The WAVE model: A conceptual model for community-engaged research with partners who are formerly incarcerated

By

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A dissertation submitted in fulfillments of

the requirements for the degree of

Doctor of Philosophy

(Psychology)

at the

UNIVERSITY OF WISCONSIN-MADISON

2026

Date of Final Oral Examination: July 22nd, 2026

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DEDICATION

The friendships we built along the way — easily the highlight of this adventure.

ACKNOWLEDGEMENTS

The journey towards completion of this PhD has been formative, consuming, challenging and trying at times, and incredibly rewarding. Along the way, the support and encouragement of the following people made the process more enriching and meaningful.

Thank you to my family for their unfailing belief in my potential and willingness to lend an ear or shoulder as I navigated the rollercoaster that is graduate school. Thank you to my parents for their endless support and encouragement. Thank you to my brother, Ethan, for simultaneously cheering me on and lamenting the demands of academia with me. Thank you to my sisters, Leeyah and Orielle, for knowing and loving all of me and being my twin pillars without whom I could not stand. Thank you to Winny, my lovably weird and sweet cat, for making even the hardest days feel a little softer and never once asking about my dissertation progress.

Thank you to my friends for providing the incredibly necessary reprieve from schoolwork and reminding me of the importance of finding joy outside graduate school.

Thank you to Tatiana Ray and Edwin Bacalso for their instrumental insight on this project as members of the coding team and consistent encouragement throughout the process.

Thank you to the past and present members of the Incarceration and Mental Health Lab. To Madi Michels, my pseudo sister, for always being a sounding board, and for the banter and giggles that made everything more enjoyable. To Tatiana Ray, for her unparalleled perspective and for being a steady presence whenever I felt overwhelmed. To Karen McCoy, for her consistent support and for making the many hours spent working on the conceptual model figure more fun. To past graduate students for their sage wisdom and the strong foundation they cultivated in the lab.

An immeasurable thank you to our community partners with lived experiences of incarceration. Thank you for the opportunity to learn and grow together. Each of you have taught me the value of authenticity and never settling for anything less than your worth. I'd like to especially thank Deb, Aaron, Frank, Shanita, Craig, Thad, and Tamra; centering my dissertation on our collective work is more meaningful to me than I could put into words.

Thank you to my committee. To Mike, thank you for supporting me in charting my own research path and trusting me as I navigated the difficult balance between personal life and graduate school demands. To Sara, for her exemplary knowledge of and passion for qualitative research and for being a patient and caring mentor whose insight elevated this project considerably. To Dan, thanks for the open and honest conversations that expanded my thinking. To Kate, for her investment in my education and always asking thoughtful questions. To Cory, who consistently advocates for community engagement with conviction, passion, and intention.

Thank you to my therapist for helping me learn to care for all the parts of myself.

Finally, thank you to me for showing up, even on the days when it was hard to; for trusting the process even when the end felt far away and giving up felt like the easier choice; and for never losing sight of why this work matters.

A NOTE ABOUT LANGUAGE

The importance of utilizing humanizing language when referring to individuals with lived experiences of incarceration has been a topic of many meetings and conversations throughout our partnership. With a focus on centering humanity and blurring the separation between community and academic partners, the current work utilizes the following language, which incorporates input and feedback from community partners.

The phrase **community partner(s)** refers to partners with lived experiences of incarceration or partners who are formerly incarcerated. At times community partners may be referred to as partners with lived experiences of incarceration, partners who are formerly incarcerated, or individuals impacted by incarceration/the criminal legal system to emphasize the relevance and impact of involvement with the carceral and criminal legal systems. This language is intentionally person-centered, reflecting a commitment to recognizing individuals with lived experiences of incarceration as whole people whose identities extend beyond their time in prison, emphasizing that the individuals with lived experiences of incarceration are not defined by their time in prison. Utilizing this language was a deliberate decision to honor the humanity of the individuals whose stories are shared here.

The phrase **academic partner(s)** refers to partners who are researchers from an academic institution.

The term **partners** refers to all individuals in the partnership.

ABSTRACT

Research focused on increasing the effectiveness of mental healthcare in prison rarely incorporates the voices of people with lived experiences of incarceration. Through community-engaged research (CEnR), academic researchers and community members build equitable partnerships to address community-identified priorities for promoting health and well-being. Formerly incarcerated individuals offer unique insights based on retrospective, experiential knowledge of incarceration and reentry. Therefore, partnerships between formerly incarcerated individuals and academic researchers provide a powerful platform for addressing the needs of individuals impacted by the criminal legal system. Existing CEnR frameworks are a foundational resource for partnerships with formerly incarcerated community members. However, there is a critical need for a conceptualization of CEnR with formerly incarcerated individuals to supplement existing CEnR models, to reflect the unique experiences of individuals with lived experiences of incarceration. The current study aimed to fill this gap by developing a conceptual model for CEnR with community partners who are formerly incarcerated grounded in an in-depth exploration of real-time partnership dynamics and incorporating relevant context specific to lived experiences of incarceration. The study had three aims. Aim 1 demonstrated that the partnership analyzed in this study was of high-quality based on established metrics of success (e.g., trust, mutual respect, shared power). In Aim 2 three themes were identified through a hybrid, codebook thematic analysis to describe partners' experiences in the partnership: (1) Building a Safe Space, (2) "It's always going to be about what we do," and (3) "Transformational work for every person in the room." In Aim 3 the WAVE model was built by expanding the three themes into partnership commitments, each integrating context specific to carceral experiences and published recommendations from community-academic partnerships

with formerly incarcerated individuals. The three commitments of the WAVE model emphasize the importance of building a safe space for partners to be vulnerable and authentic, cultivating a collective we within the partnership, and expecting and embracing transformation. The WAVE model is intended to be used as a tool to promote trusting, meaningful, and equitable partnerships, ultimately enhancing efforts to effectively address health inequities and increase the well-being of people impacted by the criminal legal system.

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CHAPTER 1. INTRODUCTION

The U.S. carceral system faces challenges in need of more effective solutions. The system itself, from sentencing through community supervision, costs the government and the individuals involved roughly $182 billion annually (Wagner & Rabuy, 2017). In prison there are high rates of mental health problems (Al-Rousan et al., 2017), suicide and self-harm (Favril et al., 2020), substance use (Fazel et al., 2006; Simpler & Langhinrichsen-Rohling, 2005), and physical and sexual victimization (Caravaca-Sánchez et al., 2023; Maruschak & Buehler, 2021). The mental health of incarcerated individuals is a topic of ongoing research and policy efforts (Freudenberg, 2002; Megari & Argyriadou, 2025; Prison Policy Initiative, 2026). Whereas 23% of the general population experience mental health challenges (National Alliance on Mental Illness, 2023), 48% of incarcerated individuals are diagnosed with a mental health disorder (Al-Rousan et al., 2017). Incarcerated individuals with mental health issues experience increased challenges during incarceration beyond their symptomatology, such as solitary confinement placements (Chadick et al., 2018; Dellazizzo et al., 2020; Henry, 2022; Moore et al., 2023; Ryan & DeVylder, 2020), physical and sexual victimization (Kolodziejczak & Sinclair, 2018), and suicidal ideation or behavior (Kolodziejczak & Sinclair, 2018; Suto & Arnaut, 2010). However, they often receive inadequate care, such as the use of solitary confinement as a solution to mental health crises and delayed service delivery (Cohen et al., 2020; Olley et al., 2009; Reingle Gonzalez & Connell, 2014). These gaps in care are often a result of mental health staff shortages, high staff turnover, limited availability of treatment programs, lack of patient-centered or preventative care, and challenges building trust and rapport between incarcerated individuals and clinicians (Canada et al., 2022; Harner et al., 2025; Howerton et al., 2007; Kolodziejczak & Sinclair, 2018). With these ongoing challenges, investing in more effective solutions to address

health inequity and meet the unique mental healthcare needs for people impacted by incarceration is critical.

Most research aimed at increasing the effectiveness of mental healthcare in prison has not incorporated the perspectives or voices of people who have directly experienced poor mental health and the lack of quality mental healthcare during incarceration (Rutherford et al., 2024). Centering the experiences of these individuals presents the opportunity to leverage lived expertise to most effectively understand, target, and improve conditions and services within carceral facilities and following release. In accordance, Community Engaged Research (CEnR) is able to increase the effectiveness of interventions by incorporating this lived expertise to increase health equity and close the research to practice gap (Collins et al., 2018; Cooper et al., 2025).

CEnR brings academic researchers and community members together in mutually beneficial and equitable partnerships to address the expressed priorities of communities. Through these partnerships, community partners' voices are actively incorporated into the research that directly impacts their lives and their community (Collins et al., 2018; Israel et al., 2005; Minkler, 2005; Strand et al., 2003). By respecting and prioritizing community input, expertise, strengths, and skills, researchers recognize community members as valuable contributors to the research process (Collins et al., 2018). CEnR stands on several principles including dismantling power structures to equitably share power, honoring both academic and lived expertise, engaging community partners in every phase of the research process, and building community capacity (Anderson et al., 2025; Collins et al., 2018; D'Agostino et al., 2024, 2025; Jagosh et al., 2015; Mikesell et al., 2013; Strand et al., 2003). Moreover, building and maintaining trusting and respectful relationships is at the core of CEnR partnerships; these relationships are the

foundation for achieving impactful and meaningful research (Christopher et al., 2008; Collins et al., 2018; D'Agostino et al., 2024, 2025; Jagosh et al., 2015; Mikesell et al., 2013; Mohamed et al., 2022).

The quality of community-academic partnerships is reflected in both the partnership process and its outcomes and impact (Eder et al., 2018; Luger et al., 2020). The partnership process should align with CEnR principles, particularly actively building strong relationships and community capacity, seeking and incorporating community input, and establishing an equitable partnership (Hacker et al., 2012; Luger et al., 2020; Martinez et al., 2018; Oetzel et al., 2015). Partnerships that demonstrate equitable CEnR are characterized by commitments to the development and maintenance of deep relationships and group dynamics that reflect trust, respect, communication, and collaboration (Hacker et al., 2012; Luger et al., 2020). Moreover, a critical aspect of the partnership process is reflected in the development of partnership synergy (i.e., collaboration among all partners) through shared goals, values, and decision making across partners (Luger et al., 2020; Oetzel et al., 2015). The quality of the partnership process is also demonstrated by satisfaction with the organization and structure of meetings and leadership effectiveness (Luger et al., 2020). The outcomes and impact of the partnership should include systemic changes (Luger et al., 2020; Oetzel et al., 2015), community partners' satisfaction with the partnership (Luger et al., 2020), increased community capacity (Israel et al., 2005; Luger et al., 2020; Oetzel et al., 2015), strong community-academic relationships (Luger et al., 2020), increased relevance of research findings (Martinez et al., 2018), community empowerment (Luger et al., 2020; Milton et al., 2011), sustainability (Hacker et al., 2012; Israel et al., 2005; Oetzel et al., 2015), continued engagement, dissemination of findings, ongoing funding (Eder et al., 2018; Luger et al., 2020), and long-term improvements to community health (Luger et al.,

2020; Oetzel et al., 2015). Although how and the degree to which partnerships are assessed varies, the importance of monitoring, reflecting on, and evaluating the quality of partnerships remains clear (Brush et al., 2011; Luger et al., 2020; Martinez et al., 2018).

By successfully embodying the aforementioned qualities and centering community voices in research, CEnR has contributed to advancing health equity of historically minoritized populations (Cooper et al., 2025; Cyril et al., 2015; Ortiz et al., 2020). Community-academic partnerships have addressed community issues across many domains including developing and promoting harm reduction strategies related to gun violence (Maness et al., 2024) and drug use (Kapler et al., 2025), designing solutions to food access challenges (Anderson et al., 2025), educating the public on homelessness and developing and disseminating services for people who are unhoused (Canham et al., 2024), promoting COVID-19 testing and treatment access (D'Agostino et al., 2025), and developing and implementing programs that are culturally and contextually relevant to specific communities (Bornheimer et al., 2025; Lachter et al., 2022; Mercado et al., 2024; Rhodes et al., 2024). Furthermore, CEnR has driven positive, meaningful, and lasting change for communities by garnering media attention for and raising public awareness of community issues (Bornheimer et al., 2025; Maness et al., 2024); informing and directly impacting policy (Wallerstein et al., 2020); increasing the relevance of research, thereby increasing the effectiveness of clinical trials (Cooper et al., 2025); and facilitating greater community access to services (Zanjani et al., 2025). Given the significant health-related improvements evident through CEnR, this approach is well suited to address challenges faced by individuals involved in the criminal legal system as a community experiencing health inequities, particularly with regard to mental health.

CEnR with *formerly* incarcerated individuals is a promising approach to address mental and behavioral health inequities for individuals with lived experiences of incarceration. Formerly incarcerated individuals possess the knowledge and experience of incarceration and do not face the same acute restrictions on participating in research that often limit engagement efforts with currently incarcerated partners. CEnR with currently incarcerated partners has faced logistical limitations, such as inflexible meeting constraints and limitations on access to the internet, data, and analytical software (Haverkate et al., 2020); and systemic challenges, such as inherent power differentials, prison staff/administration knowledge of CEnR and overall buy-in (Johnson et al., 2018), and issues of confidentiality and disclosure. Given the role that the carceral institution plays in regulating incarcerated individuals' ability to engage in the research process, some research groups have not been able to engage with incarcerated individuals at all, as they were unable to obtain permission to engage from local Departments of Corrections (DOC; Watson, 2015; Watson & van der Meulen, 2019). Furthermore, unlike currently incarcerated individuals, formerly incarcerated individuals are no longer directly exposed to the prison environment, thus offering unique insights into addressing health inequities within their communities, grounded in retrospective, experiential knowledge of incarceration and successful navigation of reentry (Motherall, 2006; Nguyen et al., 2025; Troshynski et al., 2025; Watson & van der Meulen, 2019). CEnR with formerly incarcerated individuals has contributed to improved health equity through services designed to support formerly incarcerated individuals including the development of preventative health tools (O'Gorman et al., 2012), manualized substance misuse services (Smith & Jemal, 2015), and training for healthcare professionals to deliver trauma informed care to people experiencing reentry (Szkodny et al., 2025). Moreover, partnerships with formerly incarcerated individuals have addressed health concerns of currently incarcerated

individuals (Osman et al., 2024) and those preparing to leave prison (McLeod et al., 2020). The increased interest in CEnR with formerly incarcerated individuals necessitates the development of resources and guidelines to support these partnerships.

The utility and importance of guidelines and best practices for conducting CEnR has gained recognition with publication of general guidelines and those tailored to specific populations (Bazzano et al., 2023; D'Agostino et al., 2025; Forrester et al., 2025; Goodman et al., 2018; Israel et al., 2005, 2026; Jagosh et al., 2015; Parker et al., 2020; Tran et al., 2025; Wallerstein et al., 2020). These guidelines have strengthened the quality of partnerships and enhanced the relevance and impact of research (Parker et al., 2020). Guidelines tailored specifically to partnerships with individuals involved in the criminal legal system include a brief published by the Urban Institute and didactic training modules generated by a community-academic partnership (University of Minnesota Community Research Council, Beck, Osman, & Shlafer, 2025). Similarly, scholars engaged in partnerships with formerly incarcerated individuals have published insights, reflections, "lessons learned," recommendations, considerations, and techniques for meaningful engagement based on their experiences (Cohen et al., 2025; Gaber et al., 2024; O'Gorman et al., 2012; Osman et al., 2024; Smith & Jemal, 2015; Taylor et al., 2018).

Conceptual models are a widely utilized tradition in CEnR as a method for synthesizing and articulating a holistic picture of community engagement principles (Cacari-Stone et al., 2014; Israel et al., 2026; Killam et al., 2026; Kliskey et al., 2021; Mikesell et al., 2013; Oetzel et al., 2015, 2018; Organizing Committee for Assessing Meaningful Community Engagement in Health & Health Care Programs & Policies, 2022; Wallerstein et al., 2008, 2020). Compared to insights and lessons learned, which can be impactful but limiting in their project specificity, a

conceptual model provides a high-level, evidence-based synthesis of concepts to present a framework for understanding the concepts, their relationships, and their systemic and historical relevance (Cacari-Stone et al., 2014). For example, CEnR principles, such as trust and power sharing are valuable on their own, however, CEnR conceptual models provide clarity on the ubiquitous nature of trust and interplay between trust and power sharing (Wallerstein et al., 2020). Moreover, conceptual models offer an opportunity to integrate and consolidate existing knowledge, as well as elucidate the contextual factors that influence partnerships. Additionally, while general CEnR principles and models are essential to partnerships, communities can be diverse in their lived experiences and therefore, may have population-specific characteristics that warrant population-specific partnership considerations. These considerations take into account historical, social, and cultural context specific to lived experiences of the community to promote equitable partnerships (Wallerstein et al., 2020).

Despite the utility of existing general and population-specific resources for CEnR, there is a critical need for a conceptualization of CEnR with formerly incarcerated individuals that reflects the unique context and relevance of partnership principles derived from individuals' experiences in a partnership (Taylor et al., 2018). Therefore, the current work serves to fill this gap by developing a conceptual model for CEnR with formerly incarcerated individuals. Additionally, whereas the information gleaned in lessons learned or recommendations are primarily based on retrospective reflections of partnership experiences, which limit the evaluation of community engagement processes (Smith & Jemal, 2015), the present conceptual model was developed from an analysis of the meetings themselves, allowing for an exploration of real-time partnership dynamics. Drawing from an in-depth qualitative exploration of the development of a partnership, the model aims to provide the essential characteristics that

promote high quality partnerships with formerly incarcerated individuals. Formerly incarcerated individuals have been subjected to exploitive research practices (Coughlin et al., 2016) and faced discrimination and stigma (Quinn-Hogan, 2021) and as a result of past harms, can be untrusting of institutions (Osman et al., 2024). Therefore, evidence from a high-quality partnership can provide academic researchers with information and considerations for navigating these partnerships thoughtfully and without perpetuating harm.

The Current Study

The current study analyzed a partnership that involved a community advisory board (CAB) of individuals who are formerly incarcerated and academic researchers to develop the conceptual model. The analysis was guided by the following research question: What do the experiences of formerly incarcerated individuals and academic researchers in a community-academic partnership reveal about unique considerations for community-engaged research with formerly incarcerated individuals? To address this question, the current study had three aims: (1) assess and determine the quality of the present community-academic partnership, (2) understand and conceptualize the experiences and perspectives of individuals in this particular community-academic partnership that contributed to the quality of the partnership, and (3) develop a conceptual model, building on Aim 2, for CEnR with formerly incarcerated individuals. The evaluation in Aim 1 scaffolded Aim 2 by demonstrating the quality of the partnership from which we explored the experiences of individuals in the partnership as the foundation for a conceptual model. Therefore, the relative depth of analysis varied between aims, with the core analysis in Aim 2. To accomplish the first aim, a quantitative measure of partnership success, community partners' reflections of the partnership, and partnership outcomes were evaluated. To accomplish the second aim, a hybrid codebook thematic analysis, specifically Template

Analysis, of CAB meetings over a two-year period was conducted. To accomplish the third aim, findings from the thematic analysis were further conceptualized and contextualized, as well as integrated with published recommendations for partnerships with formerly incarcerated individuals, to form the conceptual model. As a supplement to existing CEnR models, the conceptual model developed here provides practices relevant to and reflective of the unique experiences of individuals with lived experiences of incarceration to support equitable, respectful, and trusting partnerships with formerly incarcerated community partners.

CHAPTER 2. GENERAL METHODS

Community Advisory Board on Incarceration and Mental Health

In 2022, our research group received the *Engagement Award: Capacity Building* from the Patient Centered-Outcomes Research Institute (PCORI). The goal of the project was to build capacity for research on mental health and incarceration through the development of a community-academic partnership and research collaboration. The PCORI award afforded us the opportunity to establish and sustain a partnership between academic researchers and community members with lived experiences of incarceration. Through this partnership we aimed to identify important research outcomes, identify community partners' perspectives on barriers and facilitators to adequate mental healthcare and stakeholder-engaged research in prisons, and develop a research agenda on mental health and incarceration.

During the three years prior to the project, academic researchers, including the PCORI project's principal investigator (PI) and co-principal investigator (co-PI), developed strong personal and professional relationships with two community members with lived experiences of incarceration. The process of building these initial relationships is described in Cohen et al. (2025). As a result of the strong relationships, these two community members served as the initial bridge of communication and trust between academic researchers and the community (i.e., bridge community partners). The value of bridge community has been widely understood to contribute to meaningful community engagement, especially with formerly incarcerated partners (Awenat et al., 2018; Cohen et al., 2025; Taylor et al., 2018). In our partnership, the established relationships were built on mutual respect and trust, which laid a foundation for the creation of a CAB. As the bridge between academic partners and community members, bridge community partners created a safe space for new relationships to develop and the partnership to flourish.

CABs provide a structured platform for community members to share experiences, express concerns, and provide guidance to promote research that is relevant to and respectful of their communities (Newman et al., 2011). This platform lends to the development and maintenance of equitable community-academic partnerships (Cooper et al., 2025; Kapler et al., 2025; Osman et al., 2024; Saleh et al., 2022; Smith & Jemal, 2015). Collaboratively, we identified community perspectives on barriers and facilitators to mental healthcare in prison, as well as co-developed an agenda for research on mental health and incarceration based on community-identified priorities, including relevant research outcomes to measure, to inform future research endeavors.

Recruitment and Consent

We obtained approval from the University of Wisconsin, Madison Institutional Review Board to conduct this research project. Purposive sampling was used to select CAB members who had direct experience with incarceration. In line with CEnR practices (Cohen et al., 2025; De Las Nueces et al., 2012; Israel et al., 2005; Taylor et al., 2018), recruitment of CAB members was conducted by the bridge community partners. The bridge community partners contacted peers with diverse lived experiences of incarceration to create a CAB of individuals who varied across their religion, race, cultural background, age, criminal history, and carceral experience. We completed informed consent with the CAB members, all of whom were compensated for their time and expertise.

