STIGMA: YOU DO YOUR TIME, YOU COME OUT AND DO MORE

A phenomenological analysis of the experiences of stigma as lived by ex-prisoners

A thesis

submitted in fulfilment

of the requirements for the degree

of

Masters of Social Sciences (MSocSc)

at

The University of Waikato

by

Brigitte MacLennan

THE UNIVERSITY OF

WAIKATO

Te Whare Wānanga o Waikato

2015

Abstract

This thesis explores the phenomena of stigma and its effects upon offenders who have spent time in prison. There has been a long history of stigma attached to those who have engaged in criminal activity. As far back as the late 1800's it was concluded that a criminal could be identified by their physical facial features alone. While it is no longer common to stigmatise offenders based on the distance between a person's eyes, there is still a great deal of stigma attached to having been in prison which can prevent offenders from living a pro-social life. There is little research in this area, particularly within the New Zealand context. This thesis uses phenomenological research to engage with the participants in order to gain an understanding of their lived experiences with stigma. Interviews were conducted to explore this phenomenon. Allowing offenders who have served time in prison to have their experiences heard has potential implications for policy makers with regards to release conditions and also for services that are run in prisons. Making successful transitions from prison living to living a pro-social life has benefits for not only the offender, but the community in which they are residing as a whole.

Acknowledgements

The topic of stigma is a very sensitive one, particularly with regards to offenders, and I was unsure if this research would ever take place. For a while there it almost did not, as it was proving extremely difficult to get access to participants. However, I eventually found a wonderful organisation who works with recently released prisoners and was willing to help me conduct this study. Without the courageous work they do and their willingness to assist me, I would not have been able to complete this study. For their unending generosity I am extremely grateful.

This research would have been utterly impossible without the participation of the clients of the not-for-profit charitable trust. I wish to express my deepest gratitude to these brave men who spoke so freely with me about such a sensitive topic. Their willingness to be so open and honest with me, a complete stranger, was heart-warming and of enormous benefit to this research. I cannot thank each and every one of you enough.

I am also very grateful to Dr Neville Robertson whose guidance and assistance came at just the right time!

This research would not have been completed and this thesis would not have been written without the support and love from my fantastic mother, Jill Selwood. I believe I got my resilience from her, among other fabulous qualities, and without that resilience and her emotional and financial support throughout the thesis writing ordeal I am unsure if this thesis would exist. Thank you, Mum.

I encountered quite a few people who were very upset that I was undertaking this research. They were very vocal in their displeasure. They felt that I should be doing what I can to discredit these men and to instead focus on their victims. It is with gratitude that I thank these people for proving to me time and again that this research needed to be done and that these men's experiences must be heard.

Table of Contents

Table of Figures

Chapter 1: Introduction

The topic of stigma and ex-prisoners in New Zealand is one that has not yet been comprehensively examined. Literature that addresses the issue of stigma that offenders face in New Zealand is extremely limited. Research from the United States of America has found that those offenders with multiple parole violations, who live in a neighbourhood where time spent in prison is the norm, with low familial and social bonds, and who identify strongly with other offenders expect stigma from the general public (LeBel, 2012). Other studies from overseas, through questionnaires with the general public, in-depth interviews with offenders, evaluations and an archival analysis of a government sponsored organisation, show that offenders find it difficult to obtain employment, have feelings of shame, depression and fear, expect significant rejection, and have self-stigmatising beliefs that lead to extremely poor reintegration (Chui & Cheng, 2013: Homant & Kennedy, 1982; Tewksbury, 2012; Vennard & Hedderman, 2009; Winnick & Bodkin, 2008). Even though finding employment is extremely difficult, research has shown that offending is reduced when offenders gain employment and that this has a strong positive effect upon long term desistance behaviours (Vennard & Hedderman, 2009). The employment of ex-prisoners not only provides basic needs for them, (i.e. shelter, food, transportation, and clothing), but also provides a sense of self-efficacy and of being a fully functioning member of society again (Lockwood, Nally, Knutson & Ho, 2012).

The majority of research with offenders in New Zealand appears to come from a perspective based in clinical psychology with a correctional focus.

This focus is on treatment and rehabilitation for high-risk violent offenders and sex-offenders (Polaschek, 2010; Polaschek & Kilgour, 2013; Rucklidge, McLean & Bateup, 2013; Slater & Lambie, 2011; Wilson, Kilgour & Polaschek, 2013). There is a need that has not yet been met for research to be undertaken in the area of stigma and general offenders in the New Zealand population.

Rationale

While there is research from New Zealand around the separate subjects of stigma and offenders, there is no New Zealand literature that addresses the issue of stigma that ex-prisoners in general face, which encompasses all offenders as opposed to individuals who have committed specific crimes such as sex-offences, for example. Any stigma research that has been conducted in New Zealand has had a very limited scope and does not address the concern of stigma and non-specific offenders (Henrickson, Dickson, Mhlanga & Ludlam, 2015; Malinen, Willis & Johnston, 2014; Thornicroft, Wyllie, Thornicroft & Mehta, 2014).

Malinen, Willis and Johnston (2014) examined the impact the media has on its representation of sex-offenders with regards to the general public. It was hypothesised that inaccurate, fear-inducing media representation of sex-offenders would result in the creation of negative attitudes towards sex-offenders in the general public which would therefore create barriers towards reintegration and possibly endorse ill-informed legislation. Three vignettes were presented to eighty-seven participants, comprised of one informative media portrayal of a recently released sex-offender, one fear-inducing portrayal of a recently released sex-offender, and one with no

media portrayal as a control condition. Three components of the participant's attitudes were measured: affect, cognitive beliefs and behavioural intentions. The results show that informative media portrayal had a significant influence on the cognitive and behavioural components of attitudes; however the affective component and implicit attitudes consistently remained negative. This shows that the media may play a powerful role in influencing public opinion towards sex-offenders.

Thornicroft, Wyllie, Thornicroft and Mehta (2014) investigated the effect the anti-stigma and discrimination programme "Like Minds, Like Mine" had had on those with mental health issues who experience stigma and discrimination. This examination was performed to ascertain if this campaign had contributed to a reduction in stigma and discrimination, as well as the degree and nature of anticipated and experienced stigma experiences over the previous five years. A questionnaire was used utilising a modified version of the Discrimination and Stigma Scale (DISC-12). A total of 1135 participants completed the questionnaire. Results found that 54% of participants had experienced a reduction in discrimination and stigma experiences in the previous five years. A total of 48% of participants attributed a reduction in stigma and discrimination to the "Like Minds, Like Mine" programme at a level of either "moderately" or "a lot". However, 89% reported experiencing "a little" unfair treatment in the previous 12 months, which mainly came from family members. Nearly two thirds of the participants had concealed their mental health status for fear of stigma or discrimination and one third had anticipated discrimination due to their mental health status to such a degree that it had

prevented them from applying for work. This study shows that there has been clear and positive steps forward in the reduction of stigma and discrimination in regards to mental health in recent years, yet there are more positive steps that need to be undertaken.

Henrickson, Dickson, Mhlanga, and Ludlam (2015) explored how stigma, lack of knowledge and prevalence maintain HIV risk among Black Africans in New Zealand. This research was undertaken as Black Africans are the second highest group after homosexual men to be carriers of HIV, there is a comparatively large African community in New Zealand and also a total lack of national research in this area. This study had the objective of using its results to inform HIV prevention, as well as promoting health programmes. An anonymous survey and focus groups around New Zealand found that older age groups of Black Africans had higher levels of knowledge and positive attitudes compared to younger age groups. Some beliefs about HIV are still informed by traditional attitudes and stigma about HIV is very high among Africans. Western sexual identity constructs are not meaningful to the African community. These results indicate that there is an urgent need for a culturally informed strategy for risk and stigma reduction.

While these empirical investigations are valuable in exposing the impact of stigma in New Zealand, they do not give a voice to offenders who have been in prison regarding the effects of living a stigmatised life. This research aims to change that by allowing ex-prisoners to speak about their lived experiences with stigma. The goal in doing so is to capture these

individual's experiences about their new life outside prison in an attempt to better understand the nature of the phenomenon of stigma.

The current study seeks to explore issues relevant to male prisoners who are making or have made the transition from prison to living back in the community. Given my interest in obtaining ex-prisoners' points of view, I did not want to explore other people's stigmatising attitudes towards offenders, for example employer's attitudes towards offenders. I also did not want to limit this research to stigma and employment, stigma and housing, or the stigma associated with specific crimes. The vast majority of offenders are from the general offender population (as opposed to only sex or drug offenders, for example) and therefore I felt it would be most beneficial to keep this research open to any offender who would be willing to participate in this research, regardless of their crime.

I believe that this exploratory research has the potential to eventually contribute to policy changes that can ease the transition back into the community for all involved, both within the prison system and community-wide. While this study is investigative in nature, it does have the potential to be of practical benefit on a social policy and in-prison provider level. Policies should promote economic opportunity and social support for offenders. Given the alarmingly high rate of recidivism in this country, with 80% of offenders re-offending within two years of prison release and 52% returning to prison within five years, I am unsure that this need is being met (Nadesu, 2008). Harnessing a greater understanding of how things really are in the life of ex-offenders outside the prison walls, as this study has the possibility to do, could have a role in the services that are provided

for offenders in prison and upon release. Potentially, this research could provide clinical psychologists, those running programmes in prisons, and policy makers the opportunity to learn and develop a greater understanding about the lived experiences of this vulnerable group which should have implications on how this group can be better served. I believe the topic of stigma and ex-prisoners is one that is worthy of academic investigation.

Chapter 2: Literature Review

Stigma

Sociological conceptualisation

Erving Goffman is widely acknowledged for his work that conceptualised and created a framework for studying stigma. In his classic analysis of the concept of stigma, Goffman (1963) developed a definition of stigma as being a "mark" or "attribute that is deeply discrediting" (p.3) that designates an individual as different from others, and reduces them "from a whole and usual person to a tainted, discounted one" which disqualifies individuals from acceptance and participation in society (p.3). There have been other attempts to define stigma, yet throughout history the definition of stigma has remained relatively unchanged by both sociologists and psychologists.

In 1895 Emile Durkheim explored the phenomenon of stigma and explained that societies will regulate norms and deviations from norms in order to highlight abnormal behaviour and regulate common values within society (Durkheim & Lukes, 1982). This regulation was achieved through judging others in society based upon social norms and what was expected of those who participated in society, with those who deviated from those values being stigmatised and punished for their bad behaviour.

Goffman (1963) wrote one of the most influential treatises on stigma, in which he explains that stigma lies in the discrepancy between what he termed an individual's "virtual social identity" and their "actual social identity" (p.2). Both of these identities are contained in perceptions. A

virtual social identity is how others in society perceive and respond to an individual, whereas an actual social identity is how an individual perceives themselves. The manner in which an individual may be viewed can be extremely negative, even to the point of inciting fear based purely on others perceptions of them. However, that individual may define and view themselves in a completely different way and almost always in a more positive manner (Tewksbury, 2012).

The majority of those who study stigma regard it as a social construct, in that stigma is a label that has been created by society. Stigma is a paradigm that has been created by society in order to define those who are less desirable and therefore not worthy of being included in society (Major & O'Brien, 2005).

