significant role in persisting through life's hardships before, during, and/or after incarceration. Many FIP may even associate participants' time during incarceration with significant spiritual growth. Meanwhile, others may have found strength and peace through building strong social connections outside of religion. This peer support group session offers a safe space for FIP to explore what relationships, spiritual or not, serve as significant sources of perseverance during difficult times. .	<ul style="list-style-type: none"> • Discuss the variety of ways people find meaning and purpose • Understand how spirituality contributes to participants' life • Identify ways that incarceration changed participants' religious/spiritual outlook • Discuss the importance of a healthy social life • Discuss experiences/difficulties of creating/maintaining social connections after incarceration

<p>10. Physical Health</p>	<p>Incarceration negatively impacts an individual's physical health. Due to poor healthcare in prison, incarcerated people may return home with chronic medical conditions that they either did not have prior to incarceration, or that have been exacerbated throughout participants' time incarcerated. Since medical care in prison is so substandard, many individuals understandably refrain from speaking up about participants' conditions. This leads to worsened conditions and a continued distrust in medical professionals even after release. By providing a space where FIP can discuss the realities of participants' physical health, they are further able to realize the impact incarceration has had on one another. Allowing FIP to share participants' successful experiences with medical professionals on the outside can help foster a more trusting environment and may encourage others to seek help as well.</p>	<ul style="list-style-type: none"> • Understand impact of incarceration on physical health • Discuss healthy routines (working out, diet) • Examine interactions with healthcare providers and the impact of stigma on physical health • Identify ways to improve physical health and resources available
<p>11. Mental Health, Pt 1</p>	<p>Prison is a traumatic experience no matter the length of one's stay. Individuals are likely to witness violence, experience pain (both emotional and physical), and are sometimes locked in cells too small for any human being to remain mentally stable. Prisons do not encourage expression of one's emotions and do not foster a compassionate environment. With any traumatic experience, the effects persist long after the event. Additionally, returning to a completely unfamiliar world has its own challenges that can also weigh on one's mental health.</p>	<ul style="list-style-type: none"> • Define what mental health means • Examine "prisonized" responses to social situations • Understand the impact of incarceration on mental health • Understand the impact of stigma on mental health
<p>12. Mental Health, Pt 2</p>	<p>Prisons do not encourage individuals to seek psychiatric help, and sometimes individuals are even punished for doing so. These negative experiences while incarcerated only contribute to an already present distrust towards the mental health professional community. As a result, FIP may be even less likely to seek mental health assistance post-incarceration. Starting the curriculum with culture shock and ending with two sessions devoted to mental health brings the group full circle. To increase awareness of mental health needs among FIP, it is imperative that we recognize and discuss the trauma experienced in prison and how it can be addressed today.</p>	<ul style="list-style-type: none"> • Discuss past experiences with mental health professionals, both good and bad. • Examine participants' thoughts on seeing a professional for mental health needs

Table 2. Descriptive Statistics

	Average (years)	Range (years)
Age	54.8	35 - 70
Length of Incarceration	22.4	10 - 39
Time Since Release	11.0	2 - 20
Group Involvement	4.2	0.75 - 7

Race	Percent	Number
Black	85	17
White	10	2
Biracial	5	1

Gender		
Male	100.0	20
Female	0.0	0

Table 3. Participant Perceptions of Program Delivery Methods

Theme	Illustrative Quotation
In-person Delivery Pros	
Body language	<i>“When we ... able to physically be among each other, it allow us to really see, you know, what we are actually expressing, even if it's by way of body language.” -P17</i>
Being together	<i>“I like the in person better... you get a chance to congregate with everybody and ... at that particular time, everybody just be really on one accord.” -P19</i>
Improved vulnerability	<i>“We've got dudes dealing with so much right now, and without talking to 'em and being right there with 'em to see, we'd never know some of the things that dude was going through.” -P3</i>
In-Person Delivery Cons	
COVID	<i>“... People have these different fear levels and stuff, right...So, man, it's been really, really a journey, in terms of that COVID stuff.” -P16</i>
Zoom Delivery Pros	
Saves time & money on commute	<i>“...I saved on gas...I save on wear and tear on my vehicle.... time...[it's] efficient I get right on... on the computer.” -P6</i>

Table 3. Participant Perceptions of Program Delivery Methods

Flexibility	<i>“...If that person is at work and he's actually able to get on...without getting in trouble on the job. If a person is... driving, they have access to it...” -P7</i>
Zoom Delivery Cons	
Difficulty accessing Zoom	<i>“...Basically, I'm a dinosaur when it come to this kind of stuff. You know, like getting on Zoom and stuff like that...” -P9</i>
Technological difficulties	<i>“...A lot of the stories and viewpoints get kinda caught up...Due to the technical difficulties, and people can't mute they phones, and you know, stuff like that.” -P11</i>