CAB Members

Academic Partners. The four academic researchers included the project's PI, a Research Assistant Professor, a graduate student, and a research coordinator. Dr. Koenigs (MK), the PI and a Professor at the University of Wisconsin-Madison, received his PhD in Neuroscience and

his research centers the lived expertise of community partners to overcome barriers to mental healthcare in prison and to provide effective well-being promoting services to currently and formerly incarcerated individuals. Dr. Grupe (DG) received his PhD in Psychology and is a Research Assistant Professor at UW-Madison's Center for Healthy Minds, wherein he partners with formerly incarcerated individuals to develop and implement mindfulness initiatives for people involved in the criminal legal system. Mickela Heilicher (MH), a PhD student in the Psychology department, has completed their Master of Science in Psychology and a graduate certificate in Community Engaged Scholarship. Through community-academic partnerships they center community expertise and voices to develop and implement mental health and peer support services for currently and formerly incarcerated individuals. Madilyn Michels (MM), the research coordinator, completed her undergraduate degree in Psychology. In her role, Madilyn coordinates several prison-based research projects and serves as a liaison with staff at the local DOC.

Community Partners. Community partners were recruited by the two bridge community partners, Aaron Hicks (AH) and Deborah Mejchar (DM). In total, six formerly incarcerated individuals and one person from a community organization that provides services to legal system involved individuals participated in the CAB meetings. Demographics were collected for these individuals, but not the individual from the community organization as they were part of the research team. In addition to the age, race, and ethnicity, other noteworthy demographics were identified by one of the bridge community partners, DM, such as: city of birth, total number of years incarcerated, and any involvement in providing services for individuals impacted by the criminal legal system.

Community partners were on average in their fifties, half were White and half Black/African American, incarcerated between two and three times, and served roughly 12 years in minimum to maximum state prisons (Table 1). All community partners were born in the Midwest (Illinois, Indiana, Ohio, Wisconsin) and currently live in the Midwest (Iowa, Wisconsin). Since the beginning of the partnership, none of the community partners have had any involvement with the criminal legal system. The majority of community partners currently provide peer support to individuals impacted by the criminal legal system.

Planning Committee. MK, AH, and DM established a planning committee to support the coordination and facilitation of the CAB meetings, which also included DG, MH, MM, and the individual from the community organization. The planning committee met prior to the first CAB meeting to establish a clear purpose for the project and between subsequent CAB meetings to debrief the previous meeting and plan for the subsequent meeting. During the planning meetings we reflected on the stories and perspectives shared in the previous meeting. Specifically, AH and DM shared reflections, considerations, and suggestions regarding previous and forthcoming meetings, which were documented by academic partners. This input was directly applied to and informed the topics of subsequent CAB meetings. Developing and maintaining trusting and respectful relationships during the planning meetings supported AH's and DM's role as a bridge between the academic researchers and other community partners.

CAB Timeline and Structure

The CAB held 20 meetings (typically occurring on the first Wednesday of every month) over a two-year period. Each meeting was co-facilitated by the bridge community partners (i.e., AH and DM) and an academic partner(s). The meetings typically followed a similar structure. Each gathering began with 30 minutes for dinner and organic, unstructured conversation. Then,

following a brief mindfulness practice to regroup, an academic partner or bridge community partner would provide a recap of the previous meeting, an orientation to the project goals, and pose a topic for discussion. Any individual could begin the discussion, and individuals responded dynamically to each other's contributions. We also utilized a talking piece to ensure that one person spoke at a time, and everyone had an opportunity to share. All meetings were audio recorded.

Over the course of two years, we discussed people's experiences with mental healthcare in prison, identified outcomes relevant to their experiences, and collaboratively developed the project products (Table 2). During the first meeting, MK and bridge community partners described the project and facilitated a discussion on people's experiences with mental healthcare in prison. In subsequent meetings we continued to discuss mental healthcare in prison, wherein community partners shared experiences such as their first interactions with psychological services staff or programs/treatment they participated in while incarcerated. These conversations included perspectives on what hindered or supported community partners' well-being and mental health while incarcerated. We also discussed the changes that community partners would have liked to experience in programs/treatment to inform potential research outcomes. Next, the planning committee put together a summary document of the themes from the previous meetings, which was brought to subsequent meetings with the full group and discussed in more depth. In the next several meetings we transitioned to proposing possible initiatives, services, and offerings for the prison setting that incorporated the themes (e.g., barriers and facilitators to mental health and well-being). We spent several meetings discussing the specifics of these initiatives, including the relevance and incorporation of peer-support. During the last several meetings we collaboratively developed two project products required by PCORI: a summary

report and research agenda for mental health and incarceration (Heilicher et al., 2026b) and a "toolkit" for conducting patient centered outcomes research in the prison setting (Heilicher et al., 2026a). Based on the meetings, I identified the value and contribution of a toolkit of lessons learned from our partnership that would benefit community-engagement efforts with individuals who are formerly incarcerated.

Throughout the process of writing and revising the toolkit product, I recognized that our collaboration held more insight than could be retrospectively recalled and there was substantially more to learn from our experiences. This realization prompted a desire to conduct a rigorous qualitative analysis of our meetings to understand our experiences more deeply, especially those that contributed to the meaning and impact of the partnership, to support other partnerships.

Researcher Positioning

I entered this study as a deeply embedded member of the partnership that I sought to explore. Having been at nearly every meeting, I brought a familiarity with the meeting content as well as a rich and meaningful understanding of the immense impact of the partnership on everyone in the room. I experienced and witnessed vulnerability, laughter, tension, connection, and empowerment, all of which influenced what was said and how they were said. Throughout the experience I developed genuine, sustained relationships that extended beyond the project. Moreover, the relationships formed during the partnership have continued to grow and develop since the final meeting. Therefore, when listening to recordings and coding transcripts I could hear and see people who I deeply care about, which may have colored my interpretations. This relational component was an asset during interpretation of the data, as well as an opportunity to reflect on potential biases. My interpretation of the meeting content was influenced by my ability to situate their words within broader histories and conversations. On the other hand, this degree

of familiarity creates risks of making analytical conclusions that were not fully supported by the data. I remained as attentive as possible to these biases and utilized peers and mentors to review and challenge my interpretations.

My orientation to this work is influenced by the belief that knowledge and truth are context-dependent, and meaning is socially constructed, consistent with a social constructionist epistemology. Additionally, I was primarily trained in quantitative methods with a developing proficiency in qualitative research. While my knowledge of qualitative methods prior to beginning the analysis was significant, my proficiency in qualitative analyses deepened throughout the coding process. Early codes, analytical memos, and interpretation of the data were more broad, descriptive, and surface-level, and I experienced initial discomfort with ambiguity as my analytic skills grew stronger. Additionally, as I intended to complete this dissertation within a defined timeframe, I sought to balance depth and scope of the project.

I reflected on these positions on an ongoing basis, with particular consideration for my closeness to the individuals in the partnership and my passion for the work as a source of insight.

CHAPTER 3. AIM 1: ASSESS AND DETERMINE THE QUALITY OF THE PARTNERSHIP

Overview

The purpose of Aim 1 was to assess the quality of a community-academic partnership, involving a CAB of academic researchers and community partners with lived experiences of incarceration. Determining the quality of the partnership was a necessary preliminary step in building a conceptual model (Aim 3) from partners' experiences in the partnership (Aim 2).

Methods

The partnership was evaluated based on established metrics of partnership quality, which included both process and outcome measures (Table 3). The evaluation was guided by the Assessing Community Engagement (ACE) conceptual model (Organizing Committee for Assessing Meaningful Community Engagement in Health & Health Care Programs & Policies, 2022) and incorporates relevant principles and measures of success in published literature (Hacker et al., 2012; Israel et al., 2005; Luger et al., 2020; Martinez et al., 2018; Milton et al., 2011; Oetzel et al., 2015; Wallerstein et al., 2020). A comprehensive list of partnership characteristics, principles, and measures of success were identified from highly cited CEnR literature, such as Israel (2005) and Wallerstein et al. (2020), and via a review of empirical articles with a focus on measuring engagement and success in community-academic partnerships. The ACE model is a resource that establishes the features necessary for assessing the quality and impact of community engagement, with a primary focus on health equity outcomes (Organizing Committee for Assessing Meaningful Community Engagement in Health & Health Care Programs & Policies, 2022)[1]. Therefore, in conjunction with the list of principles

[1] The ACE model has been used to evaluate the quality of community engagement in CEnR (Chansky et al., 2026).

from the literature review, the core principles of community engagement at the center of the ACE model guided evaluation of the partnership process, while the "petals" of the model guided evaluation of partnership outcomes. The considerable number of metrics was refined by combining similar principles, differentiating between process and outcome measures, and ensuring that the principles reflected the project goals of building capacity for CEnR and co-creating an agenda for CEnR on mental health and incarceration (Milton et al., 2011; Oetzel et al., 2015). Ultimately, 13 principles across two domains comprised the process measures and 19 principles across four domain comprised the outcomes and impact measures.

The value of assessing community engagement and community-academic partnerships via quantitative and qualitative measurement has been established (Luger et al., 2020; Milton et al., 2011). Quantitative measures offer an evidence-based and validated method for discerning partnership quality that can be compared across partnerships and projects. However, some partnership characteristics cannot be distilled down to a single quantitative item, and therefore, qualitative evidence can provide clarity and nuance to quantitative findings (Luger et al., 2020). Additionally, the reflections of partners may suggest partnership elements that are missing from quantitative measures (Luger et al., 2020). Therefore, partnership quality was measured via a quantitative self-report measure completed by community partners, as well as quotes demonstrating community partners' perceptions of the partnership and partnership outcomes.

Quantitative Evidence

During our final meeting, community partners with lived experiences of incarceration were asked to complete the Quality of Patient-Centered Outcomes Research Partnerships (QPCOR) instrument (Fortuna et al., 2021) as a tool for self-evaluation and critical reflection of community engagement within our partnership. This measure was chosen as it is designed for

partnerships focused on mental health and the items closely reflect the project's goals of increasing the quality of community engagement in our work (K. L. Fortuna et al., 2021; Milton et al., 2011). The QPCOR is an 11-item measure designed to assess academic-community partnerships. Items with a score of six or lower indicate a need for improvement. Based on feedback from individuals the bridge community partners, items were modified to include language more reflective of our partnership and two items were each split into two items so that each item referred to community partners and academic partners separately[2] (see Appendix A for the modified measure). Given that our measure included 12 items, scores could range from 0-120.

Qualitative Evidence

After completing the QPCOR, community partners were given space to share and reflect on their answers. The transcript from this meeting, as well as other meetings in which all partners reflected on their experience in the partnership were reviewed for supportive and contradictory evidence of partnership quality.

Results

Partnership quality was evaluated based on established metrics of partnership success (Table 3), which included key domains (bolded below) and principles (underlined below). Five of the six community partners completed the QPCOR. The sixth community partner did not complete the QPCOR as he was unable to attend that meeting. All partners had the opportunity to reflect on the partnership during the meetings. On average, the community partners reported

[2] Across all items the phrase "research study" was changed to "research project." Items 3 and 6 of the published QPCOR (K. L. Fortuna et al., 2021) are identical, and therefore, one was removed. A statement was added to inquire about language used by peers based on item 8 of the published QPCOR, which concerned language used by researchers. Item 9 ("Both community partners and researchers are thinking of ways we can continue to work together in the future.") was modified and split into two items — one statement addressing community partners' roles and the other for researchers' roles.

that the partnership was of high quality (M = 117.6, SD = 2.07; Table 4). Evidence of all 13 process principles and 19 outcomes and impact principles was established.

Partnership Process

All community partners praised the trust and mutual respect among the group. Trust during the partnership process was demonstrated by partners sharing personal and vulnerable stories, and willingness to challenge each other. For example, community partners shared stories about experiencing the death of loved ones while incarcerated. Another community partner described the trust dynamic in the partnership when they shared, "I've been challenged many times in this room, to self-reflect, but it was built on the ability that we trust and love each other" (Partner 10, Meeting 18).

The exchange of knowledge was bi-directional with all community partners endorsing that "Researchers were knowledgeable about people like me or were willing to learn about people like me," (QPCOR item 3, M=10).

Ensuring a representative, diverse, and inclusive space that acknowledged community partners as valued experts was foundational to the partnership. All community partners reported feeling accepted by academic researchers (QPCOR item 5, M=10). Additionally, one of the bridge community partners who led recruitment chose to bring together individuals with diverse racial and socio-economic backgrounds and carceral experiences.

Community partners felt the partnership was culturally centered with researchers (QPCOR item 6, M=9.6) and peers (QPCOR item 7, M=9.6) using language consistent with their values and culture. The project was equitably financed through the PCORI Engagement Award: Capacity Building grant and community partners were compensated for their time and expertise.

Additionally, multiple forms of knowledge and expertise were valued and honored (principle: multi-knowledge). This dynamic was articulated well by a community partner who shared,

> The power was shared based on, y'know, encouraging people to share what they could. And then not only that, but people were able to decipher what a person had to offer, y'know, and I mean, that's a skill in and of itself is bein' able to decipher what a person has to offer, and you have to understand 'n respect that person's values as well. So, there's a lot of respect comin' in the door. And, and when you start doin' research in the community, you know, to show respect, and also receive respect, you have to let go of a lot. (Partner 8, Meeting 18)

This reflection also demonstrates the sharing of power throughout the partnership process. The partnership space was collaborative, and decisions on project direction and meeting topics were shared between community and academic partners (principle: shared governance). For example, the meetings involved collaborative conversations, wherein community and academic partners engaged back and forth to determine the priorities for mental health offerings in prison that were included in the project products. Additionally, community partners reported that they understood the purpose of the project (QPCOR item 1, M=9; principle: communication) and endorsed feeling comfortable engaging with academic partners (QPCOR item 8, M=10; principle: communication). To this day the partnerships are ongoing, with academic partners actively involved in community initiatives and community partners serving as collaborators on research initiatives. For example, we co-wrote and submitted a grant to develop and deliver a peer support group for reentry and community and academic partners are collaborating on multiple subsequent grant-funded projects.

Community partners felt listened to (QPCOR item 2, M=9.8) and that their views were incorporated into the research project (QPCOR item 9, M=10). They felt that their input played an integral role in the partnership (principle: seeking and integrating community input). One community partner expressed, “Without our input, without each one person contributing something along that line, it [the project outcome] woulda never happened” (Partner 3, Meeting 18). This dynamic fostered a sense of mutual respect among partners, especially as it related to respecting the experiences and expertise of community partners, and valuing everyone as human beings. In describing how different this partnership felt, a community partner described feeling respected:

> This is not typical research, but this should actually be what research looks like. This is what it should feel like. People should all walk away feeling like, ‘Man, I- I don't feel like nobody took advantage of me. You wasn’t over my head or under my head. You wasn’t tryin’ to treat me. I left up outta there feeling like a person. I still, I have my humanity,’ right? (Partner 9, Meeting 18)

The partnership dynamics reflect partnership synergy wherein human connection, investment in affecting change, and collaboration fostered shared values and the sense of community. A partner described this well when she said:

> And it just it just shows how powerful it is when people come together and each everybody shares their own perspective and their own skills, strengths, skills and strengths in the space. And then you put all those together for synergy and its magic. (Partner 12, Meeting 19)

Outcomes and Impact

Strengthened Partnerships & Alliances. Community and academic partners developed strong relationships over the two years. For instance, the strength of the relationships was evident in a community partner's expression of gratitude: "I thank you all for the love and the passion that you bring, and we wouldn't be who we are without that. And I appreciate everybody's honesty and willingness. And I just love y'all" (Partner 10, Meeting 17). Through these relationships community partners have expanded their network of partnerships to other research groups (principle: partnerships and opportunities). Community and academic partners expressed that the partnership benefitted them personally and impacted the work they do outside the partnership (principle: widespread benefits of the project). For example, one community partner shared, "What I did here is gonna be impacting the other stuff that I do. So, each one o' you, a part of you will be with me because it changed me getting' to know you all" (Partner 8, Meeting 20).

Community partners' invaluable contribution and expertise were acknowledged, recognized and respected through co-authorship on project products and co-presenting to disseminate our work (principle: acknowledgement, visibility, recognition). For example, two community and two academic partners attended the Academic Consortium on Criminal Justice Health 2025 annual conference to co-present on our experiences in the partnership.

Partners shared a commitment to sustaining partnerships. All community partners reported that academic researchers and community members were committed to exploring avenues for future collaboration (QPCOR items 10 and 11, M=10). Partnerships have been sustained through multiple other community initiatives and research projects (principle: sustained partnerships).

The partnership was mutually beneficial and valuable, as well as exceeded the expectations of community partners. They described the partnership as "life changing." One community partner shared the following:

> You've all changed my life for the better. I just, I love it, I got goosebumps. It's just crazy to me that you carry yourself in such a way. You live yourself, live your life in a good way. Like you change people's lives, and you don't even know it. You know, that is why I'm here. (Partner 4, Meeting 16)

Not only was there trust throughout the process of developing the relationships in the partnership (see Partnership Process section), but trusting relationships (principle: trust) were an outcome of the partnership. For example, in reflecting on their experiences in the partnership, one community partner shared:

> I felt so trusted, even more than I already thought I was trusted. I felt valued throughout the two years. What really made me like really happy is because people from different lanes – I watched everyone value each other more and more every month. I mean, you could just, you couldn't miss it. And we all tried to leave a lot on the table each time, that's what we were here for. [...] But when those people, then care about each other, I mean, that's just the best, and respectfully care about each other. (Partner 5, Meeting 20)

As an outcome of the partnership, partners felt that the partnership embodied shared power due to selflessness and vulnerability at an individual level, as well as the group's willingness to bring everyone into the conversation and meaningfully integrate everyone's perspectives. This dynamic was articulated well by a community partner who shared,

> I don't know if another group of people would've been able to get what we have gotten and been able to share, and what will be the end result of this […] I don't feel like anyone

> was ever selfish. We might've been, you know, really eager to share and get involved, but I don't think anyone was ever selfish […] it was like always somethin' that we were tryin' to do together. (Partner 8, Meeting 18)

Moreover, community partners described that "there were no egos in the room," and that they believed they had a choice in how to engage with the project (QPCOR item 4, M=9.8). Partners expressed that decisions were made collaboratively and collectively, creating a sense of co-creation.

In terms of structural supports for community engagement, community partners were compensated for their participation in the 20 CAB meetings and since the final meeting, we received two additional grants to support continued collaboration. In fact, there are several ongoing projects involving community and academic partners and the co-creation of research initiatives.

Expanded Knowledge. The partnership expanded knowledge by developing resources to support research concerning incarceration and mental health and enhance community engagement in other partnerships (principle: new curricula, strategies, and tools). We co-created a Summary Report and Research Agenda on Mental Health and Incarceration detailing the project, barriers and facilitators to mental healthcare in the prison setting, and potential mental health offerings or initiatives. We also co-developed a toolkit for CEnR with individuals impacted by the criminal legal system detailing lessons learned and recommendations based on our experiences in the partnership. Both final products were made available to all partners and formatted to ensure community accessibility (principle: community-ready information). The collaborative work and co-generation of knowledge facilitated bi-directional learning. For example, a community partner shared, "It's just been a good experience. It's been a teaching

experience […] I think I've learned more than I bargained out for […] But I think it's been mutually the same" (Partner 9, Meeting 19).

Improved Health and Health Care Programs and Policies. We identified actionable solutions to community-identified priorities, which are available on the lab's website and PCORI's database of grant products and were distributed to all community partners (principle: community-aligned solution; actionable, implemented, recognized solutions; sustainable solutions). Moreover, all projects and initiatives from our research group going forward have been informed by the priorities, considerations, and perspectives shared in the CAB meetings. Community partners emphasized the impact of the collaboration on the health and well-being of individuals impacted by the criminal legal system. For example, one community partner reflected on the novelty and significance of the partnership:

> You know, the fact that we sit here with you guys [UW researchers] being who you are is very cutting edge and very, you know, progressive. You know, to say the least. This is something that's like- this is like next world type stuff. You know what I'm saying? Next level type stuff. You know, these type of things, this is what's gonna shape the future of incarceration. (Partner 8, Meeting 13)

Community partners also shared how our partnership established practices and sustainable solutions for addressing mental health challenges in prison that will lead to meaningful change in the lives of people with lived experiences of incarceration. A community partner described this meaningful change when they said,

> So, this is going to be huge […] just imagine if we could have had this when we were there [prison]. Like, I know I wouldn't have come out as fucked up as I came out […] just to be able to come out a little more whole. (Partner 3, Meeting 9)

Thriving Communities. The partnership products are intended to enhance mental health resources for incarcerated populations (principle: physical and mental health). The partnership involved building community capacity and connectivity by strengthening individual and group skills and knowledge. In particular, the partnership helped build the capacity for community partners to establish a non-profit organization. Our ongoing relationships have fostered new opportunities for the community partners and their organization. For example, through our research group's collaboration with the DOC, they have begun a partnership to provide a peer support group for incarcerated individuals in segregation. Their organization has also partnered with the University of Wisconsin-Madison's department of Extension, and they have been invited to be the keynote speaker at the Wisconsin Peer Recovery Conference. Moreover, community partners reported that they felt prepared to be an equal partner in a research project moving forward (QPCOR item 12; M=9.8), demonstrating an increase in community capacity to engage in research.