Psychological conceptualisation

Psychologists agree that stigma has "variability across time and cultures in what attributes, behaviours, or groups are stigmatised (Major & O'Brien, 2005, p.395), and that there is also commonality across cultures in what those attributes are that are stigmatised. Humans living in groups have developed cognitive adaptations that are the basis of stigmatisation to those who possess certain attributes which indicate they are a poor match for social interaction. For instance, an individual may possess an infectious parasite, or they may be indicated as a member of an out-group (those who are deemed unworthy of belonging to the majority group, the in-group) that can be exploited for the gain of the in-group (the majority

group who decides who is to be excluded and placed in the out-group) (Major & O'Brien, 2005).

A psychological effect of stigma is how labelled differences are linked to stereotypes, an aspect of stigma that is fundamental to its conceptualisation (Link & Phelan, 2001). The link between labels and stereotypes is psychologically significant as it addresses the thought processes that facilitate the connection between them, which can show why and how that link exists. An example of this is seen in the work of Crocker, Major and Steele (1998) who suggest that stigmatisation occurs when a person has, or is believed to have, "some attribute or characteristic that conveys a social identity that is devalued in a particular social context" (as cited in Fiske, Gilbert, & Lindzey, 1998, p.505). The link in this instance is the belief of the possessed attribute.

This psychological focus on stigma can also be seen in work by Jones, Farina, Hastorf, Markus, Miller and Scott (1984) who expanded on Goffman's (1963) explanation of stigma by describing it as the relationship between an attribute and a stereotype. Possessing, or being believed to possess, an undesirable attribute deems those individuals who possess it as unsuitable for social exchanges. The attribute acts as a marker which can lead to negative stereotyping. For instance, an individual's occupation, use of language, or gender may prompt others to think of a negative stereotype that stigmatises those who possess it. Those who bear the undesirable attribute/mark can experience status loss as a result of being positioned in a category that creates separation from the marked and those who perceive the mark. Jones et al., (1984) argue that stigma is a

"devaluing social identity" (p.124) that not only exists in the stigmatised individual but also within the social context that defines that particular attribute as devalued.

Major and O'Brien (2005) identify stigma as possessing a characteristic, or mark, that "conveys a social identity that is devalued in a particular social context" (p.395). The mark of the stigmatised is associated with negative evaluations and stereotypes which are well known and shared extensively among communities. These stereotypes then become the basis for exclusion or avoidance of the marked individual.

What all of these definitions have in common is the shared assumption that people who are stigmatised have, or are believed to have, a specific attribute that indicates to others they are different and therefore have lost their value as members of their own communities.

Contexts of stigma

The conceptualisation of stigma goes back to a time where the ancient Greeks would cut or burn signs into those who had committed traitorous or criminal acts, or those who were slaves. This was done in order to easily identify these soiled people so they could be avoided (Goffman, 1963). While people today are no longer forcibly branded with a red hot poker or a knife, the phenomenon of stigma is still extremely strong (Bresnahan & Zhuang, 2011; Chui & Cheng, 2013; Hessini, Kumar & Mitchell, 2009; LeBel, 2012; Lockwood, Nally, Knutson & Ho, 2012; Lopes, Krohn, Lizotte, Schmidt, Vásquez & Bernburg, 2012; Lucas & Phelan, 2012; Tewksbury, 2012; Viki, Fullerton, Raggett, Tait & Wiltshire, 2012). The concept of

stigma has been used in various areas of research including exotic dancing (Lewis, 1989), obesity (Corrigan & Rao, 2012), HIV/AIDS (Emlet, 2005), mental illness (Link, Castille, & Stuber, 2008), culture (Yang, Kleinman, Link, Phelan, Lee, & Good, 2007), substance abuse (Link, Struening, Rahav, & Nutbrook, 1997), social status (Meyer, Schwartz, & Frost, 2008), abortion (Hessini, Kumar, & Mitchell, 2009) and smoking (Stuber, Galea, & Link, 2008), to name but a few.

The concept of stigma has branched out from criminals and slaves to also encompass those who have a physical characteristic or hold a group membership that deems them unworthy of full membership in society; sometimes even within groups. Ricciardelli and Moir (2013) found that sexual offenders are delivered the double penalty of banishment from community life in the form of jail time, as well as the ostracism of fellow inmates, including refusal of membership into prison groups. This illustrates that while an individual can be given the label of offender, there are times when others in the group 'offender' will deny access to the group to a fellow offender they consider too blemished to belong.

It should be noted that historical and contextual factors shape stigma. What was stigmatising at one point in time, may not be considered stigmatising in another. An example of this is how the American Red Cross used to racially segregate blood plasma. It was the policy of the American Red Cross to ensure that only white people were infused with blood from other white people, and no cross-contamination occurred between black people's blood and white people (Wailoo, 2006). However, during World War II when Nazism and Aryan racial ideology was being fought against,

this caused closer inspection of America's own assumptions and racial dogmas. The "spoiled identities" that Goffman (1963) speaks of were looked into at greater depth with regard to how they were created and maintained along with the racial ideologies in American society. Up until this moment in time there had been no critical analysis of the stigma associated with having what was considered to be impure blood flowing in a white man's veins. It was at this point in American history that more studious consideration was given to the mechanisms of stigma in society, with a particular focus on group inferiority and how that effected public health (Wailoo, 2006). It would be naïve to suggest that black Americans are no longer stigmatised in American society, however their blood is no longer segregated at the American Red Cross.

Contextual factors have a strong bearing on stigma. What is deemed stigmatising in one situation, may be considered completely normal in another. For example, a Muslim man in traditional clothes might be stigmatised in an airport or walking around a predominantly non-Muslim city, but not when surrounded by other Muslims or practising his religion in a mosque.

The dominant group controls which groups are stigmatised depending on the function of the stigmatisation. Stigma serves different purposes, for example, enhancing one's self-esteem through comparison to those less fortunate or as a social control mechanism by reinforcing one's world view and cultural norms (Crocker & Major, 1989).

Impact of stigma

Historically and contemporarily the concept of stigma has remained the same in that when devalued individuals or groups are labelled, that allows the non-stigmatised within society to designate them as outsiders and to separate them from their communities, creating an in-group and an out-group. Fundamentally this means that those who are stigmatised have been made outcasts and have been ostracised to such a degree that they experience a status loss that is so profound that they are no longer seen as part of society, or in fact even allowed to participate as a member of society (Becker, 1963; Goffman, 1963; Link, & Phelan, 2001; Lucas & Phelan, 2012; Major & O'Brien, 2005; Ricciardelli & Moir 2013).

The implications of being placed in the out-cast group consist of suffering anxiety and depression at the moment of being cast out, followed by a long-term general lack of well-being including damage to the immune system and cardio-vascular health ultimately resulting in an earlier death than those in the in-group. "Throughout human history, being banished from a group has amounted to a death sentence" (Fiske & Yamamoto, 2005, p.185).

Belonging to an in-group is of paramount importance, as the in-group shares common goals which assists other core social motives such as being part of a socially shared understanding, the sense of being in control of one's outcomes, knowing that one is able to enhance themselves unimpeded, and being able to have trust in others (Fiske, 2004). Out-group members, by definition, do not share common goals with those in

the in-group. Those in the out-group may view the goals of the in-group with indifference or even outright hostility, which makes them appear threatening to the in-group and can provoke extreme negative feelings towards them . This approach to social behaviour serves as a function to separate 'us' from 'them' in order to promote shared goals within the in-group.

The process and maintenance of stigma has overwhelming consequences for those being stigmatised. Stigma impacts an individual's identity, their thoughts, their behaviours and their emotions (Jones et al., 1984). Specific negative consequences of stigma include social banishment, public recognition which can result in being identified as less than other people, emotional distress, low social status, poverty, physical illness, insults, depression, loneliness, poor mental health, discrimination, and reduced access to basic necessities such as education, housing and obtaining employment (Crocker et al., 1998; Major & O' Brien, 2005; Tewksbury, 2012). Stigma leads to other people avoiding living with, socialising with, working with, renting to, or employing the stigmatised individual (Corrigan & Penn, 1999).

Being stigmatised has an impact on help-seeking behaviours. Nearly two-thirds of people with diagnosable mental health disorders do not seek treatment (Clement, Schauman, Graham, Maggioni, Evens-Lacko, Bezborodovs, Morgan, Ruach, Brown, & Thornicroft, 2015). Stigma surrounding mental health and a lack of information about mental health forms a barrier that prevents those needing help from seeking it for fear of reprisals (Clements et al., 2015). Stigma also leads to low self-esteem,

hopelessness and isolation. It has been found that a low self-worth in response to stigmatisation is a predictor of poorer social adjustment (Prince & Prince, 2002).

One of the major impacts that stigma has is the disruption of social interactions (Blascovich, Mendes, Hunter, Lickel, & Kowai-Bell, 2001). When social exchanges between the stigmatised and the non-stigmatised occur, there is an awkwardness that disrupts the flow of social interaction. Each disrupted interaction contains a great deal of anxiety between both the stigmatised and the non-stigmatised parties which may be associated with strain and feelings of discomfort. These feelings of anxiety and discomfort can begin even prior to the interaction taking place, due to the anticipation of a negative social interaction (Blascovich et al., 2001). Not all interactions between stigmatised and non-stigmatised individuals have the effect of anxiety, it rather depends on the type of stigma (Hegarty & Golden, 2008).

Both parties in social interactions bring stereotypes and prejudices with them into each exchange. Those who are being stigmatised are very much aware of the dominant culture's view of their stigmatised identity and their devaluation and place in society (Crocker et al., 1998). Possessing this knowledge can cause the stigmatised individual to view their own stigma in a negative light, thus causing an increase in their anxiety levels prior to a mixed interaction (Heatherton, Kleck, Hebl, & Hull, 2000).

Non-stigmatised individuals approach social interactions with expectations about how the interaction will transpire, with particular regard to the status

of the other participant in the interaction. There is an expectation that both individuals will be non-stigmatised, and when this occurs, the interaction flows smoothly. It is when the non-stigmatised individual's expectations are violated that the predictability of the interaction is compromised and a stilted, anxiety-filled interaction takes place (Heatherton et al., 2000).

Language that is used to discuss offenders has an influence upon stigma. Media discourse and its impact on offenders has recently been studied in New Zealand. Riches (2014) used critical discourse analysis to identify how the media used linguistic tools and core assumptions/constructions, and how this has a profound impact on the identity of offenders. A traditional linguistic analysis was performed on news reports which included an "examination of semantics vocabulary, grammar, sentence structure, and writing system, as well as an assessment of textual organisation and overall structure" (Riches, 2014, P. 29). An intertextual analysis was then implemented in order to establish the dominant discourse within the texts. A final analysis was then undertaken which reflected upon the sociocultural dimensions of news report in question, including investigating the wider social and cultural norms along with underlying ideologies in which the news reports occurred.

The use of these linguistic tools and core assumptions/constructions creates an 'othering' effect, meaning that those who are othered are considered to be outside the acceptable norms that society has deemed appropriate. Othering has been defined as "imagining someone as alien and different to 'us' in such a way that they are excluded from 'our' 'normal', superior and civilised group" (Holliday, Hyde & Kullman, 2004, p.