Table 4. Participant Perceptions of Program Content	
Theme	Illustrative Quotations
Useful curriculum content	
Culture shock	<i>“If you had a stroke, you got to reteach how to talk, how to walk, the basics. ...That's why culture shock is literally the first one...” -P13</i>
Jobs and conflict with authority	<i>“[“Jobs and Conflicts with Authority”] was one of the ones that stuck to me...you will go through that landing coming home. Needing a job, and now you have to deal with society, authorities...” -P8</i>
Relationships	<i>“The one that stands out to me is [about]...relationship[s]...People run into so many different things, because they're stuck in being this hard man...”. - P20</i>
Least Useful Curriculum Content	
Stigma & Profiling	<i>“Depending on what spectrum you in, the stigma or the profile ain't gonna be placed on you... I can go somewhere of just being Black and be profiled.” - P19</i>
Considerations for curriculum delivery	

<p>Content should not be scripted</p>	<p><i>“I think you have a time to street talk ... if it's too structured...They're gonna tell you what you wanna hear....” -P5</i></p> <p><i>“I think [as] long as it's real, long as it's authentic... I wouldn't want scripted...it's okay to, maybe say a curse word, it's okay to, like, express yourself... just raw...” -P2</i></p>
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Table 5. Participant Perceptions of Program Facilitator

Theme	Illustrative Quotations
Utilizes past relationships to recruit	<p><i>“ Out of prison, we would go to the VOTE meetings [Advocacy group for incarcerated people] and stuff like that. [The FIPS Group Facilitator] told me he was about to start this group...” -P1</i></p> <p><i>“...A lotta guys that, that I was formerly incarcerated with...was having a get together...I seen [FIPS Group Facilitator] over there, and he told me about the group and everything... And that's how I started going.” -P5</i></p>
Lived Experience & Respect	<p><i>“You want to hear it from somebody who went through the hell and made it... It's hard to get it from some kid that just got a degree and just know some big words.” -P13</i></p> <p><i>“I think it's respect. I think when they see [FIPS Group Facilitator],...They want to speak truth.” -P13</i></p>
Each facilitator has unique strengths/experiences	<p><i>“...Giving other guys opportunities to facilitate uh, the session or the meetings, uh, it would be like, putting them in a position to understand and appreciate how to become leaders...” -P15</i></p> <p><i>“...You learn different things from different people....Something may go off because that person said something, as opposed to [FIPS Group Facilitator].</i></p>

	<i>He'd been there, he's been doing that, right?" - P16</i>
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Table 6. Theme 1 – Belonging and Common Bond

Theme	Illustrative Quotations
<p>Re-establishing relationships from prison</p>	<p><i>“[Many FIPS Group participants] didn't even talk to each other in Angola. But now, (laughs), they talking like, you'd think that all of us was real close in Angola...” -P18</i></p> <p><i>“...We reconnecting in the group that I was in prison with, like [FIPS Group Member 1] you know? You know he's a total different person out of prison.” -P9</i></p>
<p>Acceptance</p>	<p><i>“...People who 's out now can actually talk to other people who 's out...Sometimes it's hard when you try to speak to, like, even your family...They don't really understand. It's like people who go to the military, you know? They have a common bond.” -P5</i></p> <p><i>“[Group] is very therapeutic... when you can share a same experience with someone that others cannot share with.” -P20</i></p> <p><i>“If you feel comfortable in my presence that in itself is a form of therapy ... if you always tense and you can't get along with anyone..” -P14</i></p>

<p>Vulnerability</p>	<p><i>“The open communication is, it keep me coming back and it allows me to, um, uh, relieve a lot of things...that I can't discuss outside the group...” -P1</i></p> <p><i>“After years... of supressin' your feelings because in prison you got punished once you expressed your own thing...When somethin' triggered, you don't know how it's gonna come out. So if we're gradually expressin' it then, you know, the explosion may not be as bad...” -P14</i></p> <p><i>“...People are gonna accept me for who I am, where I can express myself and not worry [about] being judged, you see?” -P15</i></p>
<p>Sharing relatable experiences</p>	<p><i>“..You get a chance to actually be around individuals who are...dealing with some of the same issues... When you have the chance to hear that, it just allows you to also understand that you are not alone...” -P19</i></p>
	<p><i>“Some people may not know how to explain what they're going through, but when they hear somebody else talking about it- it gives them a better idea of, ‘Oh yeah. man, I experienced that too.’” -P7</i></p>
<p>Motivating each other</p>	<p><i>“It's inspiring by just seeing their faces... It's good to see good people out here that's still living and getting fat and getting more gray hair in their face.. “ -P8</i></p>