Our collaborative work also contributed positively to the greater community. For example, with the support of academic partners (e.g., assisting with university and scholarship application materials and facilitating a connection with department chairs), a community partner's grandson received a full ride to a four-year university. Additionally, the experiences and knowledge gained throughout the partnership have informed community partners' work providing support for incarcerated individuals. For example, a community partner is using a curriculum we co-developed to support the peer work she is doing in the community. Additionally, through our partnership community partners have had the opportunity to build their capacity for providing trauma-informed care in their roles as Certificated Peer Specialists. One of

these community partners shared the following about the impact of the partnership on their life and work (principle: community capacity; community power):

> Now, I - did I have passion? I've been home 23 years. Of course I had passion. It drove me. But I never had the breath. I did not have the breath to pour in. I didn't have enough on my own to pour into new things, right? To ideas. I didn't know how to – if I did, I didn't know how to communicate them correctly … not to a person who doesn't understand the way I communicate all of those things. And this room of people has put breath into, I'm telling you, into everything I know that I do. (Partner 5, Meeting 13)

Partners were empowered and gained confidence in themselves, as well as confidence to seek out new opportunities in the community (principle: community power; community resiliency). The partnership was particularly empowering for one of the community partners who shared the following:

> This kind of allowed me to, to give me the confidence, like I said, to pursue other things that I've been wanting to do that kind of felt like, hmm, ain't nobody gonna listen to me. Or like, I don't know what the fuck I'm talking about, but I'm like, I have to know what I'm talking about. (Partner 3, Meeting 19)

Moreover, the partnership contributed to greater life quality and well-being. For example, a community partner shared, "For me, just, um, y'know, getting my batteries recharged once a month, hangin' out with all of you all, that's been my selfish gain" (Partner 4, Meeting 17).

Summary

In summary, evaluation of the present community-academic partnership demonstrated that the partnership was high-quality based on the partnership process and its outcomes. The partnership reflected core principles and domains of CEnR, such as strong relationships, power

sharing, and building community capacity. Having established the partnership's quality as high, partners' experiences in the partnership could be qualitatively analyzed (Aim 2) as the foundation for a conceptual model (Aim 3).

CHAPTER 4. AIM 2: UNDERSTAND THE EXPERIENCES OF INDIVIDUALS IN A COMMUNITY-ACADEMIC PARTNERSHIP

Overview

The purpose of Aim 2 was to understand partners' experiences in the community-academic partnership through a qualitative analysis of transcripts from the CAB meetings over a two-year period.

Methods

Qualitative Approach Rationale

This study is grounded in a social constructionist epistemology, which values individuals' subjective meanings of experiences (Creswell, 2007; Denzin & Lincoln, 2005). The study also draws from a conceptual framework based in CEnR principles (Israel et al., 2005; Wallerstein et al., 2020), that defines the key components of community-academic partnerships, such as power sharing and honoring multiple forms of expertise (see CEnR principles outlined in the Introduction). I coordinated a team-based, hybrid codebook thematic analysis (TA) with reflexive practices (Braun & Clarke, 2006, 2021) to understand and conceptualize the partners' experiences in the partnership and identify patterns that contributed to the partnership quality and success.

The hybrid approach involved utilizing both inductive (data-driven) and deductive (theory-driven) coding through which existing theoretical principles of CEnR informed the analysis and data-driven themes were generated (Braun & Clarke, 2021, 2022; Swain, 2018). Deductive analyses heavily rely on theoretical and conceptual frameworks, which are utilized to develop codes and codebooks (Braun & Clarke, 2021). The strong connection to theoretical ideas provides structure and aids in the identification of concepts early in the coding process (Braun &

Clarke, 2021). Moreover, categories and codes are pre-defined and are largely fixed (Elo & Kyngäs, 2008). This approach also supports an analysis that remains focused on the research question (Elo & Kyngäs, 2008). However, deductive coding can constrain the analysis to the anticipated findings, and therefore, has a high risk of confirmation bias. On the other hand, by generating codes directly from the raw data, inductive coding leaves room for identification of unanticipated concepts from participant experiences, perspectives, and meanings (Braun & Clarke, 2006). Therefore, an inductive approach is more concerned with theory generation, rather than theory testing (Deterding & Waters, 2021). An inductive approach to data analysis also allows the research question to shift in response to the data and evolve throughout coding. Although inductive coding is not associated with a risk of confirmation bias, the inductive codes can be highly subjective, and findings may be influenced by researcher biases (Braun & Clarke, 2006). In the present study, both approaches were employed: a deductive analysis allowed for an exploration of specific theoretical concepts from CEnR literature and an inductive analysis allowed for identification of unanticipated concepts (Gale et al., 2013).

As a family of methods, TA is well suited for this project as it is iterative and flexible (Braun & Clarke, 2006, 2019), thus fitting the goals of the current study. Unlike embedded methodologies (e.g., phenomenology, grounded theory), TA can be used for secondary data analyses and is not fixed to data collection or theme development processes (Braun & Clarke, 2021). Moreover, TA is suitable for qualitative analyses that fall along a continuum of deductive and inductive approaches (Braun & Clarke, 2021), allowing for a hybrid approach utilizing both inductive and deductive analyses. The versions of TA fall along a spectrum that correspond with epistemological orientations (i.e., how knowledge is constructed and produced), which inform the procedural components of each version of TA (Braun & Clarke, 2021). ‘Codebook TA’, in

which the analysis is developed and documented through a structured coding framework, sits between ‘coding reliability TA’, which involves quantitative measures of reliability and is, therefore, oriented towards identifying an objective “truth” (i.e., post-positivist) and ‘reflexive TA’, which fully embraces researcher subjectivity (i.e., interpretivist, constructivist; Denzin & Lincoln, 2005). Reflexive TA “emphasizes the importance of the researcher’s subjectivity as analytical *resource*, and their reflexive engagement with theory, data, and interpretation” (Braun & Clarke, 2021, p. 330). In this middle position, codebook TA incorporates the codebook structure from coding reliability TA to support team-based coding and recognizes research subjectivity through reflexive practices from reflexive TA.

As this study was concerned with identifying CEnR considerations and practices useful to other researchers, it was important that the analysis incorporated rigorous practices to support trustworthiness and generalizability of the findings (see section below on Trustworthiness and Generalizability). Therefore, hybrid codebook TA was well-suited for this project for several reasons:

1. The codebook and collaborative work of a coding team supported the pragmatic and applied focus of the research: the development of a conceptual model;
2. This approach provided space for input and feedback from community members with little to no research experience, or in our case members of the CAB, to ensure that the findings reflect the experiences of formerly incarcerated individuals;
3. A hybrid approach to the thematic analysis expands the theoretical robustness of the conceptual model findings (Naeem et al., 2023). The deductive approach allows us to consider existing models and conceptualizations, while an inductive approach is often used to develop new conceptual models.

4. As I was heavily involved in the data collection and I approach research with a social constructionist epistemology, my subjectivity is acknowledged as a resource rather than a bias (see Positioning section).

We employed a style of codebook TA known as Template Analysis (Brooks et al., 2015; King, 2006). Template Analysis offers a flexible and rigorous approach for systematically and collaboratively interpreting the data (Brooks et al., 2015; King & Brooks, 2017). The *template* itself is a tool for making sense of the data, but is not the product or outcome of the analysis. By iteratively developing a *template* of codes, or a list of codes and their application[3], this analysis allows for a combination of deductive and inductive codes to construct themes. This balance supported the integration of initial codes informed by CEnR literature, researcher experiences, and community input, in addition to inductive coding based on participant insights. Therefore, to address Aim 2, a Template Analysis was conducted. Template Analysis involves six phases: familiarization, preliminary coding, organizing codes and initial themes, defining the initial coding template, applying the initial coding template, and finalizing the template by applying it to the full dataset (Brooks et al., 2015; Brooks & King, 2014; King, 2006). As the themes generated in Aim 2 formed the foundation of the conceptual model in Aim 3, the identification of keywords and quotes that is critical to developing a conceptual model (Naeem et al., 2023) was incorporated into the coding process of the Template Analysis. The integration of the steps for conducting a Template Analysis and developing a conceptual model have been summarized in Table 5.

The Coding Team. The analysis was conducted by a coding team comprised of me, a clinical psychology graduate student (TR), and a licensed clinical social worker pursuing a

[3] The style and format of the template is flexible to the analysis and utility for the coding team (Brooks et al., 2015).

doctorate degree in counseling psychology (EB). The composition of the team was intentionally designed to bring diverse perspectives to interpretation of the data (Shenton, 2004). Together, we had varying personal and disciplinary backgrounds, as well as varying degrees of familiarity with the data. While my extensive familiarity and intimate knowledge of the project and data provided valuable insights, it may have impacted my interpretation of the data and resulted in selective attention to specific patterns or concepts that aligned with preexisting interpretations. Engaging team members who were less familiar with the data offered opportunities to incorporate fresh perspectives, challenge my assumptions, and stimulate reflexivity, ultimately strengthening and promoting the credibility of the findings (Nowell et al., 2017; Shenton, 2004).

Codebook (Template) Thematic Analysis

Step 1: Familiarization and Transcription. Familiarization began during data collection. I attended all CAB meetings and took notes during the meetings to document meeting content and my reflections, which were typed and stored electronically. The audio recordings of the meetings were transcribed verbatim using NVivo Transcription software (QSR International, 2025). The transcripts were reviewed by undergraduate research assistants and MM for accuracy and correction by simultaneously listening to the audio recordings and reading the transcripts. During this initial review of the transcripts, the reviewers followed a transcription guideline (e.g., guidance on including non-verbal utterances such as laughter), and tracked uncertainties in an Excel spreadsheet with a description and timestamp. The transcripts were then validated by three of the academic researchers present at the meetings, including me. Finally, I reviewed and finalized the transcripts, further contributing to my familiarization of the data. Additionally, I read and re-read the meeting summaries and transcripts and listened to the audio recordings. Following the conclusion of the project's grant period, the study team conducted a preliminary

review of the CAB meetings for the creation of a grant report. My intensive involvement in this report further supported my familiarization with the data. The other two members of the coding team listened to the audio recordings and read the transcripts.

Step 2: Preliminary Coding. Coding involves applying short phrases or words to segments of data to identify interesting features within the data (Braun & Clarke, 2006). All coding was completed in MAXQDA (VERBI Software, 2021). Preliminary coding of the data was conducted by all members of the coding team and included applying a list of *a priori* codes developed by me and reviewed and approved by the coding team (MacQueen et al., 1998), as well as generating data-driven codes (Brooks et al., 2015). The *a priori* deductive codes were based on a review of CEnR principles in the extant literature, my experiences engaging with CAB members, and the preliminary review of CAB meetings for the grant report (King, 2006). This list was reviewed, discussed, and modified by the coding team, as well as a qualitative expert. The first iteration of the list of deductive codes was extensive and required refinement to a condense list of broader concepts. The deductive codes captured both latent content (e.g., instance of power sharing) and semantic/manifest content (e.g., expression of appreciation for the sharing of power) of the transcriptions (Braun & Clarke, 2006; Naeem et al., 2023). To capture the lived experiences and voices of the CAB members, we applied in vivo codes, which directly utilize the participants' language and vocabulary (Saldaña, 2021). Concept codes were utilized to capture broader CEnR principles and dynamics. Descriptive codes and process codes were also applied to characterize the partnership or descriptions of experiences in prison. Values coding was applied to reflect CAB members values, attitudes, and beliefs, especially as it related to their experiences in prison and the partnership (see Table 6 for descriptions and examples of the types of codes utilized in the analysis). Additionally, codes labels and definitions were

neutral. We did not label partners' words as positive or negative to capture the nuances of partners' experiences and limit a binary categorization. Through the process of applying codes we identified representative quotes and keywords, which are critical components to the process of developing a conceptual model (Naeem et al., 2023).

The coding process was unique given the temporal component of the data. Since the CAB met multiple times over a two-year period, the content of the meetings changed over time as did the way in which topics were discussed. Therefore, preliminary coding involved applying and modifying a singular evolving coding template to all 20 meetings. To ensure consistent application of codes between coders and across meetings and to promote trustworthiness of the findings, all 20 meetings were coded by at least two members of the coding team (i.e., me and one other coder), read and reviewed by all coders, and discussed as a team. Moreover, during coding team meetings, we discussed whether our understanding and application of codes changed as a result of time passing in the partnership. Additionally, we utilized the "Code Matrix Browser" in MAXQDA to examine the degree to which codes were applied across the meetings (i.e., over time). The goal of examining the meeting conversations over time was to explore the process of partnership development over the twenty meetings.

Coding agreement was obtained through an iterative coding process and frequent calibration and resolution meetings. First, the coding team convened and actively coded the first transcript together to establish initial agreement on the application of the codes (Hemmler et al., 2022). During this process we established a system for unitization (e.g., agreement on the appropriate length of a unit of data to code), uncertainty in code application (e.g., applying a code labeled "code?" for data segments the coder is uncertain about), and global questions (e.g., maintaining a document with general questions regarding the data or coding process; Hemmler et

al., 2022; MacQueen et al., 1998). The remaining transcripts (i.e., meetings 2-20) were assigned to TR and EB. A structured coding review process involving two transcripts — I coded two transcripts, while TR and EB coded one — and weekly meetings took place every two weeks. During the first week of each cycle, TR and EB coded the first half of their assigned transcripts and read each other's assigned transcripts, whereas I coded both transcripts. I then compared the coding line-by-line (Hemmler et al., 2022). Discrepancies were compiled in a shared document to (1) draw attention to segments I had coded but they had not and vice versa, (2) raise questions regarding applied codes, and (3) solicit input and feedback on segments that were challenging to code. Based on this comparison, I identified noteworthy discrepancies to be addressed in the coding team meeting, as well as broader coding issues that arose (e.g., needing to clarify code definitions or differentiate between codes).

Next, a calibration meeting with all coders was held to discuss the cycle's first week of coding. The calibration meetings served as a forum for discussing complex codes and interpretations of the data, resolving uncertainty, discussing global questions, and fostering support among the coding team. This calibration process enriched our understanding of the codes and increased our likelihood of applying them similarly. In other words, this process lent greater confidence in the consistency of code application and less variation between coders (Hemmler et al., 2022). Moreover, the discussions allowed us to determine whether the coding inconsistencies were due to issues with code definitions or coder errors (MacQueen et al., 1998). Inconsistencies in coding were addressed by modifying the list of codes and expanding code definitions or examples (Brooks et al., 2015; Hemmler et al., 2022; MacQueen et al., 1998). In the event of unresolved discrepancies, I served as the executive decision-maker, having final say on coding decisions while incorporating the input from other coders. During the second week of each cycle,

we repeated the same process for the second half of TR's and EB's assigned transcripts. To document the coding process as a whole, we maintained a document that included differences in interpretations, codes that required clarification, and analytical decisions (Saldaña, 2021).

Step 3. Review and Organize Codes and Initial Themes. Following preliminary coding of a portion of the data, the coding team met to review the codes and begin organizing the codes and initial themes that formed the building blocks of the coding template. In Template Analysis, generation of themes often takes place early in the analytical process (Brooks et al., 2015; King, 2006). Therefore, once preliminary coding of roughly half of the meetings was complete, this step of reviewing and organizing codes included brainstorming initial themes. Codes were sorted and combined into groups that formed initial themes relevant to the research question (Braun & Clarke, 2006). Additionally, to aid the development of initial themes, we utilized various visual aids, such as concept mapping, to develop and explore relationships among coded concepts (for concept map examples see supplemental material A; Butler-Kisber & Poldma, 2010). This process served as a preliminary step for constructing the initial coding template.

Step 4: Construct the Initial Coding Template. The initial coding template was constructed by all coders early in the iterative process outlined above to integrate various perspectives and interpretations. The initial coding template included the *a priori* codes[4] and inductively generated codes either as code categories or sub-codes, full definitions, guidelines for differentiating between codes when applicable, any sub-codes with definitions, and examples (Table 7; Brooks et al., 2015; MacQueen et al., 1998).

[4] The original code labels and definitions of *a priori* codes may have been modified and adapted during the coding process to represent the data more accurately. Therefore, the initial coding template included the modified *a priori* codes when applicable.

Step 5: Apply the Initial Coding Template and Revise. The initial coding template generated via preliminary coding of the first 10 meetings was applied to the remaining meetings by all coders continuing with the two-week cycle described above. This process involved continuously discussing and revising the coding template while conducting preliminary coding of all 20 meeting transcripts. We systematically worked through the full set of transcripts and applied codes from the coding template that were either new or redefined since preliminary coding during steps 3 and 4. Four common modifications to the initial template included: (1) insertion of new codes to the template, (2) deletion of an existing code that no longer has use or overlaps with another code or theme, (3) changing the scope of the code to be less narrow or more broad, and (4) changing the higher-order classification of a code if it fits better as a sub-category of another code (King, 2006). Additionally, as the template was applied to the data, we revisited the visual aids to help restructure ideas and modify the codes and themes. Following initial coding of all 20 meetings, as the team lead, I reexamined the coded transcripts to apply the revised coding template and continued to revise the coding template as necessary. During this process I documented new codes, identified illustrative quotes, and identified patterns within and between codes. Additionally, the coding team continued to meet to support reflexivity, discuss revisions to the coding template and interpretations of the data, and incorporate feedback.

Step 6: Finalize the Template and Apply it. The coding template was finalized once there were no longer sections of the data relevant to the research question which could not be coded based on the existing template (i.e., data has been read through and the coding examined at least twice; Brooks et al., 2015; King, 2006). With the aim of finalizing the template, we engaged in a greater degree of abstraction by describing and exploring the themes and the relationships within them to consider deeper meanings and underlying patterns (Braun & Clarke,

2006). First, we reviewed the themes by examining the corresponding coded extracts to examine whether the data "fit" the theme and vice versa. Then, to address the validity of each theme we reviewed the individual themes in relation to the full dataset. To define and name the themes, we returned to the coded extracts to identify why and how this theme was of interest (Braun & Clarke, 2006). For example, several partners expressed the impact that the partnership had on their relationships with themselves and their family members, which demonstrated the transformative impacts of the partnership beyond the initial project goals. We also considered how together the themes tell a story about the data by returning to the original research question and reflecting on relevant theory and literature. Theme names based on in vivo codes were prioritized to honor the voices of partners. The final template included lower-order and higher-order codes that collate together to form themes. For example, gratitude for the partnership and ripple effects of the partnership collated to form a theme regarding transformational impacts of the partnership. The finalized template was applied to the full data set.

Reflexivity

The coding team practiced reflexivity throughout the research process to engage with our roles and positions (Braun & Clarke, 2019). By writing and revisiting a team positionality statement and maintaining reflexivity journals, we continuously acknowledged our subjectivity and how our personal and disciplinary perspectives inform the analysis. For example, we utilized meeting time and memos in MAXQDA to reflect on our positionality, feelings, thoughts and/or questions that arose, as well as how codes were applied and themes were developed. Through these processes, we ensured ongoing critical reflection and transparency of the research process and analytical decisions. Furthermore, I discussed interpretations with mentors, community partners, and peers to challenge our assumptions and interpretations of the data.

Trustworthiness and Generalizability

Though generalizability in qualitative research has been debated, by implementing strategies that provide a detailed account of the methodological and analytical decisions qualitative inquiry can yield trustworthy and generalizable findings (Hays & McKibben, 2021). The following strategies across five domains were implemented to establish the overall trustworthiness of the findings: (1) credibility through prolonged engagement with study participants (i.e., CAB members), researcher triangulation (i.e., every meeting was coded by two coders and review by all), debriefing sessions with mentors, and member reflections[5]; (2) transferability and generalizability by providing rich descriptions of sampling, coding, and theme generation in the methods; (3) dependability by clearly describing the research process and providing an 'audit trail' of methodological issues and decisions via an "Analysis Decisions" and "Coding Review" documents; (4) confirmability by explicitly stating how and why analytical decisions and interpretations were made; and (5) reflexivity by keeping a journal to record logistics of the research and the researchers' reactions and insights, as well as explicitly stating researcher biases (Nowell et al., 2017; Polit & Beck, 2010; Shenton, 2004).

Member Reflections

The analysis involved two member reflections sessions in which the full CAB reconvened to share, discuss, and reflect on the findings (Goldblatt et al., 2011; Tracy, 2010). The goal of member reflections was to promote trustworthiness of the findings, minimize misinterpretations of the data, incorporate both researchers' and community partners' potentially different perspectives into the data analysis, and empower community partners by actively

[5] The language *member reflections*, rather than *member checking*, supports the idea that the process of obtaining and integrating input from research participants is not about determining whether the findings are "right," but about bringing depth and richness to the data through collaboration and mutual reflection (Candela, 2019; Goldblatt et al., 2011; Tracy, 2010).

engaging them in the analysis (Candela, 2019; Goldblatt et al., 2011; Israel et al., 2005; Jagosh et al., 2015; Varpio et al., 2017). To this end, the member reflections sessions involved bringing findings and interpretations of the data to CAB members to explore whether they were representative of their experiences and offer opportunities for CAB members to support or challenge the interpretations (Goldblatt et al., 2011). Feedback was elicited at two timepoints: (1) during preliminary coding (e.g., Phase 2) and (2) while finalizing and applying the coding template (e.g., Phase 6) and refining the conceptual model (Varpio et al., 2017). Both sessions helped promote trustworthiness of the findings by bringing new light and perspective to the analysis and determining whether the results were comprehendible and meaningful (Tracy, 2010). For example, while discussing one of the initial themes during the first session, community partners drew important connections and distinctions between navigating the prison environment and their experiences building relationships in the partnership. Moreover, several community partners identified quotes that felt the most meaningful and reflective of their experiences. Community partners were compensated for their time and input. The sessions were audio recorded and following each member reflection session, I listened to the audio recording of the session and reviewed my notes to reflect on the feedback. In my reflexive journal I documented confirmation of themes, richer interpretations of the data, and new ideas brought up during the meeting to ensure that the findings remained grounded in the data. A description of the second member reflections session wherein the conceptual model was discussed is provided in Chapter 5.

To integrate community partners' reflections early in the analysis and mitigate possible early misinterpretations of the data (McKim, 2023), the first session took place during the initial coding phase (i.e., once a preliminary coding template was developed and initial theme ideas

generated). This session involved presenting community partners with the study goals, a description of the initial themes from Aim 2, and illustrative quotes via a handout (Goldblatt et al., 2011). Prior to the first session, the bridge community partners involved in the planning committee (DM and AH) reviewed and provided feedback on the handout. The finalized handout incorporated their feedback, as well as input from the PI. Ten partners (four partners in academia, six partners who are formerly incarcerated) were present at the first session and engaged with the findings. Following a description of the project and review of the handout, we collaboratively and openly discussed how the themes reflected our experiences in the partnership. Feedback from community partners included highlighting the salient aspects of each theme and identifying quotes that powerfully represented the themes. Throughout the conversation, I synthesized feedback, shared my interpretations with the group, and sought confirmation or correction.