3). Being othered has a profound effect upon how offenders are regarded within the community. These effects include "constructing single dimension identities, depicting criminals as different from 'us'; stereotyping and constructing a unified criminal identity; racial profiling; using dehumanising language; and disregarding offenders' privacy, safety, or human rights" (Riches, 2014, p. 39).

Those who are stigmatised live in a constant state of environmental threat, meaning they do not feel safe in any environment they are in and they tend to become vigilant about their lack of safety and are persistently alert to cues that could signal threat (Kaiser, Vick, & Major, 2006; Murphy, Steele, & Gross, 2007; Purdie-Vaughns, Steele, Davies, Ditlmann, & Crosby, 2008). Perceptions of threat have the effect of prompting psychological, cognitive and emotional coping reactions (Allport, 1954; Cook, Purdie-Vaughns, Garcia, & Cohen, 2012). For example, when observing children in a classroom, minority students may be vigilant of teacher bias. If it is perceived that this is the case, then the classroom may become an unwelcome and unsafe place for them, which in turn creates perceived bias for future interactions. Ultimately, this intensified vigilance could become self-reinforcing and destabilising. This ensures that the students' sense of belonging and self-efficacy are vulnerable to each passing threat. The consequence of such chronic vigilance is that those experiencing it ensure their sense of belonging is contingent on situational cues which turns the "ups and downs of life into peaks and valleys of the self" (Cook et al., 2012, p.480). This scenario is easy to see in any number of situations where stigma is occurring and a perceived threat is implied,

for example, in the workplace, for those who have mental health issues, for those who have stigmatising medical issues like HIV/AIDS, and for offenders living in the community.

Controllability of stigma

Stigma has multiple manifestations and has a significant influence on an individual's place in society and interactions with others (Tewksbury, 2012). The degree to which stigma is perceived to be controlled is important because those who are believed to be able to control their likelihood for being stigmatised are even further stigmatised for straying from the desired social norms (Crocker et al., 1989). The notion of controllability is closely correlated to responsibility and therefore those who have chosen not to control their actions and now possess a stigmatised status are seen as irresponsible and deserving of the rejection, shame, and all other factors that come with being stigmatised. If a person has been experimenting with drug taking and then develops an addiction, this is seen as controllable and entirely within the realm of personal mastery, whereas if an individual was in a bad accident that necessitated the use of drugs which then developed into an addiction, this is viewed as comparatively uncontrollable (Schwarzer & Weiner, 1991). Individuals who are addicts, obese, or mentally ill are treated better when it is thought that these conditions come about through uncontrollable biological factors as opposed to personal weakness or personal choices, such as offending (Hegarty & Golden, 2008).

Concealability and visibility of stigma

Stigma can be visible, such as ethnicity or physical deformities, or concealable such as religion, sexual orientation, or mental illness. Visible stigmas are characteristics that are not able to be hidden, which is a very important distinction to make from concealable stigmas. Auditory cues, such as a stammer, are also considered to be visible. A stammer is not visual, but it is a very observable mark, certainly one that is not able to be hidden at will. These visual cues act as a signal to those people who are interacting together and determines the initial response to the person who possess the visible mark. Therefore, visual cues are used to discredit an individual even before any social interaction has taken place (Lick & Johnson, 2014).

In contrast, those who have concealable stigmas, who are able to hide their stigma from others, do not have to face such negativity immediately in interactions with others. However, they do have to live with considerable stressors such as making the decision to conceal or disclose their hidden status, the constant fearful worry of being found out, and in some cases being detached from their true self – such as the case with hidden sexuality, whereby an individual feels they need to hide the sexuality they identify with for fear of repercussions (Pachankis, 2007). In some cases offenders can be seen as having visible stigma, such as being picked up in a public bus with a uniformed corrections officer while carrying a box of their possessions that has been stamped with the name of the correctional facility they have just been released from. However the stigma of an offender can also be concealed, when once living again in the community

and interacting with people in situations where there is no need to identify themselves, grocery shopping for example. In such an instance, the person/people the offender is interacting with would have no idea about their offender status.

The psychology of stigma

Dimensions of stigma

When looking at the dimensions of stigma it is necessary to begin with the classically defined dimensions of Goffman (1963), whereby stigma was defined as being a mark that distinguishes those from being allowed full access to all parts of society He also classified stigma into three types; "abominations of the body" (p.4), which are physical deformities; "blemishes of individual character" (p.4), such as possessing a weak will, having unnatural passions, and dishonesty; and "the tribal stigma of race, nation and religion"(p.4). He further claims that these deficits can be handed down through generations and "equally contaminate all members of a family" (p.4). Categorising the various types of stigma is a useful method for understanding the process of stigma and its consequences.

There have been many attempts in recent years to define the dimensions of stigma. In a three part experimental study, Puhl, Schwartz and Brownell (2005) used self-report measures of attitude towards obese people prior to and after manipulated consensus feedback representing attitudes of others. It was found in all three experiments that participants' attitudes and beliefs were influenced by the social consensus feedback. This led Puhl et

al. (2005) to argue that there is only one dimension of stigma, that of stereotyping, which can fall into either negative or positive categories.

HIV/AIDS is considered to be one of the most stigmatising infectious diseases, and as such there is a proliferation of research into the area of stigma and HIV/AIDS (Emlet, 2005; Mak, Cheung, Law, Woo, Li, and Chung, 2007; Ogden & Nyblade, 2005; Simbayi, Kalichman, Strebel, Cloete, Hemdaa, and Meketoa, 2007). Using a synthesis of findings from research compiled in four countries, Ogden and Nyblade (2005) found that with regards to HIV/AIDS-related stigma, there are many more similarities than differences in the context of stigma than previously thought. Even though the data was drawn from countries with differing social, economic, political, historical and geographical contexts, it was found that there were strong commonalities in what causes stigma, the expression of stigma and the consequences of stigma. Using the data from this study a four dimensional model was created consisting of physical stigma (physical isolation and violence), social stigma (social exclusion and loss of identity), verbal stigma (directly being insulted, being taunted; indirectly experiencing gossip and rumours), and institutional stigma (inability to obtain housing, healthcare, education or employment).

While exploring the validity of a scale designed to measure HIV stigma in sufferers, Emlet (2005) identified blaming (feeling blamed and ashamed for having HIV, expecting poor quality health care), distancing (avoidance of friends and family, as well as health care professionals) and discrimination (fear of reaction from others causing some to move house to an area where they were unknown, fear of job loss, and belief that HIV

is divine retribution for past behaviours) as the components that make up the three dimensions of stigma. Similarly, Simbayi, Kalichman, Strebel, Cloete, Hemdaa, and Meketoa (2007) found four dimensions of stigma when they examined the prevalence of discrimination and internalised stigma surrounding HIV/AIDS: internalised stigma (feeling dirty, ashamed or guilty), discrimination (loss of job and/or home), lack of social support (perceived and tangible emotional support), and cognitive and affective depression (measured using a 20-item scale that assesses symptoms of depression over the previous 7 days). Using a prospective design, Mak, Cheung, Law, Woo, Li, and Chung (2007) sought to find the attributional pathway from perceived control to self-stigmatisation while addressing the social and psychological corollary of stigma in those with HIV/AIDS. It was determined that self-stigma is comprised of responsibility (for contraction of the illness), and controllability (there is a perception of a high controllable factor associated with the contraction of HIV). It was also found that the long term outcome of self-stigma is psychological distress and a loss of social support. .

Bresnahan and Zhuang (2011) were concerned about the lack of consensus in the research community of the dimensions that make up stigma and what these dimensions measure. After conducting two studies, one to determine the dimensions of stigma using past research and one to assess the goodness of fit of the found dimensions, they concluded that there five dimensions to stigma; that of labelling (assigning detrimental descriptions to problematic conditions), negative attribution (character flaws and negative judgements of individuals), separation (distancing

oneself from undesirable individuals), status loss (assigning downward social placement to the stigmatised) and controllability (believing a condition or disease could have been prevented had the individual been more proactive).

Across the six studies outlined above are 21 identified dimensions of stigma, however, many of them are similar. Even though there is overlap between the different dimensions, there is nothing that clearly shows if these dimensions are conceptually separate or even if they measure the same construct. While there are mechanisms of stigma that can be measured, such as depression, (Griffiths, Christensen & Jorm, 2008) lack of social support (Geenen & Kool, 2012), mental illness (Link, Yang, Phelan, & Collins, 2004) and negative attributes (Link & Phelan, 2001), these are merely some of the possible components of stigma and not a measure of stigma itself. It is very difficult to obtain an accurate measure of a construct that has so many possible dimensions, especially when stigma cannot be defined as a single 'thing'. The above studies in which a variety of potential dimensions are presented show that there is no consensus on what dimensions constitute stigma, nor is there any clear and satisfactory way in which to measure each dimension.

Psychologically related constructs

Even though stigma is a social construct, borne of societies' need to set boundaries and norms, there are some distinct psychological consequences that are tied to the area of stigma. These include ostracism, rejection and self-concept.

Ostracism

Psychologists have defined ostracism as "…any behaviour in which a group or individual excludes and ignores another group or individual" (Van Beest, Williams, & Van Dijk, 2011, p. 581). The act of ostracism may include such punishing behaviours as gossip, denying eye contact, and banishment and as such has been pronounced a "social death…the most potent form of rejection" (Gerber & Wheeler, 2009, p.472). Ostracism operates in such a manner as to maintain the function of a group by preserving the stability and cohesion of said group by increasing conformity to group norms (Dixon, 2007). This is done by silencing the non-conforming, deviant members of the group. This silencing is performed by denying the targeted individual interaction with others, which also causes the targeted individual to lose their sense of perceived control within the social situation. The target also feels their meaningful existence is diminished as ostracism makes them feel as though they do not exist at all. These factors all contribute to the social death that is ostracism (Williams, Cheung, & Choi, 2000).

Being ostracised from a group for even a brief time threatens the feeling of belonging with others which consequently results in severe behavioural and psychological impairments including increased risk of psychopathology and involvement in crime (Bhatti, Derezotes, Kim, & Specht, 1989). Social exclusion has such ramifications as decreased social behaviour, increased aggression, increased risk-taking and impaired cognitive functioning (Baumeister, Twenge, & Nuss, 2002; Buckley, Winkel, & Leary, 2004; Twenge, Baumeister, DeWall, Ciarocco, &

Bartels, 2007; Twenge, Catanese, & Baumeister, 2002). Being ostracised can have serious consequences not just for individuals but for communities as a whole, as shown in the Leary, Kowalski, Smith and Phillips (2003) study that examined school shootings. The results of this research concluded that out of the fifteen case studies examined, thirteen of the school shooters had experienced ostracism prior to the shootings.

Ostracism is considered to be so powerful that those who experience it say it creates a physical pain sensation (Nordgren, Banas, & MacDonald, 2011). Sensitivity to social pain has been correlated to the sensitivity of physical pain (Eisenberger, Jarcho, Lieberman, & Naliboff, 2006). The pain of ostracism is so great that van Beest and Williams (2006) have found that those who have experienced ostracism in the long-term would rather have been physically abused than have lived in an ostracised state. In fact, fMRI studies have shown that the anterior cingulated cortex, the part of the brain that is affected by physical pain, is activated when social pain is perceived (Eisenberger, Lieberman, & Wiliams, 2003).