	<p><i>“...Seeing how people are taking a negative thing from being incarcerated and turn it into a positive thing...it motivates me to push even more....” -P5</i></p>
	<p><i>“Because if this man succeed, he helps people who haven't made it ...because people can actually see that, that, that everybody coming from prison is, is not like they have defined them to be.” -P7</i></p>
	<p><i>“It kinda motivates me to push forward, to, to change the outlook for the next guy...[because]...the news...they don't ever say a lotta good things about people that have come home...” -P5</i></p>
Improved self-concept	<p><i>“Well, anyway, [other FIPS member] and, and this other brother, man, they expressed the appreciation of having [an] association with me. And that really stuck out for me, man.... I done something right...in assisting in their development.” -P17</i></p>
	<p><i>“She was basically saying that...we don't have to put ourself on a back burner or think that, don't make ourself feel less than others, ... 'cause we are some important people.” -P18</i></p>
	<p><i>“It made me know I was doing the right thing, and I've been doing the right thing.” -P8</i></p>

Table 7. Theme 2 - Teaching & Learning from Peers

Theme	Illustrative Quotations
Practical/informational support	<p><i>“...Giving you that information and let [you], network and meet people from different walks of life that can help you.” -P8</i></p> <p><i>“When I started doing my business and stuff, I said that would be a good thing to talk to dudes about in a group...” P5</i></p>
Stronger self-understanding	<p><i>“So...you're gonna rebel, if anytime you...feeling like you are being locked up again.” -P20</i></p> <p><i>“And listening to the people who figured it out...help these guys, you know, be like, ‘Oh man, I was having problem with my girl. All the while I thought it was her, but it was always me.’” -P7</i></p> <p><i>“So when [FIPS members] talk to each other, we...help each other see where all this came from and give you a better understanding of how to deal.” -P7</i></p>
Opportunity to give back/teach peers	<p><i>“I was able to... really concentrate on someone else... it actually helps me clear up the ball of confusion that I had going on within myself.” -P11</i></p>

	<p><i>“I love to be anywhere where I'm a asset, you know? So I feel like I'm a asset to the brothers, um, just returning home from incarceration.” -P13</i></p>
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Table 8. Theme 3 - Participation of those who have not been incarcerated is valuable

Theme	Illustrative Quotations
Enriches discussions	<p><i>“...I think that's a good thing because it allows people to understand ... the mindset of somebody who's been incarcerated a long time, but it also allows somebody who's been incarcerated a long time...to understand somebody who's never been incarcerated.” -P5</i></p> <p><i>“I think it's beautiful [when people who haven't been incarcerated participate in group], because it's a learning process....It's more questions. It keeps things more flavorful.” -P20</i></p>
Group helps loved ones understand FIPS better	<p><i>“... If you have someone that's been incarcerated that's close to you... and you come to the meeting you would understand that person more by listening to us in this group.” -P18</i></p> <p><i>“...I think that it's important that family... notice certain things that- that's not normal...It's mostly an incarcerated type of reaction...and understanding things where they can be a little bit more patient with their loved ones. Even advise them to seek counseling, you know, if they see certain things, triggering them...” - P7</i></p> <p><i>“When you dealing with somebody...that has the loved one that has been</i></p>

	<i>incarcerated. They...in a way subconsciously have been incarcerated.” -P19</i>
Making relationships with loved ones closer	<p><i>“It has a...strong effect on... my fiancée... We was on Zoom, and you know, she lay like right here under me [gestures toward arm]... she learned from me too... “ -P6</i></p> <p><i>“...So, I think it was really impactful on our relationship, just for her to understand that chapter in my life, and what's this designed for.” -P17</i></p>
Spreading awareness to health professionals of incarceration as a trauma	<p><i>“To try and get... people in positions, especially medical people, to understand and... to treat Post Incarceration Syndrome the same way they would treat PTSD.” -P3</i></p> <p><i>“[FIPS group]... should be open [to doctors, students, social workers] because you seeking help from people who never experienced these things. How they going to learn- understand what's going on- if they're not part of the conversation?” -P7</i></p>
Professionals can contribute their own expertise to group	<p><i>“I can speak from the position of a person who was incarcerated, but also at some point... I need to hear from a person who had this kind of expertise.” -P15</i></p> <p><i>“...you need somebody professionally to actually give them a solution. You know a possible alternative to react or give them a better understanding from what they hear from their knowledge.” -P7</i></p>

<p>Group helps reduce stigma</p>	<p><i>“...That's what drew me...because, you know, the perceptions of a...formerly incarcerated person by society is that they... the deadbeat of, of the s- s- society.” -P10</i></p> <p><i>“I like people...to...see that side of us: the good instead of hearing about on the news, the bad, you know?” -P1</i></p> <p><i>“...Somebody is on their side, not just mom or- or the brother, like, regular general people in society want to see you make it, they want to give you a second chance, you know. Because a lot of people feel that stigma's on their back. And like, you don't really have to wear that... -P13</i></p>