Results

Three themes were generated that describe individuals' experiences in the partnership: (1) Building a safe space; (2) "It's always going to be about what we do"; and (3) "Transformational work for every person in the room."

Theme 1: Building a safe space

This theme encompasses the perception that the partnership was a safe space intentionally built and maintained by partners. Authenticity and vulnerability from partners were qualities demonstrated throughout the partnership and key facets of building this safe space. These facets contributed to the development and reinforcement of trust and trusting relationships.

Vulnerability of all partners was evident through "sharing the naked truth." Comments made by all partners suggested that rather than showing up with a mask on or dressing up the

truth, they shared the naked and raw truth of their feelings and experiences. ("We all tried to leave a lot on the table each time, that's what we were here for," Partner 5, Meeting 20). Community partners candidly shared many aspects of their lives, from adverse experiences in childhood and prison to their present lives, including past indoctrinated beliefs and the growth they experienced over the course of their lives. They were unfettered in their descriptions of their deeply personal stories of the realities of life in prison. For example, they described experiencing and witnessing adversity (e.g., isolation, physical abuse) and that "people lose their mind[s] in there." All partners gave space for uninterrupted and unguarded storytelling, rather than strictly adhering to a set agenda. This space allowed partners to feel emotionally safe, seen, and valued in the meetings. One partner highlighted this facet when they shared:

> I felt really respected and appreciated. I do feel that way by everybody here. […] Y'know, at every opportunity, like to me [it] felt like since the beginning, we were looking for opportunities to get the best out of each other, the most out of each other and share what we could, as best we could. (Partner 8, Meeting 17)

In conjunction, partners described feeling that their vulnerability was met with acceptance and respect. As a result, they felt that they could engage authentically, no matter the state they were in that day. As one partner who is formerly incarcerated noted,

> I guess I would just say, as I always feel with this group, again, I have been going through a whole lot, but the space always offers me a chance to kind of open up and express some of what I have in here […] I just appreciate the space to show up and just be. (Partner 3, Meeting 5)

The way partners engaged and shared in every meeting suggested a desire and willingness to be candid and genuine. Moreover, the ability to express the various dimensions of one's identity

without having to put on a front contributed to the authenticity in the partnership. This sentiment was evident by comments such as, “Thank you for letting me be part of me, all of me, and not just parts that are convenient” (Partner 10, Meeting 20).

Building a safe space was reliant on the reciprocation of authenticity and vulnerability of academic partners as well, wherein compassion and empathy were prioritized by academic partners. This reciprocation was a crucial facilitator in partners who are formerly incarcerated feeling comfortable sharing and experiencing deep human connection. Many partners echoed this sentiment, including a partner who is formerly incarcerated who shared:

> It’s gotta be a reciprocal relationship. And, and y’know, when you come in the door, you come in there without the pride and all o’ that stuff. You come in there with the agreement with yourself. That ‘I’m willin’ to be vulnerable here, I’m willin’ to take some chances here,’ because once you start takin’ those chances, you encourage others to respond in that way. So, you know, it’s a lot of reciprocation there. (Partner 8, Meeting 18)

Community partners described that witnessing academic partners “bein’ human [and real]” and showing the non-academic dimensions of their identity facilitated a safe and trusting space. In fact, community partners encouraged academic partners to “lean into [the beauty of] who you are.” This dynamic involved academic partners engaging and connecting on a personal level. One academic partner articulated this most clearly when he shared:

> And I’ll just say from my own experience, there were times where I was not here as a researcher. There was times where I was just here as a human being, and I was here for the talk. You know, I was here for the connection and like people were talkin’ about stuff that, you know, occurred in their lives in a very different context than it occurred in mine,

> but it happened, you know, it touched on somethin' in me and I was just here for that, like I wasn't here thinkin' like, what [does] this mean for research? I was just thinkin', you know, I was touched in a way that was not my understanding of what the purpose of the project. (Partner 1, Meeting 19)

Together, these relationship dynamics fostered trust among all partners in the space and in their relationships. For example, in an early meeting, Partner 4 shared that he struggled to trust people, and by Meeting 20 he described the personal relationships he had developed with all partners as part of his close and intimate circle, reflecting the intimacy and trust that was evident in the relationships. He shared,

> I feel like I need to say this. So, I can count on one hand outside this room […] my wife, my oldest brother, [Name], so three people on this planet that I would willingly drive through way worse weather than any o' this for at the drop of a hat. I would do that for all of you to be with you guys. But there's only three people outside o' this room that I feel that way about. (Partner 4, Meeting 20)

Amid the vulnerability, there were many moments of joy and laughter that reflected a level of comfort and contributed to building the safe space. These joyful moments also reflect that authenticity in the partnership was not limited to serious moments, but also present when partners were able to embrace and express, rather than stifle, the silly parts of themselves. At times, personal stories were punctuated by a collective moment of humor or lighthearted banter, subsequently returning to the preceding moment of vulnerability. For example, during a profound conversation about the sharing of power and after a question was posed, partners engaged in the following banter:

> Partner 6: I would love for people to answer that question.

Partner 9: He can go first. Age before beauty, y'know.

Partner 8: Well then, I should go first.

Partner 9: That's right.

Partner 12: [Laughing]

Partner 9: That's why I said age before beauty.

Partner 8: I'm beautiful. And older than you.

ALL: [Laughing] (Meeting 17)

The dynamic of engaging in a silly and playful manner fostered a sense of comradery among partners, strengthened relational bonds, built intimacy and closeness, and increased comfort with vulnerability and authenticity. Celebrating milestones in each other's lives (e.g., no longer being under the supervision of the DOC), community partners connecting on their shared lived experiences, and experiencing peer support in the group also contributed to this sense of comradery.

Building a safe space was also facilitated by partners encouraging each other to share and expressing appreciation when individuals shared. Uplifting and complimentary statements were sprinkled throughout every meeting, reflecting the admiration, lack of judgement, and respect for people's stories and journeys and further encouraging people to share deeply. For example, partners would often comment, "So proud of you" or "I love that," as others shared personal stories or perspectives. Expressing gratitude towards others for sharing also fostered an environment in which partners wanted to share, felt comfortable being vulnerable, and believed that their stories and perspectives were valued.

Theme 2: "It's always going to be about what <u>we</u> do"

The partnership fostered the feeling that everyone's presence and perspectives were a valued and integral part of the collaboration, such that the divide between community and academic partners blurred and we united as a *collective we*. The collective we is the cornerstone of this theme, and is a function of and reinforced by the investment of all partners. It also reflects how partners felt confident that each step, both during the 20 meetings and after, would genuinely reflect a collective process and the meaningful work we built together, carrying the voices and fingerprints of everyone involved. Several partners shared this belief, including one who expressed the inclusion of all partners in an idea for a mental health offering in prison by sharing, "Literally everybody in this room, because we're all part of it. You know, we're all part of this whole idea" (Partner 4, Meeting 16). Additionally, throughout the partnership, all partners expressed investment in both the interpersonal relationships and partnership outcomes ("I'm committed to it. And whatever we got to do to make this stuff happen, man, you just count me in," Partner 9, Meeting 2). This widespread investment in all elements of the partnership facilitated and reinforced the unity of the collective we.

Everyone's vulnerability and willingness to show up (Theme 1), coupled with the partnership's key commitment to valuing each person's contributions, allowed the group to feel united in shared values and goals. Contributing to the collective we, partners described feeling a sense of belonging and togetherness, such that we were building something impactful together. One partner captured this when they shared,

> We all […] have our own colors, our own vibe, our own chakra energy or whatever [it] is we're givin' off. And to me, it's very beautiful that in here all the energy, those colors

> intermingle to create something different. And then that's put out into the world. (Partner 4, Meeting 17)

The importance and prioritization placed on group unity and fusion was evident in early meetings. Following a presentation of community engagement concepts (Meeting 2) in which we referred to the perspectives of community partners as "your input," a community partner described a sense of "we" instead of "us-them" born from the focus on unity and collaboration, rather than separation, in the partnership processes.

> So, during the presentation, I lost count of how many times the word 'your' was up there. Y-O-U-R. And if you really think about it […] the information that you shared with us, it kind of points to a separation. But there's not a separation between research and me. […] You and the researchers make the word 'your.' So, every time I would see 'your,' I thought about all of us together, each one of our pieces, not a them and us, not of me and them, or some university people and some formerly incarcerated. But, that word 'your.' Y-O-U-R. That's what it is. […] That 'your' means us. All of us. Each one of us. […] We're all involved in every phase of this. And our input is important for the research and the input is important to me, and to us. (Partner 5, Meeting 2)

Consistently using language such as *we*, *us,* or *our*, contributed to the development of the collective we and ensured that this togetherness permeated every conversation.

One feature that reflects the value of each individual's involvement in the collective we was the equal and deliberate sharing of time and space that ensured that all partners had the opportunity to contribute. People were invited and encouraged to share and respectfully made space for each other. For example, in Meeting 5 several people wanted to hear from Partner 4, and they were invited to share:

S9: Yeah, and I wanted to hear from [S4].

S12: I was about to say the same thing. [Laughter]

S9: Everybody must have been thinking the same thing.

S1: [Laughter]

S6: I was, yeah.

S1: Go ahead [S4]. (Meeting 5)

The investment and collective we that characterize this theme were also cultivated through a consistent effort to amplify each other's potential and learn from each other. All partners were encouraged to voice their perspectives, and everyone's insights were uplifted rather than dismissed or undermined. This sentiment was clearly articulated when a community partner stated,

> I felt like [there's] certain people that know certain things, and when they shared what they knew, it was listened to, accepted, and we all learned from it. […] Like I feel like there wasn't any diminishment on any level towards any individual in here. (Partner 8, Meeting 17)

The respect for everyone's input supported partners feeling that the outcomes of the partnership would truly represent the voices of all partners.

Another integral component of community partners feeling that they were part of the collective we involved valuing, respecting, and honoring lived experiences as a form of expertise. When community partners shared experiences with mental health services in prison, their experiences were regarded highly as lived expertise and prioritized in the project's products (e.g., mental health offerings in the research agenda). For example, a community partner (i.e., Partner 4) shared that Restorative Justice, a program intended to heal harm caused by crime, was

the most impactful program he participated in while incarcerated, partially due to the format which involved all group members sitting in a circle. He shared,

> Partner 4: That's been the most powerful thing I've experienced, the circle.
>
> Partner 5: Yep. Everybody facing each other. (Meeting 8)

The emphasis on the circle format as beneficial continued to come up throughout our meetings and was reinforced by other community partners. Therefore, we collectively decided that the circle format would be a critical component to the offerings proposed in the research agenda, demonstrating one of the ways in which we honored lived experience and made decisions as a collective we.

Another dynamic in the partnership that contributed to this theme was the diffusion of power across partners and the value placed on each individual's power and skills. Many community partners described that they did not feel that they were being taken advantage of or that their perspectives were exploited. For example, a partner shared,

> Power's not equal because some people have different talents than others, but it's not being taken advantage of or taken advantage of another person that creates the sharedness of the power. Because, y'know, a lot of people exploit people just so that they can get what they want, and then they just throw those people away. That is not what happened in this room. (Partner 8, Meeting 17)

Rather than relinquishing power to serve the group, partners were encouraged to lean into and "engage in their power," as a community partner emphasized. Recognizing, appreciating, and growing each other's power supported individual potential to flourish, ultimately contributing to the power of the collective we.

The collective we was also supported and reinforced by cultivating a space wherein community partners felt empowered and comfortable to disrupt traditional power structures, particularly through asking academic partners personal, reflective questions that came from a place of experiential knowledge. For example, a community partner asked academic partners, "Have you ever been in survival mode?" to convey that there is no replacement for the knowledge gained from lived experience of being in prison and the associated state of constantly being in survival mode. The act of asking these questions, as well as the content of the questions, disrupted traditional assumptions about knowledge, especially who produces and holds knowledge. The questions challenged researchers to understand that they do not hold a monopoly on knowledge and that community partners' lived experiences are a form of knowledge and expertise that academic researchers may not have.

Another foundational component to building the collective we was the commitment to navigating working with the DOC together. Given that the research initiatives largely take place within prison facilities, collaborations with DOC personnel are inevitable. By building on the strengths of all partners, and in particular, deferring to the knowledge and centering the voices of community partners who were personally impacted by being under DOC supervision, we cultivated and reinforced a culture that valued everyone's experiences and expertise. For example, we discussed the characteristics of the "right" DOC person to engage with and collectively defined where we draw the line regarding how to bring the DOC perspective into the partnership. One partner captured this process of identifying the type of person from the DOC when they shared:

> I do believe it has to be a person who is able to laugh, to be able to express emotions, hurt, whatever those things are. […] I feel like it's more appropriate for them to adjust to us, then for us to adjust to them. (Partner 9, Meeting 4)

Community partners described that the high regard for lived experience and integration of perspectives greatly contributed to the collective we. Community partners recognized that academic partners were not obligated to engage in this work or center lived experiences of those impacted by incarceration, but they chose to do so, due to their beliefs in the value of lived experience. One community partner shared that the novelty of this approach is "where the cuttin' edge stuff comes from." Most community partners described that this dynamic was unique to this partnership and carried significant impact, including one who shared,

> My experience in these places hasn't been respected in the way that it has been here, or hasn't really been valued to the depth that it is here. And what does that mean in real life to people's lives, right? To really like, seeing yourself in the room, literally belonging in the room. (Partner 10, Meeting 18)

When discussing our "highs" from the partnership, Partner 10 also reflected on the impact of feeling valued in this partnership compared to previous experiences:

> First, building real trust amongst different systems people. [Laughing] Right? Like, we've all come from different parts of the systems and the expectations of those systems. […] I just have never had this experience in the academic world for a long haul, recognizing everybody's value, that one is not greater than the other, and no one in this room was greater than the other. And I think for me, I mean, it's that real deep love [and trust], like it's real. It's genuine. […] I've never had it in a spot long term when

> everybody in here really brought themselves as well as their expertise. I mean, they're not separate. […] So, it was really meaningful to me. (Partner 10, Meeting 20)

This desire to engage genuinely and the impact of having a wildly more meaningful and respectful partnership is another example of the deep commitment and investment characteristic of the collective we.

The collective we was also evident in the ability to openly and honestly process conflict together. During Meeting 16, community partners candidly expressed that a summary document of themes related to mental health services in prison from our meetings did not honor their voices and perspectives, and felt reminiscent of past exploitation. The foundation of authenticity, trust, and respect we built (Theme 1) cultivated an environment in which we were able to collectively process and rectify the harm caused. The ability to candidly express harm caused by other partners reinforced the investment and commitment to each other and the partnership. One partner highlighted this by sharing:

> Despite the fact that there might have been some frustration throughout, it really does feel like there's a level of trust in here that we've developed over a year and a half or two years. And I think that that in and of itself will be the reason why this turns into something. (Partner 6, Meeting 16)

In fact, a community partner shared that the trust within the partnership made it possible for them to engage and show up after harm had been caused.

> This has been a beautiful collection. If I didn't have the love that I had built here, and I would have read this [document] I wouldn't be there at all. I woulda never came back to this meeting. […] So, it means a lot to me that we worked through this, and we spent the

> time together and [we] held the love and space for each other. […] So that's how I'm feelin', much better now. (Partner 10, Meeting 16)

The collective we, in part, depended on the ability to openly express hurt and pain, alongside a deep awareness of the love and care that bound the group together. Partners unanimously expressed gratitude for our collective capacity to engage in challenging conversations and agreed that this ability reflected healthy relationships and strengthened our partnership as a whole. As one partner noted,

> [Our work is] gonna work out good, but it's not gonna just happen [snaps fingers]. You gotta put the effort in. That's what it is. And it's gonna be uncomfortable sometimes, sometimes it's gonna be celebratory, sometimes it's gonna be cryin'. (Partner 8, Meeting 16)

Another partner shared a similar sentiment while reflecting on the challenging conversations during Meeting 16 related to the summary document:

> I'm glad about these [challenging] type of conversations 'cause I believe this is where we grow as people. […] And so, for me, it be about just really understanding each other, you know, so that it's crystal clear on each end. So, I mean, I feel good. I feel good with us. (Partner 9, Meeting 16)

The willingness to openly work through complex emotions related to exploitive experiences in the past that were activated by the group helped build the strong relationships that enabled and empowered us to come together as a unified we. While reflecting on the challenging conversations, Partner 9 continued saying,

> It really is about pushing each other. […] You know, I'm sayin' that I'm a pushy person, but I'm also sayin' push me. Make sure you pushin' me to walk in my greatness as well.

> […] Because we all fall short. But that pushiness is never going to stop. I'm always gonna challenge things that I believe need to be challenged. And I don't want to always go through a life hearing, 'We've taken just a crumb.'" (Partner 9, Meeting 16)

The challenging conversations not only supported the development of resilient relationships but also pushed the bounds on what we could accomplish together.

Theme 3: "Transformational work for every person in the room"

Many partners described the profound impact that the partnership had on them beyond the goals or intentions of the project. The partnership was not solely focused on the aims of the grant or generating project products — throughout the 20 meetings a culture was created that fostered widespread transformation. This theme was articulated most clearly by the following sentiment: "It is not just a project or research. It's transformational work for every person in the room" (Partner 10, Meeting 18). This transformation largely stemmed from building a culture of deeply caring for each other like an "extended family," and not simply for the sake of the project. This dynamic and the relationships around the table formed a support network. Therefore, partners described feeling that the partnership exceeded their expectations. For example, one community partner shared:

> This has turned into a lot more than I thought it was gonna be from the beginning. I thought I came in here understanding what we were doin', and it was like way more than I could have thought. What, you know, what I learned and how, you know, everybody just started comin' together and the way we were sharing, and you know the support and the sharing also was like way more than I thought it could be. (Partner 8, Meeting 19)

Each partner found value in the partnership that transcended the project itself. In the words of a partner, "It was like every [month] I became richer" (Partner 8, Meeting 20).

The transformational impact of the partnership is also evident in partners overwhelmingly and consistently expressing gratitude for the partnership and describing the experience as deeply fulfilling and valuable. In the words of one participant, “There is no amount of money or anything that can be placed on the value of this experience” (Partner 8, Meeting 5). Moreover, with the unique ability to be vulnerable and authentic and consistently feel like a valued member of a unified partnership (Themes 1 and 2), the partnership was deeply meaningful and life changing for many (“[the partnership] changed who we are and how we do life.”). Several partners echoed this sentiment, including one who shared,

> The love of, of human beings existed in that room from all different places. And all of those perspectives expanded my own vision or ability to see much greater things than I was before I went through this two years with all of you in a much different way, and I feel like it’s like lifelong, it was, it’s life changing. It added to my life in a way that really enhanced and made it much more rich and full because of how real, and honest, and loving, and every emotion under the sun came through this and everybody just showed up that way. (Partner 10, Meeting 20)

Partners also experienced transformation through personal growth (“I’m not half the person I am till now since I met you all growing together,” Partner 10, Meeting 16). Many partners described the partnership as “something special” due to the unparalleled sense of safety, belonging, and connection that the partnership community provided, thereby creating a space for growth. For example, while discussing our highs and lows from the partnership, one community partner shared:

> So, my low was every time I left here and walked out the door and went out into the world. […] Because my high is just being here with all of you. I know it sounds weird,

> but I guess the best way I can say [it] is, like, y'know, Superman had a Fortress of Solitude. I could only imagine in that fictional world what madness that he had to go through, and then he'd go to a place where he's just safe and secure and doesn't have to deal with the madness. So, every time I was here learning from you all, getting things from you, getting things to you, growing as a person, growing as a group, those were all my high moments. (Partner 4, Meeting 20)

Connecting as humans through vulnerable and authentic conversations (Theme 1), was integral to experiencing personal growth.

> And, you know, I'm kinda like a off the cuff kinda person. I have to actually get goin' in order to get to what I need to get to because, I actually sometimes, a lot of times, I don't know what I wanna get to because I have to uncover this stuff that I'm used to covering up. And you all allow me to uncover that. And that right there is encouraging. […] Throughout the process, I've actually grown to know myself better because of the relationships here. And I think that's what you call a fruitful, a relationship is when you get to know better who you are based on people sharing better who they are. (Partner 8, Meeting 18)

The partnership was also transformative as it strengthened every partners' sense of confidence, empowering them to recognize their value, power, and invaluable contributions. Partners felt empowered when they experienced true belonging in the partnership. For example, one community partner did not speak much during the early meetings and while she understood the valuable contribution of the other partners, she did not understand why she had been invited into the partnership. In the final meetings, she described that due to the support from others and

the ways in which her perspectives were valued, she recognized and believed in the value of her presence and expertise.

> Normally in collaborations I tend to not speak up a lot, like that's why I said this committee has allowed me to, like, speak up, trust in my voice, trust that what I have is somethin' that other people- like some good shit, that's what I like to call it, like, 'Come here I got some good shit for you.' And I like to think that I have that every now and again. So, this is kind of allowed me to do this and [has] given me the confidence to pursue other things that I've been wanting to do […] And so, I don't know if I would be this little version of myself today if it wasn't for these last two years. So, thank y'all." (Partner 3, Meeting 19)

In the next meeting, Partner 3 also reflected on how the partnership helped her believe in herself and see her value. She shared, "I guess my high would be the moment that I really- like when I heard my voice […] I just felt like, 'Wow. Like I can hear my own voice now. I'm not silent. I'm not invisible'" (Partner 3, Meeting 20).