Ostracism is not just a phenomena that occurs with humans (Williams & Zadro, 2005). Animals who have been ostracised die far quicker than those who remain ensconced in the protective field of the group. They may have been ostracised for being physically or mentally unable to keep up with the group, or for displaying alarming or unwanted behaviour. Due to their ostracism they lose the group resources needed for capturing food, as well as losing the bonds needed for social sustenance. The animal then falls behind and will eventually die from lack of nutrition or from a stronger animal preying on them. It has been suggested that these animal

mechanisms of ostracism have the same effect on humans, in that ostracism threatens the survival of the ostracised individual as well as threatening their genetic line (Williams & Zadro, 2005).

In an experimental study through a series of vignettes Viki, Fullerton, Raggett, Tait, and Wiltshire (2012) found that when sex-offenders were dehumanised by the general public, the public were more likely to be unsupportive of offender rehabilitation, more likely to support violent ill-treatment of offenders, more likely to encourage longer sentences and more likely to support the offenders exclusion from society. Conversely, it was also found that having good quality contact from correctional staff created less dehumanisation and more support for rehabilitation.

Offenders are an ostracised group as evidenced by their removal from society. The greatest form of ostracism for offenders is death (a practise that happens for offenders in many countries), however within New Zealand society there is no greater form of ostracism for offenders than prison, whereby banishment is put in place as punishment for offences committed. Offenders in prison are ostracised to the highest degree we hold in our society, by ensuring their silence with the denial of access to others in the form of expulsion to a locked penitentiary, sometimes even past the confines of a city. This ensures that these offenders do not have access to the freedoms and privileges that those who conform to society's norms are able to enjoy.

Those individuals who have been ostracised can find themselves allowed back into society again, in particular, offenders who have served their

prison term. It is possible that these individuals may then find themselves being rejected by the community they are living in.

Rejection

Rejection has been defined as a complex construct that consists of behaviours ranging from total exclusion to icy politeness and comprise of active rejection such as sarcasm, targeted criticism and hostility (Fitness, 2005). Being rejected means that others have little to no desire to include an individual in their group. Rejection serves as a way to control the social norms of a group on an individual basis; those individuals who do not adhere to the norms of the group are no longer welcome to be a part of the group (Juvonen & Gross, 2005). Deviating from the group norms will usually result in expulsion from the group. Fitness (2005) conducted a study which looked at beliefs about rules and rule violations in family relationships, which included rejection from the family. Participants were asked to identify the very worst thing that parents could do to their children, the very worst thing that children could do to their parents, and the very worst thing that siblings could do to each other. It was found that the worse offense by far was familial rejection or abandonment. Other heinous offences included sexual abuse by fathers, a child rejecting a parent, a daughter performing taboo sex acts (such as having sex with her father's friends, or promiscuity in general) and a son being involved in criminal activity.

This was followed up with a second set of participants who then ranked the offenses found in the first study in order of unforgivability, from most

unforgivable to least unforgivable. This second study yielded identical results with regard to rejection and abandonment – they are the most unforgivable offence that a parent can inflict on a child.

The consequences of violating familial rules is that of rejection or expulsion from the family (Fitness, 2005). It should be noted that the participants of the study stressed that those who had broken the rules had brought this act of rejection upon themselves through their behaviour. "In effect, (those who have) placed themselves outside the family: their behaviour meant that they could not, by definition, belong to a *family* anymore." (p.268). Those who through their own actions commit an offense vile enough to warrant dismissal from the family have broken their allegiance to their family which in turn means they "forfeit their right to family membership' (p.268).

In relation to the current study, those offenders who have been sentenced to time in prison have been openly rejected by society, with the potential to also be rejected by their families and community upon their release. Being rejected from the family unit could have devastating consequences for someone who has recently been released from prison. Having no family to help guide them in a positive manner could result in recidivist activity.

Rejection sensitivity is a psychological form of stigma that refers to "chronic anxious expectations of rejection enacted to guard against potential threat" (Pachankis, Hatzenbuehler, & Starks, 2014). Stigma-based rejection sensitivity is a psychological process whereby some individuals develop the anxious expectation of rejection due to past

experiences of discrimination and prejudice towards themselves personally or their group membership. When a person has high expectations of rejection occurring combined with high sensitivity to potential rejections, this not only increases the prospect of actually being rejected, but also creates an increase in the emotional impact of that rejection (Downey, Feldman, & Ayduk, 2000). Rejection sensitivity occurs when anxious individuals are quick to accept perceived intentional rejection in interpersonal interactions. This creates social anxiety which leads those experiencing it to avoid those interactions where they feel they cannot make a positive impression on others (Downey et al., 2000).

In relation to the current study, individuals who have been released from prison could expect to be rejected by the community in which they live based on their own past experiences (if they have been in prison or served a community sentence before) or the experiences of others who they have witnessed. This could cause them to avoid interactions with others and isolate themselves, or avoid situations where they foresee rejection could occur, such as asking for help from government or other agencies when needed.

Steele (1997) and Steele and Aronson (1995) developed a theory around stereotype threat which states that "negative self-relevant group stereotypes can lead to…a situationally based fear that one will be judged on the basis of or confirm of those stereotypes" (p.398). Being forced into situations of interaction due to the conditions placed on them by the Department of Corrections or being in circumstances where rejection is

anticipated (for example, any place they need to identify themselves) could become a fearful experience for the participants.

Self-concept

Self-concept is made up of a set of self-identities (the awareness of one's potential, qualities and identification as an individual) and self-schemas (the beliefs with which an individual defines themselves) which create a perception of how we view ourselves (Wakslak, Nussbaum, Liberman, & Trope, 2008). Having this sense of self-concept allows us to shape our thoughts and actions, deduce our environment, and gives our behaviour some consistency in various situations. When self-concept has been threatened, individuals turn to interpersonal relationships to seek reassurance and acceptance (Slotter & Garnder, 2014), which can be hard to accept when those around the person seeking reassurance and acceptance are being stigmatised for the very same thing. The concept of self is one which interacts on three levels in order to form the self as a whole: self-esteem, self-knowledge, and the social self. This includes all selves of the past, present and future (Myers, 2009). Self-concept differs from self-awareness in that it also incorporates self-knowledge which has clear definition, internal consistency and is temporally stable (Ayduk, Gyurak, & Luerssen, 2009).

There has been some research undertaken in the area of self-concept and offenders, which is relevant to the current study. Byrd, O'Connor, Thackrey and Sacks (1993) examined whether self-concept could be used as an accurate predictor for recidivism with a cohort of forty male juvenile

offenders. Contrary to expectations, it was found that those participants who frequently offended did not indicate a self-concept of a delinquent nature. Byrd et al. (1993) inferred from this finding that when offenders recognise and accept their delinquent status they are better able to control their behaviour by accessing personal resources.

In contrast, Simourd and Olver (2002) looked at the criminal attitude construct where self-concept was one of the four factors that was linked to criminal conduct outcomes along with "generic criminal attitudes, specific attitudes about the law, and generic rationalizations consistent with criminal subcultures" (p.427). This suggests that having a self-concept that is related to the label of offender may have an influence on behaviour, although Simourd and Olver (2002) state there needs to be more robust testing in this area for a more definitive conclusion.

The above two studies show that the self-concept of someone who has served a prison sentence has the potential to be challenging upon release. This challenge arises when the difference between ex-prisoners' awareness of their own potential and qualities coincide with their beliefs about their own identity while living with the new label of 'ex-prisoner'. Once someone is released from prison a juxtaposition is created by the label of 'ex-prisoner' seemingly taking over any other label that individual may have held, for instance 'husband', 'son', 'father', or 'employed'.

Labelling theory

Labelling theory explains how the identity and behaviour of individuals are influenced by the classification they have been given by society. For

example, when society has labelled an individual as a criminal and that individual accepts that label as their personal identity, they then become a criminal. Becker (1963) explains how labels are brought into existence when "social groups create deviance by making the rules whose infraction constitutes deviance and by applying those rules to particular people and labelling them as outsiders" (p. 9).

Labelling theory has been very useful for providing theoretical justification for assisting in social change, for example reducing stigma related to mental illness (Winnick & Bodkin, 2008). There appears to be more of an understanding for why and how mental illness occurs, and that it can effect anyone, even great rugby champions, which has reduced the stigma related to it. Labelling theory is now being utilised to gather significant information regarding offender re-entry into a community and the obstacles offenders face during this process (Austin & Hardyman, 2004; Benson, Alarid, Burton, & Cullen, 2011; Chui & Cheng, 2013; LeBel, 2012; Lucas & Phelan, 2012).

Labelling theory was first seen as radical as it stated that deviance was a social construct (Lemert, 1951). Prior to the dominance of labelling theory, deviance had been explained in terms of the attributes individuals possessed. In other words, deviance was seen as an objective entity within an individual. Labelling theory changed that perspective to address the culture and society in which the labelling occurred. That is to say, a deviant act can only be seen as a deviant act if the society and culture that it occurs in accepts its deviant quality and gives it the title of 'deviant' (Wellford, 1975). This occurs when society and culture accept that the act

in question is not a social norm, and is therefore, deviant. The primary concern of the labelling approach is how the individual who had been labelled as deviating from the norm then negotiates their new social identity. Deviant acts are common, and if ignored there are no consequences to those who have committed the act (Becker, 1963). For example, if a driver speeds while driving and their speeding is ignored or not noticed, they do not face the consequences of receiving a speeding fine. This type of action is considered to be an act of primary deviance, where a rule has been violated but no label has been given (Wellford, 1975). However, if a speed camera catches the speeding car on film, or a police officer pulls over the driver and a ticket is issued, then they have not been ignored and now have the label of reckless driver.

Stigma and labelling are viewed in a similar manner. The process is the same, in that the social role of individuals stem from the social reaction to deviance from established norms. The internalisation of the delinquent label becomes the personal identity of that individual. Their self-concept has become the label they have been given.

Social reaction is significant in the conception of negative labels. Wellford (1975) holds the view that deviance is contingent upon the response of others to the act, therefore if there is no reaction, then it is not a deviant act. The other factor that determines deviance is if the act goes against already established social norms and values; this is what determines the reaction from society, or lack thereof. Goffman (1963) views labelling and stigma as a form of social control; a way in which to control deviant behaviour by attempting to control social norms. This form of regulating

behaviour acts as a deterrent to those who reject or challenge their label. Therefore, the act of labelling and its outcomes are contingent upon an encompassing desire to attain societal acceptance and conformity.

In more recent years there has been some backlash towards labelling theory which has led to a departure from the theory, although it appears to be experiencing a resurgence. Labelling theory does not address what causes a person to turn to crime in the first place. It also tends to place the burden of responsibility onto the observer, instead of the offender. It has only been in recent years that any empirical evidence for secondary deviance has actually been established. Secondary deviance has been identified as the resulting acts of rule violation due to being given the label of deviant (Winnick & Bodkin, 2008).

Although internalisation of the label is the integral component to labelling theory, most research does not address this major factor at all (LeBel, 2012). It has been suggested that this failure to consider the effects of internalisation within this theory is what has "contributed unjustifiably to the demise of labelling theory" (LeBel, 2012, p.90).