The experience of empowerment further contributed to personal growth. Not only was this growth experienced at the individual level, but several partners also openly expressed the growth they witnessed in others. For example, Partner 3's candid self-reflection on her journey throughout the partnership was met with praise for her growth, power, and presence. Speaking directly to Partner 3, Partners 5 and 10 shared:

> Partner 5: I just feel so good to have you describe yourself as the person I saw so long ago. […] So, who I saw and who I know you are, I just heard you say about yourself. […]

> Partner 10: I am in absolute agreement […] about the power you have always harnessed, the presence you bring to a space and the blessing you are. Absolute blessing, [Partner 3]. Step into your call, my sister, because we need you. (Meeting 19)

Another form of transformation partners experienced was "genuine healing." The ability to openly and candidly share in the partnership (Theme 1), allowed partners to openly process experiences and feelings deeply in a way that supported healing. In the words of one participant, when they came to the meetings they were "getting my batteries recharged." The monthly gatherings were a space to recharge and heal, as one partner articulated, "Again, I feel our culture. I feel like people come because it's healing and you can get some laughter out of it, but you can talk about some of whatever your hurts, habits, or hangups are" (Partner 9, Meeting 4).

These transformative experiences, especially the experience of healing and growth, contributed to a shared confidence and faith in the partnership, reinforcing and solidifying investment in the partnership, the outcomes of the partnership, and this work broadly. During a conversation about the value and meaning of the partnership, one community partner shared that the healing that takes place in the partnership drives his desire to consistently show up and prioritize the partnership, unlike other responsibilities in his life.

> Normally I'm like, […] 'Jesus, it's over. I want to get out of whatever I'm doing.' Like, for me, when I'm here, I'm like, 'I don't care. I'll be here until 1:00[am] if you need me, I'll drive home and then change clothes and go to work. I don't care because this is like healing. (Partner 4, Meeting 9)

Another community partner described the newfound confidence in the potential impact of our work when they shared, "I've grown so much in the idea of how much in this partnership we

could really knock it out the park if we were inviting systems to consider the expertise in the room" (Partner 10, Meeting 20).

Furthermore, the partnership transformed academic partners' approach to their work. One element that contributed to this transformation was that academic partners found fulfillment in their work in a way that they had not experienced before the partnership. For partners within academia, the benefits of the partnership were not confined to the impact for us as researchers, but also touched and shaped us as human beings. For example, I shared how this partnership impacted me as a graduate student:

> Everyone says that grad school sucks. Everyone says that it's really hard. […] And, I mean, school's hard for sure, but people talk about their work like, "Ugh, I have to do work, ugh I have to go to this meeting." And I'm like, "I love my meetings. I get to talk to people that I care about a lot. I get to hear about their stories. I get to share pieces of myself. I've learned so much." […] Of course, it's challenging in the sense that I'm growing and learning and all of those things and you all are challenging me, and it's so much more fulfilling than, from what I've heard other people experience in grad school." (Partner 6, Meeting 18)

In this way, academic partners experienced how human connection and authenticity can be personally and professionally powerful and transformational. For example, an academic partner shared that he "forgot about being a researcher" and was there "learning something about a relationship between a father and a son, or about vulnerability or about pain." Many academic partners also described that the partnership was "invigorating" and motivated their work in a new way.

The transformation was also evident when academic partners engaged in reflective dialogue to openly acknowledge the harm of past approaches and express a commitment to an approach that centered the knowledge gained from the partnership and the perspectives of those with lived experiences of incarceration. Academic partners saw how being real with each other and being in a space where people could just be human was powerful and transformational. For example, an academic partner shared:

> I don't work for DOC, but I was part of a research program that exploited incarcerated people. Right? To extract data, to publish for my promotion, for my career. But it was through the process of spending time with you all, that it's been I mean, completely, 100 percent changed, you know, in approach. (Partner 1, Meeting 4)

Another partner described that building relationships with and learning from formerly incarcerated individuals fundamentally changed how she conducts research and engages with currently incarcerated participants, shifting from a transactional to a "humanistic approach." For example, based on stories of dehumanizing treatment in prison and conversations that emphasize the importance of humanizing language, she has adopted a greater level of sensitivity and awareness in her interactions. She shared,

> I'm probably the most like 'feet on the ground,' like inside the facilities talking one on one with people. And I just feel like [this partnership] changed my whole approach to like when I first learned how to do an assessment and conduct an interview. All you do, you hand someone an iPad, you take it back, things like that. But I think now I have such a humanistic approach. And just like the language I use, just having a conversation, I can see how much it like changes people's whole day. And I just think that's like a huge thing that I've taken out of this is just like building relationships with everyone at this table.

> And just like how I conduct research has changed significantly. […] it's extremely power[ful]. And I would not have learned that just day to day unless I was in this group. (Partner 7, Meeting 19)

This ethos and attunement to individuals is passed on in her role training our research group's personnel who are preparing to engage with currently incarcerated participants. Moreover, community partners recognized the value of this shift in approach, highlighting benefits for academics early in their careers and the power that a humanizing interaction can have for incarcerated individuals.

The partnership also transformed community partners' perceptions of academia and the university. Engaging with the human side of academic partners allowed trust to develop over time, which was a sharp contrast to past experiences. Specifically, the experiences in the partnership shifted community partners' perceptions of the university. During a meeting, Partner 9 directly asked Partner 3, both of whom are formerly incarcerated, if the experience in the partnership changed her perception of the university, to which she replied,

> It has […] And I just feel like the [university is] such a heavy presence that it was gonna be somewhat restrictive. And so, seeing that that has not been the case changed my mind. […] It's been different experiences I've had with different people in the [university] now. Like, I know that everybody at [university] wasn't like a bad person, you know, I do still feel like the system is a harmful place. Um, but I'm hoping, like, with anything, y'know, time can change certain things. (Partner 3, Meeting 13)

Additionally, for community partners, witnessing academic partners genuinely advocating for change and challenging traditional approaches to research, helped dismantle entrenched mistrust of state institutions. As one partner who is formerly incarcerated noted,

> And since I've been in here, I've had the opportunity to challenge several beliefs. One, you can't trust people that are involved with the state. You know, you just can't trust 'em. And, I mean, I come in here and the first day meetin' you all, just the demeanor allowed me to make the decision to stop doin' that. (Partner 8, Meeting 13)

The transformative impacts of the partnership had ripple effects on the lives of partners. In the words of one partner, "I act, 'n live, 'n move, 'n shake in the world differently now than I did when we first started. And I got goosebumps thinkin' about it." (Partner 4, Meeting 17). Many partners expressed that the knowledge and understanding they developed throughout the partnership would permeate their lives and be shared with others.

> Knowledge, whether it's intellectual or emotional knowledge or experiential knowledge, it's like a light. And that light, that's not meant to be hidden under, like a basket. It's supposed to be shared with the world. And when we come in here and we share each other's light and we take it out into the world, whether it's in the workplace or in your life at home or whatever, and then you willingly share your life with the next person, it creates more light everywhere. […] Y'know, me sharin' things, sharin' my light, is now expanded all of our light to that sphere of light. […] All the things that we've impacted just by sharin' ourselves is a hell of a thing. (Partner 4, Meeting 13)

Additionally, when reflecting on benefits of the interpersonal connections built every month over two years, a partner shared,

> But I'm gonna be doin' stuff, and what I did here is gonna be impacting the other stuff that I do. So, each one of you, a part of you will be with me because it changed me gettin' to know you all. […] You gotta understand I am charged by you guys, you charge me. (Partner 8, Meeting 20)

The transformative impacts of building collective trust and individual confidence led to important changes in their personal lives. For example, Partner 8 also shared that their ability to speak without fear and working to articulate their thoughts in the partnership "helped me be more expansive out there" (outside the partnership).

The transformation in the partnership also extended into partners' relationships with friends and family. For example, a community partner shared that her partner and children have recognized and been proud of the work she's doing in the partnership.

> Even my family sees it, like, before [partner] hated me comin' to these groups. 'You gonna have your little dinner?' I'm like, 'It's more than just a dinner. We're like talking about shit.' And like, when I left today, he just was like, 'I'm so proud of you.' And I just was like, 'Really?' And I mean, he says a lot, but I could tell, like, today he meant that. And my kids, they just be like, 'Ma, like you doin' stuff,' and I'm like, 'I am doin' a little something, like she okay, she gettin there. (Partner 3, Meeting 19)

Several partners also described the ripple effect of our collective work within academia and the university. Partners expressed that by bringing this approach and our experiences from the partnership to other academic spaces, and inviting other academics to engage with community, we have collectively "raised the bar" on how this work is done. Moreover, together we can normalize this approach to research and "bring humanity back into the academic work," to not only engage in more meaningful and fulfilling work, but also support and drive meaningful change within communities.

Theme Presentation over Time

To understand partners' experiences across the development of the partnership given its time-based nature, we explored how the presence and presentation of themes and their respective

partnership dynamics changed over time. In the initial stages of the partnership, Theme 1 (i.e., Building a safe space) was most salient. In particular, the vulnerability and sharing of personal stories characteristic of "sharing the naked truth" that supported the development of trusting, non-judgmental, and respectful relationships was concentrated in roughly the first third of meetings. The foundation of a safe space was built through the early meetings, creating a safe environment for vulnerability and authenticity that latcontributed to partners feeling valued and respected. Therefore, codes representative of Theme 1 were often codes that demonstrated dynamics within the partnership, especially concept codes that reflected a broader meaning (refer to Table 6). For example, the concept code 'self-disclosure' was often applied to segments of the transcript to capture a dynamic of partners feeling comfortable sharing personal stories from their childhood or experiences in prison.

As meetings progressed, the goal shifted to identifying barriers and facilitators to mental healthcare and ideas for mental health offerings in prison. Therefore, in these meetings we saw more comments related to unity and the collective we reflective of Theme 2 ("It's always going to be about what we do"). The capacity to come together in pursuit of this goal was facilitated by the relationship building in early meetings. Codes relevant to Theme 2 were process oriented. For example, the code 'seeking community input' was applied to segments in which a partner directly sought input from partners with lived experiences of incarceration on the particulars of a mental health offering.

In the later meetings the discussions were largely concerned with reflecting on earlier meetings and the partnership as a whole. Therefore, Theme 3 ("Transformational work for every person in the room") was primarily present in these later meetings wherein recognition and disclosure of the meaningful impacts, as well as the ripple effects, of the partnership were

expressed. Additionally, experiencing transformative impacts in the later meetings was a function of the experiences in earlier meetings represented in Themes 1 and 2. Theme 3 included descriptive codes that identified the content of a segment and often exhibited an outcome of the partnership (e.g., 'empowering'), as well as values codes that exhibited partners' attitudes towards the partnership (e.g., 'space of healing'). Interestingly, Theme 1 was somewhat present in the later meetings as partners openly expressed the impact of the partnership on them personally.

Summary

Through a codebook thematic analysis, three themes were identified to describe partners' experiences in the community-academic partnership: Building a Safe Space, "It's always going to be about what we do," and "Transformative impacts for everyone in the room." The first theme primarily reflected the role that vulnerability and authenticity played in building a safe space and developing strong, trusting relationships. The second theme conveyed the importance of group belonging, investment, and unity to cultivate a collective we, such that power was distributed among partners and the products of the partnership incorporated the voices and expertise of all partners. The third theme described the profound transformation that partners experienced at a personal and professional level. Evaluating the salience and progression of themes over time revealed that Theme 1 was most salient in earlier meetings and this foundational safe space supported the development of a collective we (Theme 2) as meetings progressed. Finally, the transformative impacts of the partnership (Theme 3) were primarily experienced in the final meetings and were a function of the experiences reflected in Themes 1 and 2.

CHAPTER 5. AIM 3: DEVELOP A CONCEPTUAL MODEL FOR CENR WITH PARTNERS WHO ARE FORMERLY INCARCERATED

Overview

The findings from the hybrid thematic analysis from Aim 2 were built upon to develop a conceptual model of CEnR with formerly incarcerated people. The conceptual model is intended to supplement existing CEnR conceptual models (Israel et al., 2026; Wallerstein et al., 2020) and inform partnerships with partners who are formerly incarcerated, by identifying practices specific to these partnerships. The model expands on the themes to propose concepts or domains and incorporates the important and relevant context (i.e., experiences in prison) of the concepts.

Methods

A conceptual model based on themes from a thematic analysis provides a unique representation and interpretation of empirical research that captures the complexity of findings (Naeem et al., 2023). The analysis for Aim 3 involved integrating the steps for developing a conceptual model (Naeem et al., 2023) into the codebook TA, especially conceptualization through interpretation of keywords, codes, and themes; and development of the conceptual model, respectively. Step 6 of developing a conceptual model also involves connecting the conceptual model findings to existing literature, and therefore, the final model incorporates these theoretical connections (Naeem et al., 2023). Conceptual models have been developed by drawing from existing partnerships (Killam et al., 2026), as well as reviewing and synthesizing existing literature to form the basis of or strengthen the conceptual model (Israel et al., 2026; Kliskey et al., 2021; Mikesell et al., 2013; Wallerstein et al., 2008). Therefore, to support a comprehensive understanding of the partnership and produce a nuanced representation of the data (Naeem et al., 2023), part of developing the conceptual model involved considering the

findings through the lens of published literature concerning community-academic partnerships with formerly incarcerated partners (e.g., recommendations, lessons learned).

Specifically for the current work, three elements supported the development of the conceptual model: (1) the three themes generated in Aim 2 translated into the model concepts, (2) documentation of keywords and quotes supported the identification of important and relevant context for the partnership, and (3) review and integration of published lessons learned and recommendations from community-academic partnerships with formerly incarcerated partners. Therefore, the concepts of the model include an explanation of the commitment based on the corresponding theme, relevant context, and integration of published literature to enhance and provide support for the model concepts. The model also includes practical and concrete ideas for how to implement the commitments of the model based on the themes from Aim 2 and published literature. By utilizing these elements and translating them into concepts of the model, we generated a conceptual model that is grounded in the research findings and provides a guiding framework for CEnR with formerly incarcerated people.

Member Reflections

During the second member reflections session, an outline of the conceptual model for Aim 3 was brought to seven partners (six formerly incarcerated partners and MK; McKim, 2023). Partners provided feedback to aid in the translation of themes to concepts and we collaboratively determined how to visually represent the model. Specifically, partners were asked to share their general thoughts, how accurately they felt the principles of the model captured their thoughts and experiences, and how information could be added or removed to better capture their experiences (McKim, 2023). We also discussed what term to use for the concepts or dimensions of the model, as well as the title of each concept. Partners primarily felt

that the concepts represented their experiences well and provided feedback on the description of the theme, recommending a focus on intentionality. Partners also expressed that the initially proposed model visualizations (e.g., Ven diagram, flow chart) were rigid and did not reflect the components of building and development that were present in the partnership. Therefore, we actively brainstormed new visualization ideas that reflected the progression and development of the partnership over time.

Translating Themes into Principles

Following guidelines from Naeem et al. (2023), the model concepts were directly constructed from the themes generated in Aim 2 and used to demonstrate the contributions of the study to CEnR with partners who are formerly incarcerated. Throughout coding and the generation of themes, the coding team discussed the possible applications of the themes for partnerships to brainstorm concepts for the conceptual model. This process involved returning to coded segments, concept mapping, and engaging in a higher level of abstraction and interpretation of partnership experiences. I also discussed the evolving concepts with mentors. Additionally, as the project lead, I consistently revisited the existing literature to situate the evolving concepts within the proximal (i.e., CEnR with individuals with lived experiences of incarceration) and broad CEnR literature.

Keywords and Quotes to Relevant Context

The importance and contextual relevance of the concepts based on lived experiences (i.e., personal and collective from childhood through incarceration) were gleaned from stories and experiences shared during meetings that were explored in Aim 2. Part of building relationships in partnerships involves recognizing and acknowledging past experiences, especially with state and carceral institutions, in service of engaging with partners who are formerly incarcerated (Gaber

et al., 2024; Osman et al., 2024). These experiences greatly contribute to partnership dynamics given the long-term impacts of power differentials in prison (Gaber et al., 2024), as well as daily experiences in prison, and the resulting stigma, on an individual's behavior, identity, and expectations of themselves and others (Awenat et al., 2018; Cohen et al., 2020; Gaber et al., 2024). For example, several formerly incarcerated partners shared that because they did not get to choose what they did with their time in prison, time is now viewed as a valuable currency, "which is why we're always doin' a thousand things because it's like part of it is catch up, and a part of it's like we only got so much time left" (Partner 3, Meeting 18).

Identification of keywords and quotes supported the exploration of previous experiences. Preliminary coding in Aim 2 involved identifying keywords and quotes, which are critical components of developing a conceptual model (Naeem et al., 2023). Keywords are concise words or phrases that capture important ideas in the data by transforming them into meaningful and useful units to examine, which created a foundation for coding to take a more theoretical and conceptual form. The concise conceptual understanding of the data that keywords provided supported the development of codes that were concise and meaningful, categorization of data across similar topics, identification of patterns in the data, and comparison of segments of data. We also selected quotes that "bring the data to life and aptly represent diverse viewpoints and patterns pertinent to the research objectives" (Naeem et al., 2023, p. 4). Specifically, the code category 'context' captured data segments that provided evidence for the importance and relevance of the model concepts based on carceral experiences. Other keywords included phrases such as "navigating prison" and "fear factor." The quotes further demonstrated the relevance (Naeem et al., 2023), such as quotes regarding the inability to be vulnerable in prison. A critical review of keywords, quotes, codes, and themes, as well as concept mapping, was utilized to

interpret the findings and determine relationships between concepts for the model (Naeem et al., 2023). Keywords and quotes are integrated into the reported description of relevant context in the results section.

Integration of Published Literature

Building the conceptual model also involved integrating recommendations from partnerships with formerly incarcerated individuals (Awenat et al., 2018; Cohen et al., 2025; Gaber et al., 2024; O'Gorman et al., 2012; Osman et al., 2024; Smith & Jemal, 2015). Specifically, we considered how the findings map onto or relate to existing recommendations, particularly those presented in a recent review of scientific literature and identification of experiences in and best practices for partnerships with formerly incarcerated individuals (Gaber et al., 2024). This process contributed to the trustworthiness of the conceptual model. For example, one previous study interviewed four formerly incarcerated individuals following involvement as members of the research team in a study on suicide prevention in prison (Awenat et al., 2018). The authors did not set out with the goal of producing generalizable findings, nor did their method enable generalizability, and with retrospective accounts of the partnership, they were not able to assess the partnership process. Their findings can be integrated with other sources to support the development of theoretical and conceptual knowledge and inform practice (Awenat et al., 2018). This component of each concept in the conceptual model describes the integration and contribution of existing literature to the conceptual model.

Results

Preface

The conceptual model consists of three high-level concepts that provide key considerations for partnerships with community partners who are formerly incarcerated. These

concepts are referred to as "*commitments,*" based on the input provided during the second member reflections session, as opposed to more conventional terms such as dimensions or domains. Partners felt that the term commitments better reflected the experience and act of committing to connection and intentionality in these partnerships. This term also emphasizes the importance of commitment from all partners (Taylor et al., 2018).

Commitment #1: Build a Safe Space

From Theme to Commitment. The first commitment expands upon Theme 1 and reflects the necessity for intentionally building a safe space that encourages and supports vulnerability and authenticity, thereby fostering trusting relationships. As the first commitment of the conceptual model, this commitment advocates for creating a space that welcomes and invites partners to be authentic as an important initial step in developing a partnership. In fulfilling this commitment, partners recognize that each of us hold many identities, all of which are important to the relationships within the partnership. Each of us is not simply an academic or an individual with lived experiences of incarceration. In these partnerships, partners are specifically encouraged to lean into the parts that exist outside of a professional setting (e.g., parent, child, friend). One community partner articulated this invitation of authenticity well while describing the partnership space,

> What you get to be is yourself, without all the world of academics and how you're expected to act and drink wine. […] It isn't about relinquishing or giving up, it's actually bringing your gifts and leaning into all of who you are. And it's the one space you also get to be all of who you are. (Partner 10, Meeting 18)

In this way, partners share a commitment to tuning into the vulnerable sides of ourselves as well. These relationships will feel different. Vulnerability is often relational, and the relationships

developed within partnerships are not unlike personal relationships. In true relationships it would be inequitable for one individual to be vulnerable while the other remains guarded. Therefore, as community partners are being invited to engage deeply and vulnerably share their experiences, *and* the partnership is made of real relationships, the vulnerability should be reciprocated by academics. This vulnerability from academic partners resonates with community partners and significantly contributes to the genuine human connection, fostering a willingness and desire to engage vulnerably and authentically. Additionally, lighthearted conversations, humor, and laughter are important contributing factors to centering humanity, engaging authentically, and building comradery among the partnership members. Together, these elements further contribute to the creation of a safe space.

Relevant Context. Authenticity and vulnerability were shared as inherently challenging in the prison environment and beyond for many formerly incarcerated partners. Partners described that while growing up and during their incarceration, they were constantly being defined and dehumanized by others. Family members, educational institutions, and state agencies communicated deficit-based messaging that focused on perceived inadequacies rather than recognizing and elevating their strengths and resilience (i.e., a focus on what is wrong with you, rather than what is right/strong with you). For example, a partner shared that "people [told] me who I was and how I was supposed to act."

Having to navigate the prison environment contributed to the inability to be vulnerable and authentic. In prison, individuals had to navigate interactions with facility staff and other residents (i.e., "playing the game") that meant they were constantly in survival mode. Vulnerability in these interactions was a liability; it was not only emotionally risky, but also had concrete consequences on their well-being, including physical safety. As one partner noted,

> There's some dark shit that you just don't want to share with nobody else, no matter how safe you think it is. Not in that setting, because you might get mad at me bitch tomorrow, bring it up in my face. (Partner 3, Meeting 9)

Moreover, formerly incarcerated partners described that these dynamics instilled a "fear factor," contributing to an inability to be vulnerable because they needed to read every situation and interaction as potentially harmful. Therefore, the ability to be vulnerable and authentic rests on trusting that what you share will not be weaponized. One partner commented on the inability to trust in prison when they shared,

> So, 25 years in prison, like, I developed survival tactics like we all did. You know, I would tell you exactly what you wanted to hear and then turn around and tell you the opposite of whatever because that was a tactic, and I didn't trust nobody. [...] So when I'm in prison, I didn't have any trust, like to a supreme level. (Partner 4, Meeting 3)

Additionally, partners expressed that in prison what they said could be reported, misrepresented, and used against them by people who have power over them.