These issues have led to a modified version of labelling theory by Link, Cullen, Struening, Shrout, and Dohrenwend (1989). This version of labelling theory was formulated for and tested on patients with mental illnesses. Empirical tests of modified labelling theory (Link et el., 1989; Link, Mirotznik, & Cullen 1991; Link, Struening, Rahav, & Nutbrook, 1997) confirm that negative stereotypes are abundant within society and that those who have been labelled expect rejection from others. In a

longitudinal study Link et al., (1997) also found that harmful effects from labelling continue over time. It was discovered using this theory that secondary deviance is an "indirect result of coping, or stigma management, which has the ironic effect of shaping the conditions under which secondary deviance is more likely" (Winnick & Bodkin, 2008, p.301) as opposed to being a direct result from labelling. Link et al., (1997) found that secondary deviance follows whichever management strategy the individual utilised and the outcomes of said strategy, rather than as a result of being given a label. Link and Phelan (2001) took modified labelling theory one step further and produced a concept of stigma. They have created a broad umbrella concept that links interrelated stigma components (Yang, Kleinman, Link, Phelan, Lee, & Good, 2007). These components are labelling, stereotyping, cognitive separation (separating 'us' from 'them'), status loss and discrimination, and the dependence of power (Link & Phelan, 2001).

Corrigan and Rao (2012) created a model that explains how the three stages of stigma manifest in those with mental illness. Firstly, there is awareness; there must be knowledge of the stereotypes that are associated with poor mental health. Secondly, the individual must be in agreement with those stereotypes. Thirdly is acceptance, whereby the individual applies the stereotypes to themselves upon diagnosis. Therefore, internalised stigma has been conceptualised as a progression, a series of steps, which ultimately lead to the last stage of this model, which is harm. This involves internalising the distorted and negative stereotypical dialogue and negative attributes that have been given to

those who have mental illness. This model leads people to the self-fulfilling prophecy of behaving as expected.

Recent studies have shown that when an individual has officially been given the label of offender, those receiving correctional intervention at an early age are far more likely to embrace their label and engage in criminal conduct, which in turn attracts further labelling and reinforces the belief that the individual has about their designated label (Bernburg, Krohn, & Rivera, 2006; Lopes et al., 2012). The more the label is reinforced, the more the individual strives to live by their label. There are limited choices available to someone who has been labelled as an offender, which also encourages affiliation with criminal gangs and delinquency. Therefore, labelling theory is an integral part of stigma and as such needs to be addressed within the current research.

Even though labelling and modified labelling theory have generally been associated with those with mental illness, it is rather pertinent that this theory is applied to offenders also. In the case of both sets of people there has been some kind of formal intervention. Each group has been given an ineradicable and undesirable label which has marked them forever. While in recent years stigma may have been reduced with regards to mental illness, there is still a surplus of negative stereotypes about both groups in our culture - more so for offenders than those with mental illness. It should be noted that the change in attitude towards people who have mental illness has shifted in part due to the influx of research that has been undertaken in the area of stigma in recent years, whereas there has been very little research conducted with regards to offenders and stigma.

Therefore, it is extremely appropriate that labelling theory in either manifestation (the original labelling theory or the modified version) be used to glean information about stigma and offenders.

Offenders and stigma

Offenders are a population who possess a virtual social identity that places them on the margins of mainstream society. The rejection and ostracism that ex-prisoners face means they can have difficulty creating a new life for themselves once back in the community. Recently in the United States of America, vocational psychologists have addressed the issue of ex-offenders and how the lack of stable employment has an impact on recidivism. Brown (2011) recognised that career development researchers have been absent in research that addresses the specific needs of offender populations, even when it has been well established that employment in ex-prisoner populations is the most important predictor of successful re-entry to a community, as well as an indicator of recidivism (La Vigne, Davies, Palmer, & Halberstadt, 2008; Lockwood, Nally, Knutson, & Ho, 2012). Ex-prisoners come up against some formidable barriers when looking for employment including legal barriers (for example, certain conditions placed on released prisoners can limit where that individual is allowed to be, therefore the location of a business must be taken into consideration), lack of education and skills, and stigma from potential employers (Lukies, Graffman, & Shinkfield, 2011).

Finding accommodation for those who have a criminal background can be extraordinarily difficult. In Britain, a close link has been found between imprisonment, homelessness and re-offending (Seymour, 2006), in

addition to the problems that prisoners face prior to the beginning of their sentence which then have the potential to be exacerbated post release (Cluley, 2009). A longitudinal survey of 1457 prisoners was undertaken to determine the problems they faced during and after custody. It was found that the main problems faced by prisoners included "unemployment, lack of qualifications, unstable accommodation, drug misuse, heavy drinking and poor psychological health" (Cluley, 2009, p.6).

Also in the United Kingdom, Mills, Gojkovic, Meek and Mullins (2013) conducted a two-year examination of third sector organisations that assist recently released prisoners with finding accommodation. It was found that despite the best efforts of third sector organisations obtaining accommodation for ex-prisoners is complex and difficult, which was attributed to the high demand of housing for ex-prisoners coupled with housing shortages.

While stigma from others is a definite barrier for ex-prisoners, self-stigma is also an issue, as evidenced in Chui and Cheng's (2013) research where 16 recently released prisoners in Hong Kong participated in in-depth interviews about their experiences of discrimination and self-stigma. The findings of this study show that the participants had strong feelings of low self-worth, shame and embarrassment and that many chose not to disclose their identity as an ex-prisoner unless they were put in a position of having to reveal this information. Conversely, Winnick and Bodkin (2008) found through a much larger cohort of 450 American participants that while significant rejection and stigma was anticipated, these participants showed a preference for preventative disclosure of their

identity. In other words, the participants preferred to tell people about their ex-prisoner status before being asked to disclose it, as a pre-emptive measure. The participants of this study knew they would have to disclose it at some point and would rather take control of when that moment would be, even when anticipating significant rejection and stigma. This discrepancy between the studies could possibly be accounted for due to cultural differences between the two countries, which highlights the needs for empirical investigation into the subject of stigma and offenders in the New Zealand context.

Offenders in New Zealand

While there is very little research in New Zealand that relates to stigma and offenders, existing studies have focused on the treatment of violent offenders (Polaschek, 2010; Polaschek, 2011; Ward, Vess, & Murdoch, 2012), and sex-offenders (Lambie & Stewart, 2012; Sakdalan & Collier, 2012; Slater & Lambie, 2011; Vess & Watson, 2007; Wilson et al., 2013).

There has been research undertaken into the attitudes of the public towards a specific set of offenders in New Zealand, that of sex-offenders (Thakker, 2012; Willis, Malinen, & Johnston, 2013). A series of focus groups around New Zealand attempted to better understand the development of negative opinions that are directed towards sex-offenders (Thakker, 2012). The results of these focus groups were that the news media plays a significant role as the most important source of information about sexual-offenders, even while participants questioned the credibility of the information they were being provided by the media outlets.

Willis et al., (2013) recognised that public attitudes towards sex-offenders creates a barrier to successful reintegration and wanted to identify if specific demographic groups held more negative attitudes than others. Being able to influence change in public attitudes towards sex-offenders is an important step towards preventing recidivism (Willis et al., 2013). Using an online questionnaire, 401 participants around New Zealand expressed their affective, cognitive and behavioural attitudes towards sex-offenders. Behavioural and affective measures found that females showed more negative attitudes than males. Those who had low levels of education displayed more negative attitudes on cognitive and behavioural measures. It should be noted that to some extent, all groups demonstrated negative attitudes towards sex-offenders. This research highlights how stigma and public perception creates a barrier for a specific set of ex-prisoners.

The New Zealand justice system

In New Zealand while we have a justice system which sees significantly more offenders serving their sentences in our communities than in our prisons, there are still a significant number of offenders in our prisons. Around 8,500 offenders are in prison at any given time compared with over 31,000 offenders who are serving their sentences in the community (Department of Corrections, 2013a).

New Zealand courts also use what has been termed the "totality principle" (Ministry of Justice, 2014). If an offender is sentenced cumulatively (one sentence given for each criminal act committed), it is possible that this sentence will stretch beyond the offenders estimated lifetime, or for

example, multiple burglary offences by one offender will garner a far greater sentence than would be given in a rape case, which is unquestionably a far more serious crime with extensive after-effects for the victim. In cases such as these, the totality principle is used to "make all or some of the sentence concurrent" or "reducing the cumulative sentences for each additional offence" (Ministry of Justice, 2014).

Those offenders who are sentenced to less than two years in prison are eligible for release on conditions after serving half of their sentence (Department of Corrections, 2013a). This means they will still be living under the authority of the Department of Corrections, however they will be living in the community under strict conditions. Offenders who received a sentence of more than two years are eligible for parole after serving one-third of their sentence, or if the sentencing judge imposed a non-parole period, then once that time has passed (Department of Corrections, 2013a).

The above factors in regard to offenders - the totality principle and access to parole conditions, mean that nearly every single offender who is convicted of a crime will reside in our communities; either immediately after time in prison, or while serving a sentence with no imprisonment. The stigma that is attached to being an ex-prisoner has severe negative consequences which not only impact on the individual offenders themselves, but also on our communities as a whole. This thesis intends to allow those who have been incarcerated to speak about their stigmatising experiences, in the hopes that it can possibly contribute to policy changes that can ease the transition back into the community for all

involved, both within the prison system and the community. This research could potentially have an effect on those who work within the prison system and on the programmes that they are run.

Aims

Whilst researching the literature for this review, it became very clear to me that there is a knowledge gap with regards to the stigma that offenders face, particularly from the New Zealand context. The research that has been conducted on stigma and offenders in New Zealand has been extremely sparse and focuses on only one small sample of the offender population. To the best of my knowledge there has been no research in the area of the current study undertaken in New Zealand – that of stigma that non-specific ex-prisoners face. I wanted to focus my attention on ex-prisoners, as opposed to those who have undertaken community service, as I suspected that being completely segregated from the community played an important part of the experiences of stigma. The current research offers a unique insight into the lived experience of stigma. Therefore, the main aim for this research is to further the knowledge from ex-prisoner's points of view of how stigma affects their everyday living.

While the concept of stigma has remained stable across time, there needs to be more examination of the various manifestations of stigma with all of those groups that are affected by visible and invisible stigma.

Chapter 3: Methods

Phenomenological research

In order to understand why phenomenological research was chosen as the best fit for the current study, it is important to understand what phenomenological research is and how it works.

Phenomenological research seeks to understand lived experiences which makes it just as much a philosophy as it is a research method (Creswell, 2009). Phenomenology began as a philosophy and was utilised by such philosophers as Kant, Hegel and Mach (Moran, 2000). It was not until the beginning of the twentieth century that Edmund Husserl introduced phenomenology as a science, earning himself the reputation as the founder of phenomenology (Guignon, 2006; Moran, 2000; Moustakas, 1994). Husserl was of the belief that the philosophy of phenomenology could be separated into a science by dismissing any preconceived assumptions of the examiner which allowed the examination of an experience to get to its very essence (Cohen, 1987). Phenomenological research seeks the essence of a phenomenon. "A universal or essence may only be intuited or grasped through a study of the particulars or instances as they are encountered in lived experience" (van Manen, 1990, p.10). The purpose of phenomenological analysis is to "…discern the psychological essence of the phenomenon….seek(ing) the psychological meanings that constitute the phenomenon…" (Giorgi & Giorgi, 2008 as cited in Smith, 2008, p.28). This type of methodology does not look for a cause and effect relationship; rather it focuses on "clarifying the meanings

of phenomena within lived experiences" (Penner & McClement, 2008, p.93).