> I've always had that feeling like anything you say can and will be used against you. So, like being honest. That's not what they're looking for or being vulnerable. So [being vulnerable] are the things that you learn right away not to do. (Partner 9, Meeting 6)

Other partners described that showing vulnerability in prison "cost us." Therefore, while in prison individuals learned to present a carefully curated version of themselves as a protective mechanism, in which putting on a mask was necessary for survival. Another survival strategy involved "spot[ing] bullshit" as a method for scanning for danger and learning to recognize when someone is being dishonest. One partner who is formerly incarcerated described this when he shared,

> Bein' incarcerated, you're around bullshit from [City] to [City]. So, for us, it's instinctively we gon' read "That's bullshit," period. It's just natural because we've been around it. Not only have we been around it, we've been immersed in it. And for me, obviously I've been party to the crime of some o' that bullshit, so with all of that bein' said, I'm familiar with it. It ain't something that I don't know, so, y'know? […] But I can tell you when bullshit is in front of me, it's no question in my mind. And so that's part of bein' incarcerated, because you so used to bein' around the lies. (Partner 9, Meeting 18)

These survival strategies were a rational and natural adaptation to the environment, yet prohibited authenticity and vulnerability.

Authentically engaging through human connection is also relevant to the partnership, as partners who are formerly incarcerated had been impacted by institutional dehumanization. Formerly incarcerated partners described that interactions with prison staff and the broader system communicated that they were not perceived as human beings, but as a number or embodiments of stereotypes associated with incarceration. The system-level dehumanization was evident in comments such as, "And the whole system has told me everything that's wrong with me" (Partner 10, Meeting 3). Several community partners shared experiences and stories in which they felt dehumanized by prison staff ("They don't see a human being."). Additionally, a partner who is formerly incarcerated expressed that prison "take[s] all this goodness," illustrating how being in prison strips an individual of their humanity and "all that makes you good" (Partner 3, Meeting 1). The lack of human interaction, such as restrictions on physical contact, also contributed to individuals feeling dehumanized. Formerly incarcerated partners recounted experiences in which prohibition of physical contact limited their ability to offer support and connection to grieving peers. For example, a partner described being denied the ability to hug a

peer and provide her with comfort after she received the news of her daughter's death. This example reflects how the natural human desire to express compassion for another person's grief is one of many small, yet profound experiences in which an individual's humanity was limited and confined in prison.

Partnerships that build a safe space foster a trusting environment in which partners who are formerly incarcerated are invited to be their authentic selves without having to navigate what to say or not say or resist vulnerability. As mentioned in the previous section, cultivating this safe space is heavily influenced by the reciprocation of authenticity and vulnerability from academic partners. Specifically, the capacity to "spot bullshit" in prison (as described in the quote above) translates directly to community-academic partnerships. Partners who are formerly incarcerated may inherently utilize this skill to discern the genuineness of individuals in the partnership. This skill was described when one community partner shared,

> When there is genuine dialogue takin' place or there are people approachin', specifically myself, and I'm engagin' with them, I'm really readin' not so much all of what they're saying, but I'm really readin' like how genuine this person is or not, period. And that's every person I come in contact [with]. Instinctively [snaps] I can't even stop it." (Partner 9, Meeting 18)

Moreover, partners who are formerly incarcerated specifically described the importance of academic partners centering humanity and reciprocating vulnerability in the partnership. For example, Partner 9 further described the importance of academic partners being vulnerable when he shared,

> If you not open to bein' vulnerable, for me, that shit ain't gonna work at all. Like, 'cause now I don't know who you are. And if I don't know who you are, I can't deal with you,

> period. […] We not just gon' keep it at a university level. I need to still know you. […] On a humanity side, you have to be able to show that, 'Despite whatever accolades I got, I also still take a shit, I still fart.' I need to know that you hear me. 'Cause if I see you as a robot, immediately that is not gonna work with me. […] I don't care how you fluff it up, I don't even care how many numbers you put on it, like, that's not gonna work for me, 'cause I can't operate like that. I need to know who I'm dealin' with because I know that I have been in situations where people, their intent, though they put it under the umbrella like "We're here to help," they're really there to hurt you. Right? And so, because I have experienced that I need people that's gon' be authentic. And that part of bein' authentic don't mean like you gotta be like me or you have to have been in prison, but your shit stank too. Like, you just didn't go to prison, but like you still a person. (Partner 9, Meeting 18)

This quote illustrates the relevance and importance of authenticity and intentionality, partially related to mistrust of institutions based on misrepresentation of intentions. Several partners commented on the misinformation and lack of transparency from the DOC. As a result, building trust within the partnerships is a critical piece of building a safe space following years of not trusting state institutions and systems.

In these partnerships, we honor the journey that individuals have taken from receiving dehumanizing messaging for years of their lives to reclaiming their own truth and defining themselves. Therefore, it is imperative to center humanity and cultivate a space where everyone, especially those who are formerly incarcerated, are invited to authentically express their self-defined identities, lived experiences of harm, along with the resilience, perseverance, and

expertise they carry. Together, the intentionality to cultivate this environment builds a safe space and trusting relationships.

Integration of Published Literature. Published recommendations and considerations contribute to focus on relationships, authenticity, and vulnerability in this commitment of the model. Relationships and human connection have been identified as core components of partnerships with formerly incarcerated individuals (Awenat et al., 2018). Furthermore, positive relationships have been found to significantly influence continued engagement of community partners and contribute to the success of community involvement (Awenat et al., 2018). As demonstrated in the current work and published literature, key elements that promote positive relationships in partnerships with individuals who are formerly incarcerated include authenticity and genuine collaboration by centering and valuing humanity, as well as the reciprocation of vulnerability (Cohen et al., 2025; Gaber et al., 2024). In turn, positive relationships foster an environment wherein it is safe to be vulnerable, especially when candidly sharing challenging topics and/or experiences in prison (Awenat et al., 2018; Gaber et al., 2024). Specifically, 'freeness to share' and 'being listened to' in the partnership have been identified as significant contributors to formerly incarcerated partners' experiences in the partnership, especially in contrast to past experiences in prison wherein their perspectives were not pursued or respected (Awenat et al., 2018, pp. 102–103). Together, this dynamic of openness and feeling heard supports the development of respectful, non-judgmental relationships and cultivates a safe and trusting space (Awenat et al., 2018; Cohen et al., 2025; Gaber et al., 2024).

The capacity of individuals to lean in and be vulnerable can be supported by leveraging existing community-academic relationships while building new ones (Gaber et al., 2024). Therefore, it is crucial to build in time for developing these authentic relationships, which often

requires setting aside an agenda, flexibility with the agenda, and making time for organic conversation (Cohen et al., 2025; Gaber et al., 2024). One or more community partners serving as a bridge of communication and trust between community partners and academic partners, especially early on in the partnership, helps foster trust and communication among the group, navigate any challenging group dynamics that may arise, and contributes to meaningful engagement (Taylor et al., 2018).

Practical Implementation of the Commitment. Several practices that prioritize building trusting relationships by centering humanity, authenticity, and vulnerability support the development of a safe space. Building a safe space in partnerships with partners who are formerly incarcerated begins with establishing strong relationships with individual community members who are trusted and connected within the community and interested in functioning as a bridge between academic partners and other community members. These relationships with bridge community partners has proven important for fostering community engagement in research by establishing a foundation of safety and trust between partners (Aboudihaj et al., 2025; Taylor et al., 2018). Bridge community partners are a supportive channel of trust between community members and academics, such that the trust between community members and bridge community partners allows community members to feel safe entering a partnership with academics. This foundation of trust supports communication within the partnership as bridge community partners can act as interpreters between academic and community partners when necessary (Taylor et al., 2018). Additionally, bridge community partners can be especially helpful in navigating challenging group dynamics that may arise (Taylor et al., 2018). In our partnership, the bridge community partners had pre-existing strong relationships with the project PI and Co-PI, as well as the other four community partners. As a result of these pre-existing

relationships a degree of trust was already in place and community members were more willing to join the partnership, ultimately supporting the development of collective trust in the partnership.

Embracing one's humanity is a dynamic and foundational practice of authentic engagement and fostering a sense of safety. Embracing one's humanity in the partnership involves accepting and expressing all that makes us human including imperfections, contradictions, and the range of emotions from fear to joy. Partners in our partnership articulated that authentic engagement requires intentionality, a conscious decision to be present fully and honestly, especially without reliance on professional accolades or titles. Your authentic self may shift from session to session; however, transparency regarding how you show up to the space (e.g., what you may be carrying into the partnership space from your day) is essential to this process.

Part of this commitment to building a safe space is reflected in how you present yourself, whether you appear inviting or guarded. Be present and committed to connecting authentically and engaging vulnerably. In practice, authenticity in this context is an inherently vulnerable process of ongoing reflective and relational engagement. This reflection and engagement involves examining one's own belief systems, being responsive to group dynamics, pursuing personal growth, being willing and ready to listen, and being open to challenging others and being challenged in return. Be expected to be asked personal questions that may require accessing a more vulnerable side, without dominating the conversation. Additionally, the comradery within the partnership is built by engaging in playful exchanges and banter throughout conversations.

The reciprocation of vulnerability may look different among partners. Vulnerability from community partners may involve sharing personal stories from childhood that contributed to negative beliefs about themselves and the world, whereas vulnerability from academic partners may involve shedding the academic façade and connecting with other partners on parenthood or difficult relationships.

Another critical facilitator of building a safe space is maintaining flexibility in the meeting agenda (Cohen et al., 2025). In our meetings, we did not adhere to an agenda and for some, especially academic partners, this flexibility may feel uncomfortable and seem contradictory to achieving the goals of the project or grant. However, by allowing the conversation to flow naturally, partners feel more comfortable vulnerably sharing their experiences, which builds the trust in the relationships. Additionally, starting the meeting with a single overarching prompt or topic that was raised by bridge community partners rather than asking questions from a list created by academic partners (Cohen et al., 2025) and allowing community partners to respond to one another and pose questions to all partners strongly contributed to a welcoming and comfortable space. With flexibility in the meeting agenda, you may not get direct answers to questions, but you will explore key concepts of the project topic in more depth through community partners' experiences and develop a richer understanding of why those experiences matter. In our partnership, community partners took time to share deeply personal stories that seemed tangential, but ultimately led to a more nuanced understanding of why fundamentally different approaches to mental healthcare are necessary for incarcerated individuals. This flexibility also allows the agenda to evolve in real time and prioritizes more pressing community needs, such as the need for a community healing space. For example, during the two years that the CAB met, a beloved community member unexpected passed away. It was

clear that people needed and wanted our meeting time and space to collectively process and grieve. Prioritizing community needs in this way communicates the value of centering humanity and human connection.

From our experience as well as published literature, I provide the following practical recommendations, as well: (1) allocate the first 30 minutes of any gathering to share a meal (i.e., "break bread") and connect personally (Cohen et al., 2020), (2) between the meal and official meeting, collectively engage in a mindfulness practice that gives partners the opportunity to feel grounded, intentional, and connected in the shared space, (3) prioritize informal and organic conversations and dialogue (Awenat et al., 2018), (4) identify one topic or question collaboratively with community partners (e.g., bridge community partners), introduce it at the beginning of gatherings to catalyze the conversation, and then allow the conversation to flow naturally, minimizing re-direction from academic partners and (6) encourage partners to share their highs and lows of the partnership.

Finally, we co-developed a set of reflection questions related to authenticity and vulnerability for academics to consider prior to community engagement:

1. Am I truly open to accessing aspects of myself and sharing with the group?
2. Am I willing to go to a deeper place and be vulnerable?
3. What do I need to create a safe and authentic space? ("sacred space")

Commitment #2: Cultivate the Collective We

From Theme to Commitment. The second commitment expands on Theme 2. This commitment reflects the intentionality behind unifying to form a collective we. The collective we is fostered by developing a sense of belonging and shared investment in the partnership and its outcomes as a product of collective efforts. The collective we involves blending expertise in

service of a shared purpose and goal. Unlike most academic spaces, titles and accolades do not carry the same weight in these partnerships. While expertise is honored and valued, the rigid hierarchal structures that often define academic spaces are intentionally set aside, releasing individuals from the need to prove themselves, prove their worth, or secure their place within the hierarchy. Fulfilling this commitment involves actively welcoming and inviting all partners into the project, valuing and respecting everyone's contributions and perspectives, and leaning into individual and collective power. Fostering a sense of unity such that partners feel a sense of belonging in the collective we also rests on the recognition of the value of lived experience as lived expertise. Together with the first commitment, this intentionality fosters a space in which partners feel comfortable expressing if the research feels unbalanced, misdirected, or exploitive and engaging in a restorative process of reconciliation.

Relevant Context. Given the substantial power dynamics inherent to carceral settings, it is especially important for partners who are formerly incarcerated to feel that their presence and expertise are valued within the partnership and contribute meaningfully to the collective we. One factor that contributes to the experience of power dynamics was the immense control the DOC had over individuals and the lack of individual control during and after incarceration. Partners who are formerly incarcerated perceive the DOC as prioritizing control over providing support and care to incarcerated individuals. This perception was evident in comments such as,

> All these prison systems have these statements, "We wanna ensure that these inmates are, y'know, prepared to get out", but we don't care about that. What we really care about is keeping 'em in order while they're locked up. That's really all they're really concerned about. (Partner 8, Meeting 13)

Additionally, formerly incarcerated partners consistently expressed the lack of control and power they experienced in prison. For example, during a group conversation about power within the partnership a community partner shared, “We certainly didn’t have power [in prison]. Right? Or didn’t know we had the power we have. Cause everyone else said you don’t have it” (Partner 10, Meeting 17). Moreover, several partners commented on the focus on “power and control” within the DOC and how the DOC “keeps people boxed in to not living their best lives” (Partner 10, Meeting 17), limiting incarcerated individuals’ potential for healing. In terms of DOC control, community partners described that while in prison they were told when and where to eat, sleep, sit and stand, which felt demeaning and compromised their sense of agency. For instance, one community partner shared,

> I basically [gave] over control of my entire self to somebody else. And I just got to deal with that. What they gonna tell me to do, or “You got to come out of your room and go to [health services].” “Oh, you got to come out of your room and sit at this table and talk to this person.” “Oh, you’ve got to go to your room.” “You’ve got to come out.” “You’ve got to take a five-minute shower trying to get a six-minute shower,” you know. Or, “This time you can come out your room, you can eat, and then you go back into it.” (Partner 8, Meeting 15)

Furthermore, the lack of information regarding prison rules and regulations solidified a power dynamic based on the fact that people were often punished for arbitrary rules that they were never told. For example, a partner who is formerly incarcerated described that when she first arrived at prison, she spoke to an incarcerated individual in the lunch line. She was quickly reprimanded by a staff member with derogatory language about her appearance and written up for violating a no talking in the lunch line rule that she was not aware of. The lack of information

for navigating the physical and social prison environment also contributed to confusion and feeling lost, reinforcing power dynamics between incarcerated individuals and staff.

The concealment of prison conditions and treatment of incarcerated individuals by staff from public view constitutes another element of the power dynamics that individuals with lived experiences of incarceration faced. As a reflection of these conditions and treatment, community partners often described feeling that the system was "killing us" and "playing games with people's lives" (Partner 8, Meeting 1). These power dynamics contributed to the sense that "they only get away with that in prisons," due to the lack of visibility of their actions and the way the DOC is able to function. One community partner articulated this dynamic clearly when they shared, "Y'all don't know, y'all don't know what's going on and you don't know like all the shit that's like literally happening inside of prisons like because, it's hidden" (Partner 9, Meeting 11). In regard to power dynamics involving treatment of incarcerated individuals, several community partners shared that they believed they were punished for requesting mental health or vocational services, revealing how attempts to seek support for healing and personal growth were met with punitive responses and institutional control.

Another relevant contextual factor to this commitment concerns historical mistrust and exploitation. Individuals who are formerly incarcerated have experienced a history wherein their lived experience has either not been valued or been exploited, contributing to a mistrust of state institutions and systems. This history of exploitation is also evident in instances where community partners' original ideas for programs or initiatives within corrections were appropriated and implemented by those in power without proper acknowledgement or attribution of their contributions ("Take it. Steal it. Strip it," Partner 10, Meeting 16). Several partners often drew parallels between the power of the university and DOC, describing both as robotic,

transactional, exploitive, and lacking humanity, further demonstrating the importance of intentionally navigating power dynamics within these partnerships. A community partner highlighted this parallel when he shared, “And, you know, [you say], “I’m intimidated by the DOC,” but y’all got just as much as power” (Partner 9, Meeting 16).

The experience of being used or exploited was evident when community partners shared past experiences with universities and research. For most partners who are formerly incarcerated, they had no interest in participating in research prior to the partnership as a result of the exploitive practices, as one partner noted, “Because prior to this, research, for a lotta people have felt like, “Man, I’m not messin’ with y’all period, under no circumstances” (Partner 9, Meeting 18). Another community partner described that some research can be “sneaky.” She also shared how she has viewed researchers in the past and outside the partnership:

> It’s transactional too. You’re comin’ for whatever you’re comin’ for. […] You don’t have an interest in my life or what happened or where I’m at, but you want me to get some benchmarks for you, and so you can turn around and say it was a great study cause a lot of us know we’ve been pimped over and over and over again. (Partner 10, Meeting 8)

A critical component of cultivating a collective we is recognizing the influence of this history of power dynamics and how the lack of control can take root and influence how people engage with the world. Together, the power dynamics in prison and history of exploitation underscore the importance of cultivating a space wherein power is distributed, individuals’ experiences and expertise are valued, and all partners’ contributions are recognized.

Integration of Published Literature. Several considerations from published literature contribute to this commitment of the model. The concept of bringing community partners into the partnership with intentionality (Gaber et al., 2024) contributes to cultivating the collective

we. This intentionality also involves an openness to learning from each other and working together (Taylor et al., 2018). Commitment 2 centers the importance of formerly incarcerated people having a voice and influence on initiatives that directly impact their community (Cohen et al., 2025). Emic perspectives are a source of rich and detailed knowledge and reflect an expert understanding of an experience (O'Gorman et al., 2012). Therefore, trusting the wisdom of community partners with lived experiences of incarceration tangibly demonstrates to partners the high regard for their lived expertise (Awenat et al., 2018) and contributes to collective investment in the partnership. Moreover, investment in the partnership is long-term to address long-term challenges faced by the community, as short-term investment may inadvertently harm community members and the community at large (Osman et al., 2024).

Creating opportunities to hear and elevate the voices of community partners *and* acting on that input throughout all phases of the research process, especially during early phases of projects, contributes to redressing power imbalances (Gaber et al., 2024; O'Gorman et al., 2012). Making space for the focus of the project to shift based on the perspectives and input of community partners and being open to compromise further encourages all partners to lean into and grow their power (Gaber et al., 2024; O'Gorman et al., 2012), strengthening the capacity of the partnership as a whole. Moreover, centering community perspectives ensures that initiatives are community identified by responding to and addressing community priorities (Gaber et al., 2024), allowing community partners to better see the impact of their input (Awenat et al., 2018) and further supporting a sense of belonging and shared commitment. Together, these elements reinforce the foundational belief that the work and accomplishments of the partnership are built collectively and shared equitably.

The existing literature demonstrates that a sense of collective unity and confidence in the collective "we" is enhanced by ongoing and transparent communication, and reinforces the trust in partner relationships. Communication includes but is not limited to communicating logistics, sharing findings with all partners, and addressing the distribution of power (Cohen et al., 2025; Gaber et al., 2024). While managing communication in our partnership was relatively evenly distributed (i.e., project updates were communicated to community partners by academic partners and bridge community partners) academic partners in other partnerships managed most of the communication of partnership information (e.g., meeting summaries; Gaber et al., 2024). Therefore, it is important to transparently discuss how communication will be handled early in the partnership, contributing to a sense of shared decision-making and recognition of individual power. Additionally, by sharing findings with all partners and seeking feedback, the value of all partners' expertise and contribution in decision-making are reinforced. It is also important to transparently address the distribution of power based on people's backgrounds early (Smith & Jemal, 2015). Cohen et al. (2025) provide a helpful explanation of the benefits of identifying "lanes" of expertise to support the distribution of power and shared decision-making:

> As our partnership developed, we were able to define these respective lanes of expertise, distribute decision-making authority based on these lanes, and trust that the resulting decisions were in the best long-term interest of this study partnership and those for whom the research is being conducted (Cohen et al., 2025, p. 204).

The emphasis on communication and transparency also supports honest conversations to address and process conflict or exploitive research practices, which are important components of building strong and resilient relationships in the partnership (Cohen et al., 2025; Gaber et al., 2024).

The present findings and published literature suggest that the sense of unity, belonging, and shared agency fosters mutual respect, reciprocity, individual and collective power growing[6], collective capacity building, and synergy. Shared vision and goals within the partnership, as well as collaboratively defined plans to achieve those goals, promotes synergy and contributes to the sense of a collective we (Gaber et al., 2024; O'Gorman et al., 2012; Taylor et al., 2018). Additionally, formerly incarcerated individuals feel respected when their expertise and specialized knowledge are consulted and utilized (Awenat et al., 2018). Including all partners as co-authors further demonstrates the value of their expertise and reflects the emphasis placed on ensuring a mutually beneficial partnership (Buchanan et al., 2011; Cohen et al., 2025; McLeod et al., 2020). Not all community partners may choose to contribute to the writing process; however, feedback on manuscripts can be solicited via a group reading and verbal feedback (Taylor et al., 2018).

Prioritizing opportunities for community partners to facilitate conversation and pose questions fosters a sense of genuine inclusion and meaningful belonging within the collective. Community partners often ask questions academic partners likely would not have considered asking or provide helpful framing of questions that uniquely produce meaningful answers and discussions (Cohen et al., 2025). These efforts serve to build collective understanding of the topic of interest (Gaber et al., 2024) and collective capacity to navigate challenging topics and conversations.

In partnerships with formerly incarcerated individuals, sharing decision making and leaning into individual and collective power involves collaboratively navigating how to involve

[6] Together we reframed *power sharing* as *power growing*, which reflects the process of recognizing individual power, encouraging each other to lean into and grow their power, and harnessing everyone's power together to magnify our collective achievements and impacts.

the DOC in the partnership or initiatives (e.g., who from DOC, combined or separate meetings; Gaber et al., 2024). In our partnership, open dialogue offered opportunities for partners to share their fears, hesitancies, and hopes, including the desire to push the DOC towards meaningful change rather than accepting another "crumb." Community partners were concerned with being activated in spaces with DOC personnel and were mindful that their desire to challenge the DOC did not inadvertently jeopardize the meaningful work our research group was already doing inside prisons. Additionally, as DOC partners likely have the final say in the services and/or practices implemented at prison facilities, it is important to recognize the constraints of distributing power (Gaber et al., 2024).

Together, the existent literature provides additional considerations for cultivating the collective we, including being open to bidirectional learning, trusting the wisdom of lived experience, investing in the partnership long-term, creating opportunities for community partners to see the integration and impact of their input, prioritizing transparency and communication, sharing the role of facilitator, and identifying lanes of expertise to promote the distribution of power.

Practical Implementation of the Commitment. To build a collective we it is crucial to prioritize practices that communicate the value of individuals, their expertise, and their contribution to the partnership. Frame community partners' experiences as expertise by consistently deferring to their experiences and perspectives for input (Awenat et al., 2018; Cohen et al., 2025; Gaber et al., 2024; O'Gorman et al., 2012). For example, as an academic partner you may say, "We want to hear from you because you are the experts on mental healthcare in prison." Another way to emphasize the value of lived expertise and create opportunities for community partners to see the impact of their input (Awenat et al., 2018) is to bring summaries

of findings from the partnership or project to community partners to ensure that their voices and perspectives are represented well (Awenat et al., 2018; Cohen et al., 2025; Gaber et al., 2024). For example, we brought summaries of meeting content (e.g., themes related to mental health services in prison) to the meetings at least twice. As key facilitators of cultivating a collective we, transparency and communication (Cohen et al., 2025; Gaber et al., 2024) are often practiced by involving community partners in the grant application process, especially budgeting. The budget and allocation of funds is a substantial lever of power in these partnerships. Therefore, transparently planning and writing the budget can play a large role in building trust, whereas a lack of transparency can have the opposite effect.

Tangible practices for cultivating the collective we also include offering space for all partners to ask questions and play a role in the progression of the conversation, sitting in a circle in which community and academic partners intermingle, including community partners as co-authors (Buchanan et al., 2011; Cohen et al., 2025; McLeod et al., 2020), co-presenting with community partners at conferences and other academic venues (e.g., guest lectures, team meetings, seminars), and using "we," "us," and "our" language. Additionally, flexibility in the meeting agenda communicates that the trajectory of the conversation is responsive to community partners' expertise, which supports a sense of belonging in the partnership.

Commitment #3: Expect Transformation

From Theme to Commitment. Commitment 3 expands on Theme 3 and encourages a preemptive expectation of transformation, especially at the personal level, to promote an openness to experiencing and embracing transformation. The transformation is a function of Commitments 1 and 2, such that the former commitments must be upheld in order for this commitment to come to fruition. Specifically, upholding the safety and dignity of every

individual will contribute to widespread transformational impacts. Based on our partnership, it became clear that when partnerships create a safe space for vulnerability and authenticity (Commitment 1) and acknowledge the valuable contribution of every partner's voice and expertise in the collective we (Commitment 2), partners can find meaning in unexpected ways, are empowered to use their voice within and outside the partnership, and experience healing and personal growth. Moreover, transformation occurs when community partners feel safe and valued in ways that they had not in previous experiences or partnerships. This transformation is evident in the personal healing journeys of partners as a result of the space within the partnership to be vulnerable, share experiences, and process emotions. Witnessing this transformation in others also contributes to the transformational experience overall.

As seen in our partnership, the ripple effects of the partnership are evident within the partnership dynamics, as well as throughout individuals' lives and relationships outside the partnership. For example, through our partnership we co-developed and implemented several initiatives that improved the mental health and well-being of individuals impacted by incarceration. Moreover, the transformation has the potential to extend to work related to incarceration more generally as partners are collectively raising the bar for this work. These partnerships are setting higher expectations for work related to incarceration to intentionally and meaningfully engage, center, and uplift the voices of individuals with lived experiences.

By spending this time with individuals and engaging deeply, meaningfully, and authentically, academic researchers may form more personal connections than they may be accustomed to in research contexts. Therefore, rather than assuming only minor adjustments to the research process, academic researchers can expect that the partnership will impact them personally and fundamentally transform how they conduct their work and build and maintain

relationships with partners. Moreover, engaging with partners meaningfully outside the formal research process can broaden the scope of the impact of the research and challenge the status quo. Prioritizing work that challenges the status quo also serves to unite the group and reinforce a shared expectation of transformation, as one partner who is formerly incarcerated shared, "I'm so honored to be invited to this table in particular because we come from such different places but really genuinely want something different" (Partner 10, Meeting 4).

Relevant Context. Given that past partnerships and collaborations were often exploitive and did not foster a safe space for partners who are formerly incarcerated, the novelty of a partnership that centers commitments to vulnerability, authenticity and collective unity can facilitate a transformational experience. Several partners commented on the vastly different and restorative experiences in our partnership in comparison to past experiences. For example, one community partner described their experience in the partnership in the following way, "You have put together something I've never seen in 20 years. You knew that we are the experts in this area and you're taking your expertise and partnering in a way that's never been done from my perspective" (Partner 10, Meeting 8).

The status quo regarding conditions in prison has been unacceptable, especially as it relates to mental healthcare in prison. Therefore, for community partners to be satisfied with the outcomes of the partnership a disruption and transformation of the status quo is necessary. The disapproval of the current conditions was evident in comments such as, "But there was no such thing as a mental health. […] I mean, we were there when women lost their kids, and nobody would come and ask how they were doing" (Partner 3, Meeting 3). Another partner who is formerly incarcerated commented on the insufficiency of the status quo by sharing, "When we

know there are 20,000 people in 100-degree weather right now in these fuckin' places dying because they [the DOC] demand to do it their way" (Partner 10, Meeting 16).

Additionally, partners who are formerly incarcerated have experienced deeply personal and powerful transformation firsthand, and they bring that same expectation of depth to this work, especially as it relates to the impact on those still incarcerated. One community partner articulated this emphasis on the individuals outside our partnership by sharing,

> The thing is, what about those individuals who don't have a voice, who don't even realize they don't have a voice? […] This work is about us and our growth, and I heard that tonight from a lotta people. […] What's really the big picture is it's about everybody else who's not in these rooms with us. (Partner 5, Meeting 15)

Community partners are choosing to engage in this work because they are expecting that the work will have transformational impacts for individuals who are still locked up.

Integration of Published Literature. Engaging in partnerships that center the aforementioned commitments has been found to be restorative and facilitate collaborations that are not only generative, but also deeply meaningful and transformational (Cohen et al., 2025; Gaber et al., 2024). The "Expect Transformation" commitment emphasizes the importance of these transformations and that they are an integral part of people's experiences in the partnership through the many benefits they offer. These partnerships have challenged traditional power hierarchies and, specifically challenged academics to reconsider what constitutes expertise and who holds knowledge (Taylor et al., 2018).

Partnerships have also been an opportunity for formerly incarcerated partners to experience "personal journeys of change" (Awenat et al., 2018, p. 105), characterized by personal growth and empowerment. Formerly incarcerated partners have expressed that their

experiences in community-academic partnerships have enhanced their sense of purpose (Taylor et al., 2018) and increased their desire to change their life trajectory and engage in restorative practices to rectify harm they caused (Awenat et al., 2018). Moreover, other partnerships have demonstrated that community partners gained confidence and self-worth (Taylor et al., 2018), and their perception of themselves positively transformed as a result of a partnership (Awenat et al., 2018). Community partners have also come to recognize their lived experience as a form of expertise, discovering and understanding how their time in prison is a valued asset that could be channeled to support others (Awenat et al., 2018). In fact, some have shared that through the partnership they saw themselves as a changed person and someone who is not affiliated with people who may reoffend (Awenat et al., 2018).

The transformational impacts represented by this commitment also include community partners witnessing changes in how others perceive them. For example, partners who are formerly incarcerated received praise rather than disapproval from prison staff audiences when giving a presentation about another study and gained recognition and respect from academic audiences in ways they had not experienced before (Awenat et al., 2018).

Practical Implementation of the Commitment. The Expect Transformation commitment requires reflection from academic partners prior to engagement with community and early in the partnership to prepare for the transformative impacts of the partnership. Below are reflection questions that prompt intentionally entering partnerships with an awareness of your commitment and limitations, which influence the partnership as a whole, especially the downstream transformative impacts.

1. Am I prepared to change research questions and my approach to research based on community input?

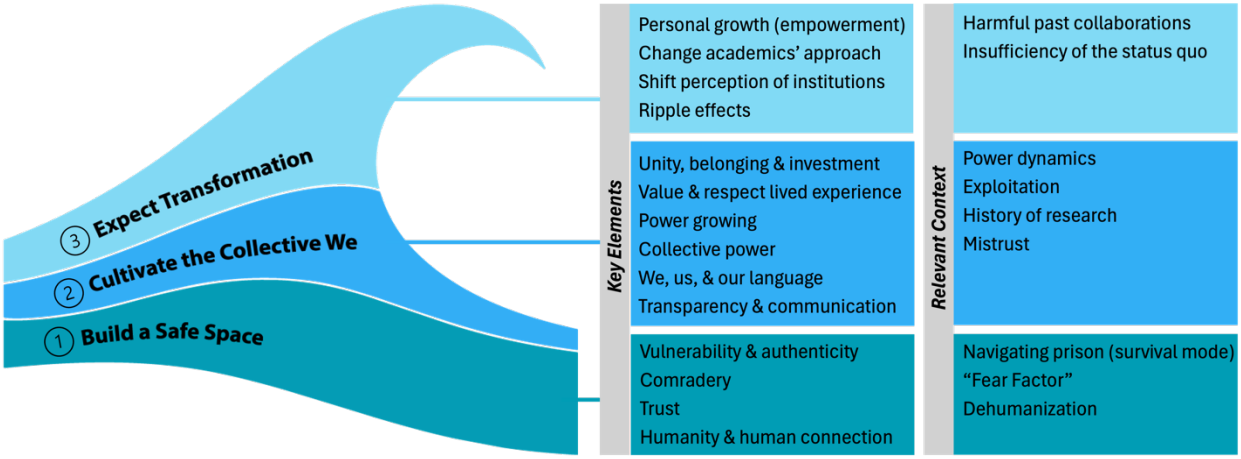
2. How much flexibility do I have in my timeline, agenda, outcomes, budget, and project goals?
3. If community partners identify priorities outside my expertise or capacity, how willing am I to communicate my limitations? How willing am I to identify and facilitate opportunities to address these priorities (e.g., recruit or connect with collaborators)?
4. How committed am I to pursuing and implementing strategies for community-oriented dissemination of the project?
5. What is my commitment to these relationships and the partnership long-term? What are the limitations to my long-term investment, if any?
6. What biases might I have related to the expertise of people impacted by the criminal legal system?
7. How will I work to integrate the expertise of individuals with lived experiences of incarceration? How committed am I to centering community voices throughout the research process (e.g., project/idea formulation, grant writing, data collection, data analysis, publishing and dissemination)?

Visual Depiction of the Conceptual Model

Together, these three commitments form the WAVE (We; Authenticity; Vulnerability; Expect Transformation) model (Figure 1). The wave represents a collective flow and forward motion that follows the embodiment of these partnership commitments. Moreover, the ripple effects of a wave mirror the downstream and widespread potential for transformational impacts of a partnership. The model also reflects the findings regarding the salience of themes over time. To this end, the commitments are not independent; as depicted in the image, each commitment builds on the previous commitment and together they contribute to a high-quality partnership.

Commitment 1 is critical for the beginning of partnerships as establishing a safe and trusting space early helps promote strong relationships. With the foundation of a safe and trusting space, the collective we begins to take shape and crystalizes as partners develop a deeper sense of belonging and investment in the partnership (Commitment 2). Finally, when Commitments 1 and 2 are put into practice, partners experience the widespread transformational impacts of the partnership.

Figure 1. The WAVE conceptual model.



Summary

In Aim 3, the WAVE conceptual model, consisting of three commitments, was developed by expanding on the three themes identified in Aim 2, identifying the contextual relevance of the commitments, and integrating published recommendations on partnerships with partners who are formerly incarcerated. Commitment 1, Build a Safe Space, reflects the importance of building a space in which partners feel safe to be their authentic selves and express vulnerability to support trusting relationships with partners who are formerly incarcerated. This safe space is especially relevant considering lived experiences of concealing one's authentic and vulnerable self in prison as a survival strategy, as well as being dehumanized. Commitment 2, Cultivate the Collective

We, emphasizes the importance of a collective we within the partnership, fostered through collective investment and belonging, as well as recognizing and trusting the expertise of community partners. The power dynamics inherent in the prison environment, mistrust of institutions, and history of exploitive research demonstrate the contextualize relevance of this commitment. Commitment 3, Expect Transformation, reflects the widespread transformation that inherently takes place when Commitments 1 and 2 are practiced and embraced on an ongoing basis, particularly because the partnership will likely be unlike any collaboration experienced in the past.

CHAPTER 6. GENERAL DISCUSSION

Existing CEnR models and guidelines provide general principles for community engagement, while lessons learned or recommendations from retrospective accounts of partnerships with formerly incarcerated individuals provide important considerations. However, a model that is grounded in an exploration of real-time partnership dynamics and incorporates relevant context specific to the lived experiences of partners who are formerly incarcerated is necessary for building meaningful and impactful partnerships. To fill this gap, the purpose of the current study was to develop a conceptual model for CEnR with formerly incarcerated individuals based on the experiences of partners in a high-quality community-academic partnership. Aim 1 demonstrated that the current partnership was high-quality in terms of the partnership dynamics and outcomes. In Aim 2, three themes were generated to describe partners' experiences in the partnership: (1) Building a safe space, (2) "It's always going to be about what we do," and (3) "Transformational work for every person in the room." Finally, in Aim 3 a consolidated conceptual model for CEnR with formerly incarcerated individuals was developed (the WAVE model), expanding upon the themes from Aim 2 and integrating context specific to carceral experiences and published recommendations from community-academic partnerships with formerly incarcerated individuals. The following discussion begins with a consideration of the findings from Aim 1, then discusses the contributions of the WAVE model, followed by limitations and recommendations for future directions.

High-Quality Partnership

Aim 1 focused on assessing the quality of the community-academic partnership and community engagement throughout the CAB meetings. Overall, the partnership was high-quality, with the assessment of quantitative and qualitative data on the partnership process

demonstrating key domains characteristic of CEnR such as trust, culturally centered, and mutual respect (Israel et al., 2026; Oetzel et al., 2018; Organizing Committee for Assessing Meaningful Community Engagement in Health & Health Care Programs & Policies, 2022). The partnership outcomes, assessed using the ACE model, also indicated a high-quality partnership. The outcomes included strong partnerships, expanded knowledge through collaboration, enhanced mental health care initiatives, and community equipped with skills and knowledge to promote the health and well-being of the community (Organizing Committee for Assessing Meaningful Community Engagement in Health & Health Care Programs & Policies, 2022). The current partnership successfully achieved the CEnR goal of increasing the quality and extent of community engagement (Milton et al., 2011). Moreover, the findings are congruent with other partnerships between academics and formerly incarcerated community partners that demonstrated a high degree of sustained engagement and development of strong relationships (Awenat et al., 2018).

The WAVE Model

Aims 2 and 3 culminated in a conceptual model for CEnR with partners who are formerly incarcerated. While the themes and commitments in the WAVE model are largely congruent with published experiences and recommendations from partnerships with formerly incarcerated community partners (Awenat et al., 2018), the method for developing the model and the three components of the model yield a model with richer nuance and depth. Published research has emphasized that partnerships involve purposeful and genuine commitment (D'Agostino et al., 2024), validating the use of the term "commitments" to represent the concepts of the model. Moreover, community partners with lived experiences of incarceration from the current

partnership specifically suggested the term “commitments” for the model, as this term reflects a deeper dedication and intentionality to the partnership.

Model Implications and Contributions

The WAVE model provides a consolidated framework by distilling the CEnR considerations that are especially important for partnerships with formerly incarcerated individuals. Without this model, there is no clear roadmap that identifies the community engagement principles to prioritize in these partnerships, as well as why they matter. Rather than simply providing a list of principles, the WAVE model details the evolution of the partnership commitments and their relationships through the progression of partnerships.

The current work involved a relatively novel and rigorous methodology for developing the conceptual model. Conceptual models are often developed by conducting literature searches or reviews (Israel et al., 2026; Kliskey et al., 2021; Mikesell et al., 2013; Wallerstein et al., 2008), gathering input from advisory committees (Organizing Committee for Assessing Meaningful Community Engagement in Health & Health Care Programs & Policies, 2022; Wallerstein et al., 2008), collecting data from internet surveys (Wallerstein et al., 2008), building on or adapting previous models (Cacari-Stone et al., 2014; Israel et al., 2026; Kliskey et al., 2021), or drawing from the authors’ existing partnerships (Killam et al., 2026). A defining feature of the WAVE model is that each commitment is an integration of three components. Similar to other conceptual models that build on existing literature, the WAVE model incorporates recommendations and experiences described in published literature on community-academic partnerships with formerly incarcerated individuals. However, the model is unique in that each commitment was informed by and built from a rigorous qualitative analysis of the

dynamic development of a partnership over time and provides context specifically relevant to partnerships with formerly incarcerated individuals.

The qualitative analysis allowed for identification of key commitments grounded in partners' experiences in a high-quality partnership. While the commitments of the model are supported by existing literature, the analysis allowed for an exploration of the progression of themes (and thus commitments) over time and the manner in which each subsequent commitment builds on the former. With regard to Theme 1 and its corresponding commitment (i.e., Building a Safe Space and Build a Safe Space, respectively), authenticity and vulnerability have been cited as important facilitators of strong and trusting partnerships (Alang et al., 2024; Gordon Da Cruz, 2017). The concept of collective effort within community-academic partnerships that characterizes Theme 2 and its corresponding commitment (i.e., "It's always going to be about what we do" and Cultivating the Collective We, respectively) is also supported by existing literature (Wallerstein et al., 2020). Moreover, the extant literature demonstrates the significant role that investment, respect, and centering community expertise to challenge assumptions about who holds knowledge further build strong relationships and promote sustained engagement (Anderson et al., 2025; Awenat et al., 2018; Christopher et al., 2008; Collins, Clifasefi, Stanton, The LEAP Advisory Board, et al., 2018; D'Agostino et al., 2024; Strand et al., 2003). The transformation experienced in the present partnership is largely congruent with existing literature, specifically that partners experienced empowerment and personal growth (Awenat et al., 2018; Cohen et al., 2025; Oetzel et al., 2018; Taylor et al., 2018), the partnership changed academics approach to their work (Cohen et al., 2025), and families and formerly incarcerated peers in the partnership recognized individual transformation (Awenat et al., 2018).

Whereas published recommendations for partnerships with formerly incarcerated individuals primarily stem from retrospective accounts of partnerships, the model commitments themselves are grounded in an exploration of the partnership dynamics as they unfolded *over time*. For the current approach, the salience and recurrence of themes, and by extension commitments, over time was considered. This approach provided a deeper and more nuanced understanding of partnership dynamics. For example, while vulnerability has been cited as an important component of partnerships with partners who are formerly incarcerated (Awenat et al., 2018), the analysis in Aim 2 demonstrated the progression of vulnerability, such that vulnerable storytelling in early meetings facilitated a safe space and later enabled vulnerability characterized by openly processing conflict and reflecting on the partnership's impact. Additionally, while power sharing is a dominant principle in CEnR literature, the present analysis demonstrated that for partners who are formerly incarcerated this principle is more about leaning into individual power and supporting each other in growing individual and collective power. The capacity to express power and recognize one another's power was facilitated by the early foundation of trust built through authenticity and vulnerability (Commitment 1), which also supported partners later feeling like a valued member of the collective we (Commitment 2). Feeling valued in the partnership (e.g., everyone having space to share) empowered partners to believe in their unique value within the partnership and increased the extent to which partners found value in the partnership as a whole (Commitment 3).

Another distinct strength of the WAVE model is its incorporation of relevant context based on the lived experiences of partners who are formerly incarcerated. The unique social, cultural, and historical context of communities are key considerations for developing partnerships (Oetzel et al., 2018; Wallerstein et al., 2008). CEnR may look different in different

contexts and settings, necessitating the incorporation of contextual information into models specific to individuals with a particular lived experience. As a precursory consideration, context shapes the nature of research and initiation of the partnership (Wallerstein et al., 2008). Context also shapes the partnership downstream by influencing group dynamics, partnership outcomes, and the research itself. Moreover, acknowledging past histories, both personal and institutional, are critical facilitators of trust within the partnership (Christopher et al., 2008). Therefore, the commitments of the WAVE conceptual model go beyond simple concepts or guidelines by providing contextual information critical to partnerships with partners who are formerly incarcerated to ground the commitments in their specific relevance to these partnerships. The context was gleaned from organic conversations that provided the raw descriptions of prison experiences and thus the rich understanding of the context. For example, all community partners shared stories of concealing emotions and vulnerability as coping mechanisms while in prison. These stories contextualized the first commitment (i.e., Build a Safe Space) by demonstrating the significance of being in a safe space that welcomed and encouraged partners to be vulnerable and authentic. Moreover, community partners shared stories of interactions with prison staff or the structure of the carceral system that reflected extreme power dynamics. Therefore, the model describes how the extreme power dynamics inherent in prison render the distribution of power and valued membership in the collective we particularly relevant and essential for these partnerships. Ultimately, the model serves to support the development of intentional partnerships by recognizing past harms and respectfully engaging with partners who are formerly incarcerated.