Giorgi (1997) explains that phenomenology "thematizes the phenomenon of consciousness" and that it "refers to the totality of the lived experiences that belong to a single person" (p.236). It is imperative that the researcher brackets, or sets aside, their own experiences or assumptions about the phenomenon being studied (Giorgi, 1997; Wertz, 2005; Creswell, 2009). Bracketing allows the researcher to better understand the descriptions being given by their participants without forcing the meaning of the description into pre-defined, or biased, categories. The reason behind this lies at the very heart of phenomenological research. It is not the study of a phenomenon, it is the study of the lived experience of a phenomenon. It is not possible to understand someone else's lived experience if the researcher is putting their own experience into the descriptions given to them. The researcher is not the subject, therefore they must set aside their own views and experiences and be open to the meanings of others' experiences.

Phenomenological methods are not limited in scope. They can be used with many different types of participants, in different settings, with various forms of expression, using different analytical procedures and using any number of ways to present findings (Wertz, 2005).

Phenomenological research is best used when the researcher intends studying a small number of participants and through in-depth contact is able to ascertain patterns and themes that emerge from the relationships

of meaning within the data (Moustakas, 1994). It is for this reason that qualitative research is the best approach to use in phenomenological research.

In order to best explore the phenomenon of stigma, I have used an adapted version of Giorgi's (1997) Human Scientific Phenomenological Method. This method uses three steps: (1) collect verbal data; (2) read the data; (3) examine and divide the data into parts. The purpose of doing this is to capture the essence of stigma experiences of ex-prisoners, explore those experiences in a more comprehensive manner and then determine if there are shared experiences that exist between ex-prisoners, thereby capturing the essence of stigma.

Due to the specific nature of this research, purposeful criterion sampling was employed. This type of sampling is designed for those who are researching a specific topic, as it allows the researcher to recruit those individuals who best fit the criteria needed for the study. In this case, ex-prisoners were needed, and as such ex-prisoners were the only people who were admitted into this research. Face-to-face interviews using guided prompts were utilised to gather the data from the participants.

Participants

Process of recruitment
The recruitment process was very difficult for this research. This was due to the desired participants (ex-prisoners) being an extraordinarily hard to access group. Recruitment was made possible through a service provider who supports ex-prisoners, as opposed to independently trying to access participants. The reason for this was two-fold. Firstly my own safety was of

paramount importance, and secondly I thought I would have more success with recruitment if I had the support and understanding of an organisation. Some service providers who were approached were resistant due to suspicion of the motives of myself and intention for this research. The service providers in this field are very much overworked and despite the relatively unobtrusive nature of this study, some organisations simply did not have the available time to assist with this study.

This service provider who was willing and able to assist in the current research is a not-for-profit charitable trust who wishes to remain anonymous. It was explained to the managers of the trust that this research has no interest in any offences that had been committed by the participants, and that this was not to be a discussion of the participants past, but rather a conversation about any stigma experiences they have had or are currently experiencing. The managers of the trust were then provided with a recruitment poster (Appendix A) with which they in turn approached their clients. The participants were made aware of the aims of the research by the managers of the trust. Those who were willing to participate in this study indicated their interest to the managers of the organisation who then arranged interview times and informed me of when and where the interviews would be held. With the exception of two interviews, all were undertaken in the participants' homes. The two interviews not held in homes were completed at the office of the trust. One of the managers of the trust sat in on and participated in 10 of the 15 interviews. Having someone who the participants viewed as being in a position of authority attend the interviews had some advantages. I felt

there was an element of trust in me that had already been established through the inclusion of the managers. The participants seemed quite at ease throughout the interviews, even when they admitted that they had never spoken so openly to anyone like me before (an outsider to the world of prisons and offending, and an academic). Due to the participation of the managers, it was clear that they had years of experience in the matter of stigma and ex-prisoners. They were able to gently prompt the participants to discuss matter I had not even considered, for example that an ex-prisoner cannot get insurance of any kind. I was concerned prior to the interviews that the inclusion of the managers could hamper how open and honest the participants would be, but that was an unfounded fear.

Not-for-profit charitable trust

The not-for-profit charitable trust deals exclusively with supporting prisoners in the final stages of their prison term and upon their release from prison, by attending parole boards in prison, supplying accommodation for the first few months post-release, assisting with Work and Income, and supporting employment seeking. Their client base comes from all prisons within New Zealand and they are willing to help any ex-prisoner who will abide by the rules of the trust.

Who are the participants?

The 15 participants in this study were all male, ranging in age from 37 – 61 years old (two participants declined to give their age) with a mean age of 50.2 years old. Almost half (seven) of the participants identified their ethnic group as NZ European, followed by four identifying as Maori, two as

Samoan, one as Cook Island Maori and one who declined to answer. The number of times each participant had spent time in prison varied from one to eight (one participant declined to answer) with a mean of 2.2. Due to the nature of the New Zealand prison system, prisoners can be moved from prison to prison for various reasons. This means that the participants did not come from one single prison, but had spent parts of their sentence at more than one prison, creating different experiences. The length of time since the participants were last released from prison varied from three weeks to 24 years with a mean of 3.5 years. While none of the participants were asked about their offences or why they had been sentenced to a prison term, some of the participants chose to disclose this information themselves. Those who did divulge made mention of how their crimes have had an effect upon stigma they experience.

The managers of the not-for-profit charitable trust have a wealth of knowledge and experience in dealing with ex-prisoners and the stigma the ex-prisoners face, which is an invaluable resource. While their contribution was of particular interest to this research and they do briefly feature in the analysis of this data, the focus of this study is on the lived experiences of the ex-prisoners themselves. The contribution of the managers was consistent with, agreeing with, or expanding upon what the participants were already discussing.

From the data it became clear that even though there was a wide variety of individuals who participated in this study, they all had common experiences around stigma. Regardless of the participants' crimes, it appeared that the label of 'ex-prisoner' created a shared experience; that

of stigma. In the analysis of the data these experiences were grouped into common themes and explored in depth.

Data collection procedures

I began by leading a brief whakawhanaungatanga (an introduction with the purpose of establishing relationships and connections), followed by a karakia (prayer) being offered, the information sheet being explained (Appendix B), an explanation of the meaning of stigma, obtaining informed consent (Appendix C), and the demographic information being gathered via survey (Appendix D). The definition given of stigma was wide-ranging from interview to interview as the comprehension level of each participant varied greatly. It was then that the interviews commenced. The interviews were conducted either individually or in small groups of two (with one of the two managers for the trust). The interviews involved a few guided prompts and were mostly conversational in nature (Appendix E). The purpose of the prompts was to gather information around each point. They may not have been asked exactly as written, depending on how the participant was giving details of their stigma experiences. In some cases I only needed to use the first prompt and yet managed to obtained interviews of close to, or over, an hour in length. The interviews were undertaken in this manner so as to create an open dialogue where the participants felt free to speak openly about their stigma experiences, rather than following a rigid line of questioning which may not allow for the discussion of different experiences of the phenomenon being explored. This was achieved by allowing the participants to reflect and expand through guided prompts (Creswell, 2009). The interviews were audio

recorded, with the participants' permission, and then transcribed. After the

interviews, summary transcripts were created from the audio recordings

and given to each participant, who were then able to make any necessary

changes, in case the meaning of the data had been misinterpreted. This is

an important step, and one that is imperative to ensure the depth and

quality of the interviews by allowing the participants to reflect and possibly

expand on their contribution (van Manen, 1990).

Data analysis procedure

The data analysis process consisted of reviewing each transcript multiple

times to ensure the meaning of the content was fully grasped. This level of

thorough examination is essential to phenomenological inquiry in order to

capture a more holistic representation of each participants' lived

experiences (Giorgi & Giorgi, 2008). The transcripts were then examined

for shared meaning, either from direct quotes or by illuminating hidden

meanings.

For example, all comments that related to employment were highlighted

and grouped together to create one theme with exemplars. These included

the financial stress of unemployment, having to lie about their background

in order to be considered for a job, being forced to lie once in employment

to keep a job, and how extraordinarily difficult it is for these men to find

work in the first place. All of these things relate to employment or lack of

employment and as such were grouped together for further examination.

This was done on each individual participant and then a cross-case

analysis was performed to determine if any mutual themes emerged. At

this point, the participants were given sealed letters that had been dropped

at the not-for-profit charitable trust for distribution to each participant (Appendix F). These letters included a summary of findings so the participants could make any necessary changes, should I have misinterpreted their meanings at any point in our interview.

Ethical considerations

This research was approved by the ethics committee at the School of Psychology in the University of Waikato.

Potential risk to participants

The topic of stigma is one which has the potential to cause emotional distress, embarrassment, and stress. It was made very clear during the recruitment stage what would be discussed so the participants would not be surprised by the content of the interview.

It was stressed in the recruitment phase and again immediately prior to the commencement of data collection that participation was entirely voluntary in this research, and that the participants had the right to not participate. Along with this, if the participant chose to continue, they were advised that they may refuse to answer any questions and/or cease the interview entirely with no repercussions.

Information regarding a local free telephone and one-on-one counselling service was supplied to all participants.

Safety

The men who were participating in this research all have criminal backgrounds and some had only very recently been released from prison.

As ten of the fifteen interviews were conducted in the participants own homes, my safety was an important consideration. The participants had committed a wide range of offences and were then cohabitating in a shared house with at least one other offender. My safety was considered prior to undertaking any interviews. As a safety precaution one of the managers of the trust was to be present with me during the interview the first 10 interviews (scheduling conflict meant I was to conduct the final four interviews alone). The participants all knew, respected and trusted the managers of the trust, which not only added a measure of safety, it opened the dialogue and aided in conversation.

Privacy and confidentiality

Given that all of the participants had criminal histories, their privacy and confidentiality was of extreme importance.

All participants took part voluntarily and were advised of their rights as participants. Before obtaining written consent, it was established that the participants understood the procedure of this study, and any questions or clarifications were answered and obtained. All interviews and data in any form were completely confidential. There were limits to this confidentiality. If a participant gave me any information that suggested that someone was in imminent danger, or if someone admitted to a very serious crime that they had not been charged with, then I would have broken confidentiality and informed the Department of Corrections Probation Services and /or possibly the police, depending on whether or not the participant was still under Probation Services.

All identifying information gathered during the interview process was changed and pseudonyms have been attached to each participant in the form of a number; i.e. Participant 1, Participant 2, etc. The managers of the trust went through the same ethical process as the participants.

Ethnicity and cultural considerations

The Maori population of offenders is significantly higher than that of any other ethnicity in New Zealand (Department of Corrections, 2013b). As this is the case, it was anticipated that the majority of participants of the current study would identify as Maori, therefore the findings of this research would most likely reflect Maori perspectives and values. This research has implications for both current and future offenders who identify as Maori, as well as potential implications for psychologists who work within this population.

The Maori and Psychology Research Unit was consulted to ensure that as a researcher I was not being insensitive and that I would be conducting my research in a culturally appropriate manner. It was determined that I was acting in a culturally sensitive way.

Chapter 4: Findings

My analysis suggested that there were five themes present in the information I had collected which all stemmed from the ever-present phenomenon of stigma.
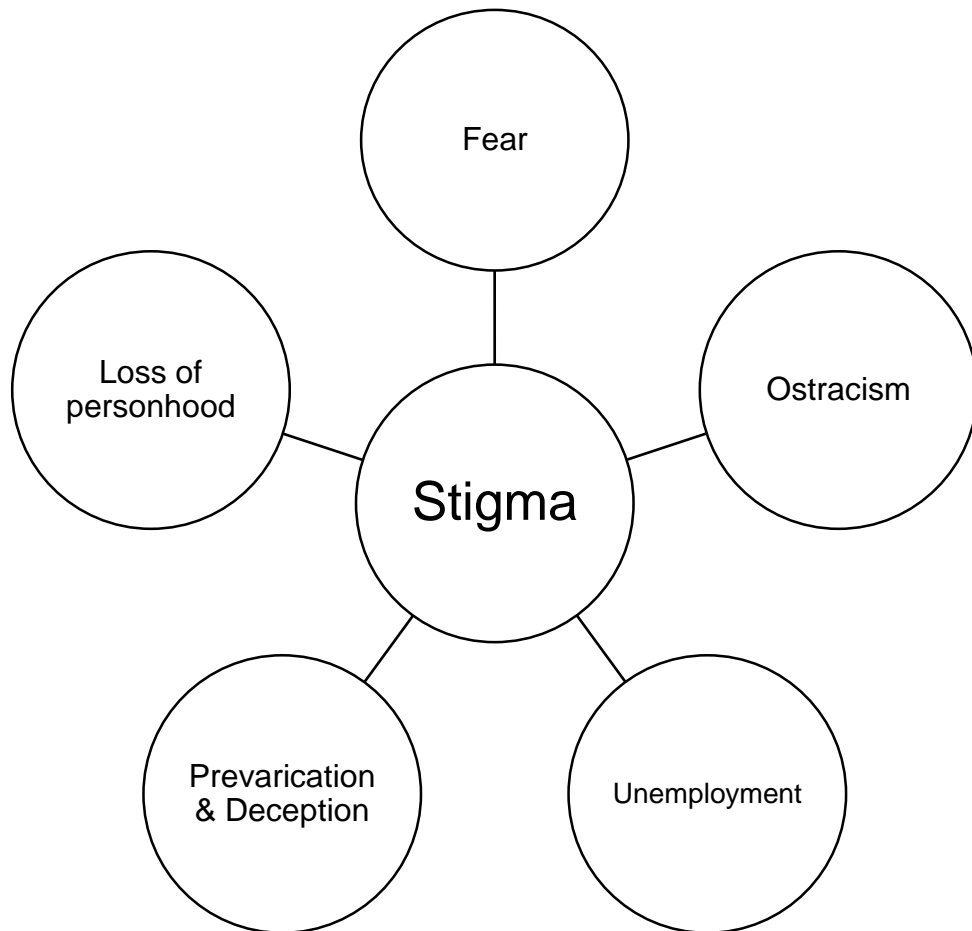
Figure 1: Table of themes

Loss of personhood

At the heart of my participants' talk was a sense that they had become almost non-persons. Loss of personhood refers to the way that individuals are made to feel inferior, and are dehumanised and dismissed as an individual to the point where they feel that they are unimportant as people. Their personhood has been diminished to such an extent that they do not consider themselves to be part of the community they live in due to those around them treating them as non-people. This high level of depersonalisation creates an extraordinary feeling of negative self-worth.

The meaning of a loss of personhood encompasses so much more than a loss of identity. There are numerous individuals who lose their sense of identity and struggle with their new identity, such as new mothers, recent retirees, and recent amputees. However, these people are not dehumanised nor are they made to feel less of a person by other people because of their new status. While they may feel this way themselves, other people are not reinforcing this notion of being less than a person; it is more likely they are getting help and guidance navigating their new lives, unlike offenders who have been stripped of their personhood by those around them.

The loss of personhood experienced by the men in this study has significantly influenced how they navigate their self-worth with their identity as an ex-prisoner and as a prisoner, and also how they view others perceptions of them. While I was interviewing for this research, I became aware that the men's experiences with stigma and suffering a loss of

personhood often provoked a loss in confidence, as well as an anticipation

of often callous and dehumanising experiences with others. Some

examples of the effects of loss of personhood are evidenced below.

> *Who listens to ex-prisoners? Society doesn't want to know. Nobody wants to know. That's why we…just don't bother talking about it. Because what's going to happen? Nothing. (P3)*

> *You're a second-class citizen (as an ex-prisoner). (P3)*

> *You're a non-person as a prisoner. (P7)*

> *(Society) don't care what you've been to prison for. You might have only been there for 3 days, they don't care. <u>People don't care.</u> (P1) (Participants own emphasis)*

The quotes above illustrate the breadth of the effects that loss of

personhood hold for the participants: - figuratively being a non-person,

possessing low status, lack of care from others, and that loss of

personhood occurs for all ex-prisoners, regardless of offence or length of

sentence.

Throughout this study many of the participants made statements similar to

the above ones about being a non-person, or how they are now poorly

treated under their label as offender. Nearly all who made these

observations qualified them by saying 'that's just how it is', or similar. It is

as if it is a given that as an offender one is not, and does not deserve, to

be considered as members of their community; they do not and should not

get the same respect as any other person; they deserve to be outcasts

and marginalised to the edges of society. There is an expectation that an

offender will lose their personhood, as well as a resignation to the way theirs lives will be from the moment of arrest.

This loss of personhood stems from multiple interactions with various members of the community – police officers at the time of arrest, prison officers, prison psychologists, other prisoners, staff at government agencies, members of the public, family members, and an internalised belief that offenders are not worthy of kindness or respect of any kind.

> *So the cops…came and got me…and it was a marked van, right in front of all the kids and whatnot. (P10)*
>
> *I think the one (stigma) in jail is pretty important. You try and discuss with them (prison officers) what are you going to do when you get out and they go "*snort* won't be long and you'll be back here". (P 1)*
>
> *I got all the bad looks from Work & Income. And I still get them now. I see that lady that I first went to, and she looks at me every time. Every time, just looks at me up and down. Yeah, it's 'cause I've been in jail. Not that I'm a bad worker. This is the first time ever in my life that I've been on the dole. (P 1)*
>
> *Well you say they (the public) might look down on you. They do…it's not a might or if they - they do. I'm only being honest (P 6)*

I always took a koha with me to the interviews. I baked biscuits, provided nice boxes of tea or coffee and gave each participant a Warehouse gift card worth $20. It was an incredibly humbling experience for me when participants were nearly in tears thanking me for my incredible kindness and saying that they have not been treated with such respect in years. Some of the participants very excitedly told me what they were going to buy with their Warehouse gift card (a Country CD that reminds him of his deceased parents; a much needed pair of shoes, a new belt). This one act

of kindness brought tears to many eyes, especially when I explained how incredibly grateful I was to them for helping me with my research. Some participants did not believe that they had anything worthy to say to me and others were desperate for someone to listen to them and hear what they were saying.

Participant 1 explained that he was very aware that his life would never be the same again.

> *I can tell you when I first went to prison, I was sitting in the RO (receiving office) thinking 'What the hell am I doing here? How did it come to this?' And I tell you what, no matter how much money you've got, where you come from, what your background is, you sit there and you ponder and you think, and you know that from that time on, whenever you get out of jail, it might only be one day, life has changed - then you will be stigmatised.*

Some of the participants talked of being made to feel less than all those around them. This began at different times for those who spoke about experiencing it. Participant 10 said that "being dehumanised starts long before you get inside" and went on to explained how during his trial he felt he was treated as if he was utterly unimportant.

> *You go through the court system and they speak a different language. And you don't understand what's going on. Even your own lawyer speaks a different language and he's not saying what you want him to say. (P 10)*

In this instance, Participant 10 was not only no longer in control of his own life (the court would decide his fate), he was also depersonalised through the role of language. He did not understand what was being said around

him or about him, yet he knew he was the topic of conversation. He explained how dehumanising this was, to be spoken about while he was present, and to have no comprehension of what was being said or what impact the conversations around him would have on his future.

Participants 7 and 8 felt that the media contributed to the feelings of depersonalisation and stigma. Participant 8 mentioned how "there was name suppression…but the way they describe it in the paper they might as well put your names and that down. Because everybody knew in the town who was what".

Being filmed as soon as he left the courthouse was a major source of stigma for Participant 7 and he felt that the actions of the media diminished him. He described how he "…had a camera thrown in my face as I was going into the court house. That's not fun. It was also on the TV1 news, so my face was plastered all over".

The research of Riches (2014) which shows that the media creates an othering effect through the use of language and core assumptions/constructions is represented by the participants of this current research. The participants who spoke about feeling degraded and made to feel othered by having their identities easily recognisable in print media, and even more easily identifiable by having their face on the national news, show how the media has a hand in loss of personhood with regards to offenders. By the media acting in this manner, these participants were shown that they are not worthy of the basic human rights of safety and privacy. The potential safety of not just the participants, but

also their families, was put into question when the media alluded to their identity, as Participant 8 discussed when he spoke about everybody knowing everyone else's business. Also, while these men may have physically been safe at the time, their future safety was now in jeopardy as everyone now knew who they were and what they had done.

While Participant 10 talked about the loss of personhood beginning with his trial, for some of the other participants' loss of personhood began in prison. One participant described an on-going event where prisoners leave the confines of the prison to work on the Work to Release programme.

> *We had one particular farm boss who whenever anyone went into the gang on his farm, his first comment was, "The only good thing for a prisoner is a bullet" (P 3)*

In addition to external depersonalisation outside the prison walls, other participants talked about the loss of personhood that occurred for them in prison. One participant spoke about how degraded he felt getting stripped searched by prison officers who were enjoying performing that task.

> *…you go out of the grounds you come back and you're searched, you're patted down, every so often you get strip searched. …and some of them really enjoy it. Others don't. They really enjoy humiliating you, because they know you've fucked up. You are going to pay for it more than what you're actually being sentenced for. (P 10)*

During one of the interviews I asked Participant 9 if the tattoos on his forearms and hands were prison tattoos and if they had hindered his reintegration into society, with particular regards to finding employment.

He told me that he did not get his tattoos in prison, but that people always assume that he had. I was mortified that I had made such a basic assumption about the appearance of an ex-prisoner. I apologised profusely, however he was absolutely fine with it. He said that it happens all the time and that he expects it to continue in the future. I am *still* embarrassed at my blatant faux pas, however my terrible assumption led to an interesting conversation regarding lack of agency and how that in turn affected the participant's loss of personhood.

Participant 9 explained how he lost his agency over his personal appearance, which he felt was a controlling and unnecessary action undertaken to maximise loss of personhood.