As an integration of the thematic analysis, relevant context, and published literature, the WAVE conceptual model serves to establish guidelines for partnerships with formerly

incarcerated partners grounded in an understanding of the dynamic development of a partnership over time. While application and testing of the model in other settings and partnerships is necessary (see Future Directions section), the WAVE model and its commitments are intended to be used as a tool to promote safe, trusting, and equitable partnerships. The model thus has the potential to promote partnerships that meaningfully and effectively address mental health inequities for people impacted by the criminal legal system.

Limitations

The composition of the partnership analyzed in this study may limit the generalizability of the findings. The WAVE conceptual was developed from experiences of a relatively small number of partners (i.e., 11 partners, 6 of whom are formerly incarcerated). Within a community of people with a shared lived experience, peoples' understanding of the experience can vary. People who have been impacted by the criminal legal system are not a homogenous population. Their shared experience of being incarcerated could differ in many ways depending on their geographic location, age, race, or gender, to name a few. With this in mind, partners were intentionally selected by the bridge community partners (i.e., community partners with strong relationships with academic partners who served as the initial bridge of communication and trust between academic partners and other community members) who have intimate knowledge of the community to bring together individuals with various experiences and perspectives.

The generalizability of the findings may also be limited given that most of the community partners currently provide peer support to individuals impacted by incarceration or have previously engaged in work that involves talking about their experiences of incarceration. These prior experiences may have influenced community partners' willingness and desire to share their experiences, as well as their approach to partnerships, together possibly shaping the development

of the partnership. It is not uncommon for partnerships to involve community partners who are leaders in the community and actively providing services and promoting health equity in their communities (Allen et al., 2011; Cashman et al., 2008; Christopher et al., 2008). Moreover, in our partnership we discussed the importance of implementing peer-support services, for which the partnership necessitates the involvement of Certified Peer Specialists to advance peer services (Fortuna et al., 2019). Therefore, it can be beneficial for partnerships to include formerly incarcerated individuals who provide peer support and/or have previously talked about their carceral experiences as they may be particularly interested in partnerships aimed at improving the well-being of individuals with that shared lived experience and more comfortable sharing their experiences in the partnership.

The results from Aim 1 were limited by an asymmetry in the types of data obtained from community and academic partners. Quantitative and qualitative data was obtained from community partners via a survey and partnership reflections during meetings, whereas only qualitative data was obtained from academic partners via reflections. This asymmetry may have skewed the data towards community partners' experiences and shaped the interpretation of the quality of the partnership process and outcomes.

While the WAVE conceptual model incorporates published recommendations and lessons learned from partnerships with formerly incarcerated partners, a formal systematic review of existing literature was not conducted. Rather, literature was selectively reviewed to inform the development of the conceptual model. While not exhaustive, the selective review was extensive, and a thorough effort was made to synthesize the breadth of relevant research. Additionally, at least one source (Gaber et al., 2025) provided best practices based on a recent comprehensive review of literature of general CEnR principles and those specific to currently

and formerly incarcerated partnerships, strengthening the confidence that the model is well-grounded in the extant literature.

Future Directions

The widespread adoption of the WAVE conceptual model requires testing and examination of the model in other partnerships. Assessing the relevance and applicability of the model within existing partnerships is one avenue for future research. Individuals in existing partnerships could provide critical insights regarding the extent to which the model and its commitments align with their experiences, and how the model might be modified accordingly. Another avenue for future research involves assessing how the model supports the development of new partnerships. Specifically, it would be important to understand whether and how grounding new partnerships in the model's commitments fosters high-quality partnerships. Doing so could involve quantitatively and qualitatively assessing the partnership dynamics and partners perceptions of the partnership by recording partnership meetings and conducting interviews.

Developing partnership quality evaluation tools for community-academic partnerships with partners who are formerly incarcerated is another avenue for future work. The manner in which partnerships are evaluated and even the conceptualization of key partnership principles varies across partnerships (Luger et al., 2020). Stronger evaluation metrics and tools are necessary for holding partners' accountable to equitable partnership practices and strengthening the evidence base for CEnR and its principles (Martinez et al., 2018). The development of evaluation tools benefits from the input of all partners in a partnership and collaboration across partnerships (Hacker et al., 2012; Luger et al., 2020; Parker et al., 2020). Moreover, tools that evaluate both community and academic partners' experiences in a partnership are critical for

understanding the quality of the partnership. Therefore, future work could involve the collaborative development of a survey for academic and community partners to complete before and throughout a partnership. The survey would reflect all partners' experiences in the partnership and all partners could contribute meaningfully to the development of the survey. Specifically, it could incorporate questions uniquely relevant to partnerships with individuals with lived experiences of incarceration and both close-ended (quantitative) and open-ended (qualitative) questions. Development of the survey would also involve distributing the survey to other existing partnerships to elicit feedback and iteratively refine the questions to reflect experiences across partnerships.

While partnerships with formerly and currently incarcerated partners involve unique considerations, future work could identify conceptual overlap and concentrate on developing a conceptual model that incorporates the specific partnership dynamics relevant to partnerships with currently incarcerated individuals. The WAVE conceptual model is specific to partnerships with individuals who are formerly incarcerated, rather than both currently and formerly incarcerated individuals. While similar in some respects, partnerships with currently and formerly incarcerated individuals differ importantly as currently incarcerated individuals are still navigating the prison environment (Penrod et al., 2016). For instance, power dynamics in prison are an important consideration for partnerships with partners with lived experiences of incarceration regardless of incarceration status (Crabtree et al., 2016). However, whether partners are actively living the power dynamics or are removed from them may shape the power dynamics in the partnership. Importantly, partnerships with currently incarcerated partners are often influenced by privacy concerns (Fine et al., 2003). Additionally, the fact that academic researchers have the privilege of leaving the prison facility at the end of the day may influence

power dynamics within the partnership. Partnerships with currently incarcerated individuals also requires approval from prison administration, which can limit engagement with currently incarcerated individuals (Gaber et al., 2025; Watson & van der Meulen, 2019). The WAVE conceptual model can provide a foundation for partnerships with currently incarcerated partners, especially regarding relevant context based on lived experiences of incarceration, yet distinct considerations are warranted.

Conclusion

There is a critical need for a conceptual model for CEnR specific to partnerships with partners who are formerly incarcerated. The current study utilized a rigorous qualitative approach to develop the WAVE conceptual model based on partners' experiences and partnership dynamics directly from meetings of individuals in a community-academic partnership over a two-year period. The WAVE conceptual model consists of three commitments, (1) Build a safe space, (2) Cultivate the collective we, and (3) Expect transformation, each incorporating relevant context from carceral experiences and existing literature. The model is intended to be used as a framework and tool to support meaningful, impactful, and equitable partnerships that can ultimately enhance the mental health and well-being of people impacted by the criminal legal system.

TABLES

Table 1. Demographics.

	All (N=6)	**Men** (N=3)	**Women** (N=3)
Age	52.67	50.33	55.0
Race			
White	3	1	2
Black/African American	3	2	1
Ethnicity			
Hispanic/Latino	1	0	1
Carceral Experience			
Total # of years	12.32	18.58	6.06
# times incarcerated	2.83	3.67	2.0
Facility type		State, min, med, max	State, min, med, max, private prison
Incarcerated since beginning of partnership	0%	0%	0%
Currently providing peer support	100%	100%	100%

Note. Demographics include the two formerly incarcerated community partners in the planning committee and the four formerly incarcerated CAB members.

Table 2. Timeline of the 20 community advisory board meetings and topics.

Meeting	Date	Topic
1	February 2023	Experiences with mental healthcare in prison
2	March 2023	Academic researchers lead PCOR training
3	April 2023	Outcomes, measures, and programs
4	May 2023	Incorporating DOC personnel into meetings
5	June 2023	Research outcomes
6	July 2023	Programs and interventions: what works/doesn't work?
7	August 2023	Recap themes & outcomes; faith and spirituality
8	September 2023	Community engagement; recruitment for research
9	October 2023	Community-academic partnerships; peer-support & language
10	November 2023	Peer-support group
11	December 2023	Peer-support group
12	January 2024	Private & individual moments of reflection
13	March 2024	Community-academic partnerships; mindfulness
14	May 2024	Peer support group
15	June 2024	Peer support group
16	June 2024	Peer support group
17	August 2024	Community engagement
18	September 2024	Community engagement: lessons learned
19	October 2024	Community-academic partnerships: group experiences
20	December 2024	Celebration!

Table 3. Domains for assessing partnership quality

	Domains	Principles	Data Source(s)
Partnership Process	Core principles of CEnR from the ACE Model (Organizing Committee for Assessing Meaningful Community Engagement in Health & Health Care Programs & Policies, 2022)	Trust	QPCOR item 8, qualitative reflections
		Bi-directional	QPCOR item 3, qualitative reflections
		Inclusive	QPCOR item 5, qualitative reflections
		Culturally centered	QPCOR items 6 and 7
		Equitably financed	Qualitative reflections
		Multi-knowledge	Qualitative reflections
		Shared governance	Qualitative reflections; project products
		Ongoing	Grants, new projects
	Other metrics (Hacker et al., 2012; Israel et al., 2005; Luger et al., 2020; Martinez et al., 2018; Oetzel et al., 2015; Parker et al., 2020)	Seeking and integrating community input	QPCOR items 2 and 9, qualitative reflections
		Mutual respect	Qualitative reflections
		Human connection	Qualitative reflections
		Communication	QPCOR item 1, Qualitative reflections
		Synergy	Qualitative reflections
Outcomes and Impact	Strengthened Partnerships and Alliances	Strong relationships	Qualitative reflections
		Partnerships and opportunities	Qualitative reflections
		Acknowledgement, visibility, recognition	Project products
		Sustained partnerships	QPCOR 10 and 11
		Mutual value	Qualitative reflections
		Trust	Qualitative reflections
		Shared power	QPCOR item 4, Qualitative reflections
		Structural supports for community engagement	Project products, grants

Expanded Knowledge	New curricula, strategies, & tools	Project products
	Bi-directional learning	Qualitative reflections
	Community-ready information	Project products
Improved Health and Health Care Programs and Policies	Community-aligned solutions	Project products, qualitative reflections
	Actionable, implemented, recognized solutions	Project products, qualitative reflections
	Sustainable solutions	Project products, qualitative reflections
Thriving Communities	Physical & mental health	Qualitative reflections
	Community capacity and connectivity	QPCOR item 12, qualitative reflections, grants, new projects
	Community power	Qualitative reflections
	Community resiliency	Qualitative reflections
	Life quality & well-being	Qualitative reflections

Note. QPCOR = Quality of Patient-Centered Outcomes Research Partnerships instrument (Fortuna et al., 2021).

Table 4. QPCOR scores.

Item	Mean (SD)
1. I had a clear understanding of the purpose of the project.	9.0 (1.0)
2. I felt listened to	9.8 (0.45)
3. Researchers were knowledgeable about people like me or were willing to learn about people like me.	10
4. I believe that I had choices in how I could be a part of the research project.	9.8 (0.45)
5. I felt accepted by all members of the research project team.	10
6. Researchers used language that was consistent with my values and culture.	9.6 (0.89)
7. Peers used language that was consistent with my values and culture.	9.6 (0.89)
8. I felt comfortable engaging with the members of the research project team.	10
9. I felt my views were incorporated into the research project.	10
10. Researchers are thinking of ways we can continue to work together in the future.	10
11. Community members are thinking of ways we can continue to work together in the future.	10
12. I feel prepared to be an equal partner in a research project moving forward.	9.8 (0.45)
Total score	117.6 (2.07)

Note. Maximum score per item = 10; maximum total score = 120.

Table 5. Analytical steps for Aim 2.

	Template Analysis (Brooks et al., 2015; King, 2006)	Development of a Conceptual Model (Naeem et al., 2023)	Aim 2 Analysis
1	Familiarization	Transcription, familiarization, selection of quotes	**Familiarization and Transcription** Verbatim transcription, reading and rereading the data
2	Preliminary coding	Selection of keywords	**Preliminary coding** Inductive and deductive coding, select representative quotes and keywords
3	Organize codes and initial themes	Coding	**Review and organize codes and initial themes** Hierarchically organize codes and brainstorm initial themes
4	Define the initial coding template	Theme development	**Construct the initial coding template** Construct the initial coding template that incorporates all codes and initial theme development
5	Apply the initial coding template to the remaining data and modify the template as necessary	[Aim 3] Conceptualization (interpret keywords, codes, and themes)	**Apply the initial coding template and revise** Apply template to the remaining data and modify the template as necessary
6	Finalize the template and apply the finalized template to the full dataset	[Aim 3] Develop the conceptual model	**Finalize the template and apply it** The finalized template is applied to the data; defining the themes

Note. Steps 5 and 6 for developing a conceptual model (conceptualization and develop the conceptual model, respectively) were not part of the analysis for Aim 2, but were the focal points of Aim 3.

Table 6. Types of codes utilized in the analysis.

Code Type	Description	Example
In vivo codes	A word or phrase that is in the words of a participant or language used by a participant, which helps to honor the voice of the participant and preserve the meanings inherent in people's experiences. This type of coding also allowed me to recognize if and when participants utilized the same language.	The code *"getting my batteries recharged"* was a unique and meaningful representation of the healing that one of the CAB members experienced throughout the partnership.
Concept codes	Assigning bigger picture ideas to larger segments of data, to suggest broader meanings that extend beyond the observable or tangible.	The code *Stakeholder identified outcomes/intervention* was applied to large segments of data to reflect interactions in which community partners were directly providing input on the structure, content, or measures for a specific initiative or offering.
Descriptive codes	Single words or short phrases to identify the topic being discussed, providing a summary and index/inventory of the transcript content beneficial to the second cycle of coding.	The code *power dynamics* was used to identify experiences of power dynamics in prison that were later differentiated via sub-codes.
Process codes	Uses gerunds (i.e., words ending in "ing") to indicate an action, which lent to codes that reflected the development of the relationships and the partnership process.	The *processing conflict* code reflected the active process of discussing and navigating conflict during the partnership.
Values codes	Reflect participants' values (what they find important), attitudes (how they feel), and beliefs (what they believe to be true), which also aided in exploring how values, attitudes, and beliefs change over time or based on context.	The *lack of adequate care* code reflected the belief that the mental health services in prison were not adequate.

Note. Saldaña, J. (2021). The Coding Manual for Qualitative Researchers (4th ed.). SAGE Publications.

Table 7. Initial coding template examples.

Code Category	Code	Code Definition	Sub-codes	Sub-code Definition	Example
Co-learning/ capacity building *(deductive)* *Definition: Bidirectional learning and building capacity for all partners to contribute to the work/project*	Multiple forms of expertise *(deductive)*	Sharing a reality of prison/being incarcerated or formerly incarcerated based on lived experience Or evidence that people value academic and community/lived expertise	Delivering care/services *(inductive)*	Expertise that comes from providing care/a service to people in prison or in the community who have been incarcerated	*"And I think from your perspective of working inside, and mine working inside, it just has to be the right people, who have enough influence that that won't-- they can't-- whoever they might be, for the moment-- would shut it down."*
			Programs while incarcerated *(inductive)*	Experience with a particular program or treatment while in prison that contributes to their lived expertise. This is specific to experiencing the program, not necessarily knowledge acquitted about a program.	*"And then the only group that I really ever participated in that, like, altered my, it was like a, just a shift in my personality was, um, you know, a restorative justice in [prison facility]."*

Developing the partnership/ partnership process *(deductive)*	Partnership characteristic/culture *(inductive)*	Descriptions of the partnership and the culture within the partnership	No judgement *(inductive)*	People can share without fear of judgement	*"I know we're good. You could tell me anything right now. I'm not going to judge you, none of that."*
			Investment *(inductive)*	Investment in the project partnership process as a whole OR investment in building relationships. If someone is asking for clarification - it would only be considered investment if they were asking something more substantial and adding to the conversation (as opposed to simply asking for someone to rephrase/explain or whatever). Differentiation: the code *investment in outcomes* reflects an investment in the	*"I'm totally in."* *"I'm an optimistic idealist. So this really, really sounds real good. And I mean, I I'm like really on board with the whole thing. And I'm just, like, really eager to start getting involved and getting some, some grip on this because I know a lot of people can benefit from this stuff."*

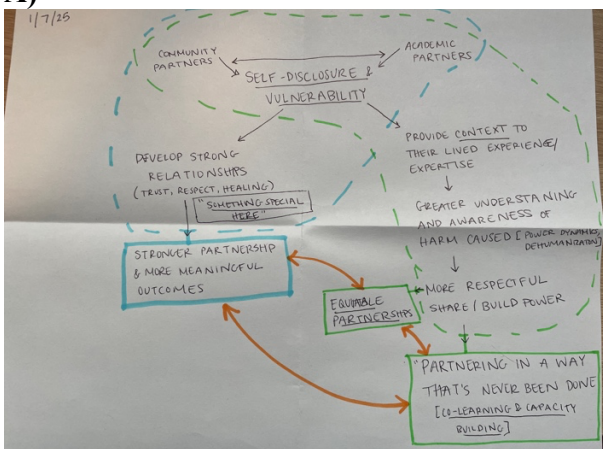
		products and outcomes of the partnership.

Note. Each code category had between 0-15 codes, and codes had between 0-8 sub-codes. Two code categories, each with one code example and two sub-code examples, are presented.

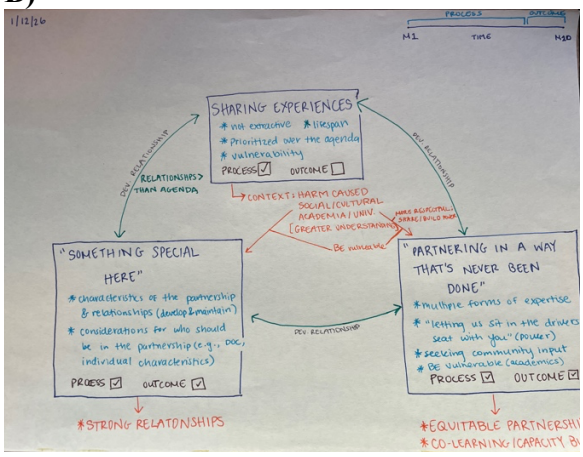
SUPPLEMENTAL MATERIAL

Supplemental Material A. Examples of concept maps.

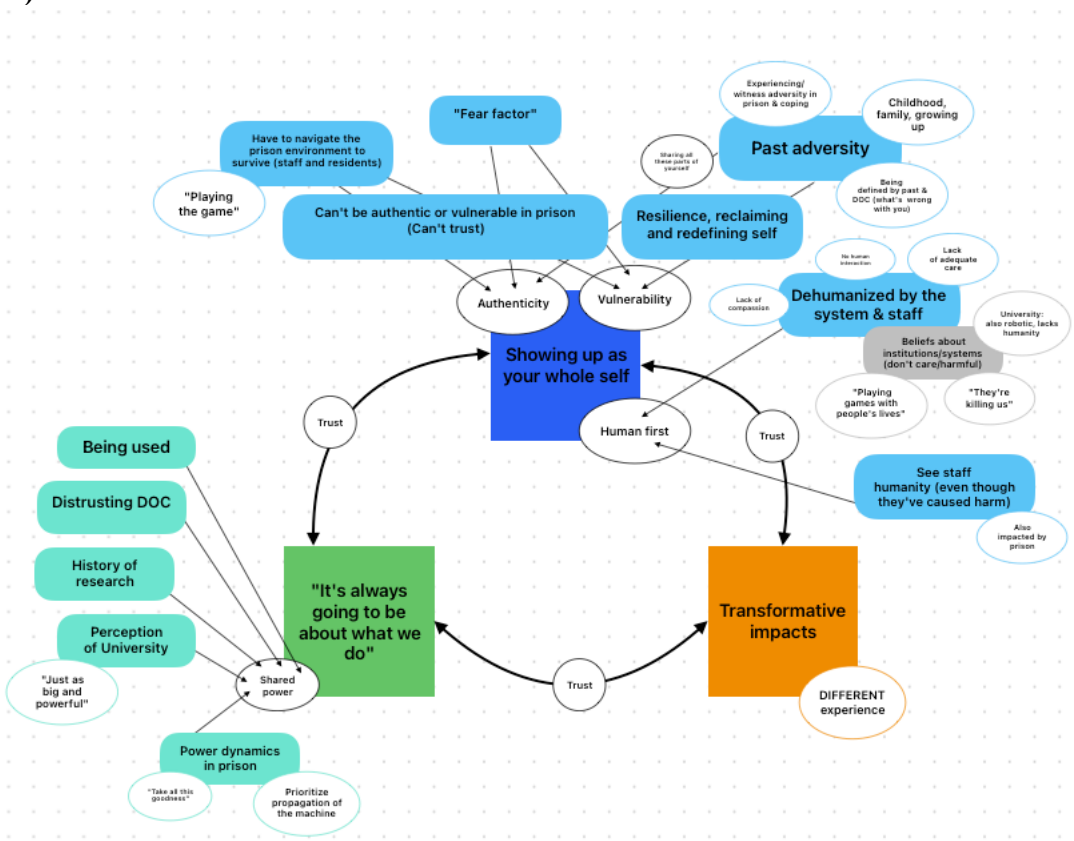
A)



B)



C)



APPENDIX

Appendix A. Modified Quality of Patient-Centered Outcomes Research Partnerships Instrument

Instructions: Consider your experience with the partnership for this PCORI project and respond to each of the following questions on a scale from 0 = "No effort was made by researchers/community partners" to 10 = "Every effort was made by researchers/community partners" (depending on the question). You do not need to place your name on the instrument.

Write in a score between 0–10

1. I had a clear understanding of the purpose of the project. _____
2. I felt listened to _____
3. Researchers were knowledgeable about people like me or were willing to learn about people like me. _____
4. I believe that I had choices in how I could be a part of the research project. _____
5. I felt accepted by all members of the research project team. _____
6. Researchers used language that was consistent with my values and culture. _____
7. Peers used language that was consistent with my values and culture. _____
8. I felt comfortable engaging with the members of the research project team. _____
9. I felt my views were incorporated into the research project. _____
10. Researchers are thinking of ways we can continue to work together in the future. _____
11. Community members are thinking of ways we can continue to work together in the future. _____
12. I feel prepared to be an equal partner in a research project moving forward. _____

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