> *(In one prison) if you were clean shaven, then you shaved every morning. You couldn't walk into your dining room unless you were clean shaven. The officers stood outside as you walked in and if they thought they could see morning stubble, it was 'go and have a shave'.*

This form of control only serves to place the controller above those they are controlling. Diminishing a person who already has extremely limited personal agency to the point where that person then has even less agency reinforces the notion of losing ones' personhood. Depending on the prison, prisoners will be given clothes to wear, of which they have no choice but to wear what they are given (Department of Correction, 2013). When a prisoner is wearing prison clothes and is then forced to shave their facial hair for no discernible reason, it can been seen as a form of control.

There was some discussion around the language used by the prison staff towards the prisoners, and the treatment they had received in prison by the prison staff that contributed to their loss of personhood. One participant mentioned that when he saw a psychologist upon his induction to prison for his sentence, she "spoke absolute psychobabble. She didn't talk to me as a person. She talked to me out of a book". He said that it was extremely frustrating situation and that no one listened to his requests for understanding, which made him feel "small". There is the potential implication here that this psychologist did not view her client as a person and that is why she treated him with such dismissal. The participant certainly left her feeling less of a person due to their interactions.

One of my participants served his time where vegetables are grown year round for one of the main churches in the area. The prisoners are expected to work in these vegetable gardens and tend to the produce that is grown there. The church then places some of the vegetables in its food bank and distributes the remainder to other food banks around the city. The prisoners do not ever get to consume the food they have grown. They must grow it, care for it, harvest it, but can never eat it. When I asked about the vegetables they were allowed to eat, the participant said "Oh we got to eat veggies, but nothing like the stuff we were growing for the food banks". To have people, who have no control over what they are allowed to eat, work on producing delicious healthy food and never permit them to consume it seems to be a particularly cruel practice and one that would reduce a person. Prisoners are not in the position of being able to purchase the produce they grow, such as the case for workers in market

gardens or supermarkets. To know that one is not worthy to eat the food they have grown is a diminishing experience.

Participants1 and 2 had a conversation together about how they felt prisoners are seen as nothing but numbers and not as people.

> *Participant 1: They asked me if I wanted to do a foundation skills (course). I looked at them and said 'I have a degree, do you want me to teach it?" And he said, "oh but you can still take it. You know, bums on seats that helps us".*
> *Participant 2: And it goes down to the clothes too, that you get. One pair of shoes, one size fits all. One jacket, and the jacket and the clothes, one size.*
> *Participant 1: And if you're sick, magic potion, Panadol.*
> *Participant 2: That's it.*
> *Participant 1: Doesn't matter what your sickness.*

Over the course of their interview, the same two participants and a manager discussed how prison officers speak to prisoners and how this dialogue effects the participants in prison and after release.

> *Participant 1: I think the one (stigma) in jail is pretty important. You try and discuss with them (prison officers) what are you going to do when you get out and they go "*snort* won't be long and you'll be back here".*
> *MD: We've picked guys up and the staff have said "we'll see you back".*

Major and O'Brien (2005) explain how even though members of high-status and low-status groups may enter into situations where negative stereotypes and discrimination thrive, those in the low-status group are "likely to respond in a dramatically different" manner to those of the high-status group, due to the members of each group having different understandings of their positions within society (p.395). For instance, an

offender (a low-status group member) applying for a job will have vastly different reactions and emotions at the job interview than a non-offender (a high-status group member) as most offenders know how hard it is to get employment when one has been given the label of offender. This understanding of positions within society has come through in the current study as the participants have been told their place over and over again by the prison officers, for example when they are told that 'they'll be back' behind the prison gate again before too long. Due to the constant reinforcement of this stigmatising attitude, the participants said they were demeaned and made to feel less than other people, like they were not worthy of being part of any community that was not behind bars. These men have been reduced to nothing but prisoners who have no place in the outside world. Being in prison is the highest form of punishment for offenders in New Zealand, so to reinforce the notion that that is all they will ever be is to diminish their personhood.

Many of the participants felt that they were nothing but numbers in prison. This dismissal of themselves as people contributed to the stigma they felt which continued past their release. One of the participants who spoke of being made to feel less than others in prison had been out for a decade and the feelings he felt during his time in prison were so strong that when discussing them he said that it put him right back into that psychological space again.

Trying to be a productive member of society when one has lost ones personhood can be extraordinarily difficult. A concern was articulated that ex-prisoners are no longer a part of the community they live in. This makes

it extremely difficult to follow policies set in place, which are no problem for those who are deemed to be fully functioning members of society. Participant 3 had been considering writing a letter to the Minister of State Services to express his concerns regarding the policy at Work and Income, which states that those receiving the Jobseeker Support benefit must provide evidence of searching for work:

> *What I find quite puzzling is WINZ (Work and Income) has got a policy that says if you're a job seeker then you have to provide us with evidence that you've been looking for work, blah, blah, blah, what have you been doing this week? And that's it right there. Right there. Something is wrong right there. 'Cause as it stands, we just come out of prison…But they forget that there are others in the community, like the likes of us. We are not even in it. See what I mean? …. I am told to provide evidence of this and that. If I don't I can get my benefit cut. All this and that…they don't realise that I'm disadvantaged more so than the normal person who has not been in prison or who does not have a conviction.*

Participant 3 decided not to write the letter, as he felt that no one would take him seriously due to his ex-prisoner status. He does not believe that anyone in a position of authority will listen to him or any ex-prisoner.

Tewksbury (2012) states that stigma has a significant influence on an individual's interactions with others, as well as their place in society. Participants in the current research discussed a range of examples of power and control issues that occur in prison, from forcing prisoners to shave or they will not get fed, to prisoners being told that bullets are the only good thing for them. The participants mentioned these things in a resigned manner and qualified their resignation by saying that this is just how prison is. This indicates that many that prisoners expect, and feel that they deserve, less than those who live freely within society. The examples

of how personhood is removed continued past release from prison. Some participants felt there was no hope of ever being heard and that they would never be fully functioning members of society again.

Fear

The second most striking theme that emerged from the participants' observations of stigma is that they felt a great deal of fear. There was a fear of the unknown (how will the general public react to them? What will happen if they come across people who were effected by their crime/s?), fear of the known (an expectation of stigma, verbal abuse and possibly physical abuse), and fear of simply living a day-to-day life under the label of 'ex-prisoner'.

Crocker, Major and Steele (1998), Major and O'Brien (2005), and Tewksbury (2012) identified several specific negative consequences of stigma which include public recognition which can result in being identified as less than everyone else, emotional distress, social banishment, loneliness and discrimination. The current research found the same. Participants in this study repeatedly referred to fear of public recognition. They also spoke of the emotional distress at being in a new environment and how tough it is to adapt and adjust into such an alien atmosphere. Some participants found it emotionally challenging just coping with the diverse range of such a large number of people out of prison. Others felt completely overwhelmed with the complexities of life outside prison and felt quite unsafe.

> *I thought, well once I got out, I'd be able to settle into society just like that, you know? But it wasn't all that easy… I haven't seen the*

world for a while, so I've only seen the same people day in and day out. I mean…I'd see the same people all the time. But whereas when I came out, I see all different people. And there's multitudes more people out here than just in there! (p 15)

To be honest, I was scared. I was scared. Because of the fact that I knew people discriminate. (P 14)

I would get worried grocery shopping at first. (P 13)

For me it was scary. It was one of the most scariest things I've had to go through. I was used to being in prison for so long that I got to that point when the gate was in front of me, all of my emotions just shut down. (P 2)

The participants in the current research expressed their fear of being exposed as an ex-prisoner, which was shown in the theory developed by Steele (1997) and Steele and Aronson (1995) around stereotype threat and the fear of judgement and confirmation of stereotypes. Some participants said they are open regarding their status as an ex-prisoner in certain situations: e.g. meeting potential new partners. However, when the decision to disclose their status is taken away from the participants, it creates a sense of fear; for example, some participant's spoke of the worry they carry with them if a co-worker was to find out about their ex-prisoner status and the boss does not know about it. Other participants expressed this fear regardless of if they were comfortable with owning and disclosing their label themselves. This fear extended to repercussions in the community when coming in contact with people who had been attached to the participants offending in any way or people they knew from their time in prison.

Nearly all of the participants had cautionary tales of people they knew who had been verbally or physically attacked in public. They spoke of how just knowing that it had happened –even if it had not actually happened to them - was enough to put fear in them so great that it changed their way of living. This fear of repercussions led some participants to avoid certain areas of the city, to not leave their home unless absolutely necessary, and to avoid everyday interactions with people.

> *Take it one day at a time. 'Cause it's scary out here. It's not safe. (P 2)*

> *I probably would have spent the first three months (isolated, and trying to figure out) the safest ways to get from where I was to where I needed to be. (P 9)*

This heightened level of rejection sensitivity has made a dramatic difference in the lives of the participants of this research. The expectation of rejection occurring ensures that the participants do not live their full lives and actively hide away or do all they can to avoid potential rejection (Downey et al., 2000). The results of the current study show that the participants who mentioned their sensitivity to rejection were aware that they are no longer welcome as part of society, as they no longer meet the group norms of society (Juvonen &Gross, 2005).

Participant 14 expressed a fear that was present in many conversations I had with participants. He said that "…you get that feeling that everybody is watching you". Many of the participants spoke about this; that no matter what their offence was, how long they were in prison, or how long they had been out of prison, this fear was mentioned at nearly every interview. The

feeling of constantly being watched and what the repercussions were was mentioned repeatedly. Some of the participants explained why they have this fear…

> *Like the other day I came across somebody that said 'Don't I know you?' and you turn around, quickly look and you think 'hmmm, who knows me now?' you know? And you think 'does somebody know me from where I've been, or somebody that's been from inside that's seen me back out here again and that, wants to have a piece of you or whatnot'. You're still alert of it. You know, even after the 4 years or 5 years or whatever, you know? (P 8)*

> *It's really hard not to say too much to people, because of the fear of being discriminated against. (P 14)*

> *Stigma…it can affect the way that you live, it can affect the way that you interact with other people because all that it takes is somebody to say something and that person that you're talking to (looks at you funny), know what I mean? (P 1)*

Participant 7 described what happened when he was confronted by his past girlfriend in public. He told me that he was sitting at the bus depot, waiting for a bus when his ex-girlfriend walked by and saw him. She made "a spectacle" out of him.

> *(She) went right off…out in the open, screaming and shouting surrounded by the public, nowhere (for me) to crawl.*

Similarly, Participant 13 shared how he was fearful for a while upon his release because he almost had an encounter with a family member of his victim.

> *I was walking down town one day and…I've seen him down a couple of blocks away. I run into the, the guy I did it against, I run into his uncle in the street. The uncle was in front of me and I was*

at the back of him. So I took off down the other side street. I didn't want him to see me. I didn't want him to notice me.

He spoke about how he was quite scared when he first came out, due to this incident, and it made him wonder what would have happened if this man had seen him. He was very wary of his surroundings from that moment on.

One of the participants also discussed his fear and constant worry surrounding employment. After he left prison he worked for a contractor who would outsource his staff to other firms.

> *You're still aware going into the other firm – you know that their policy is no criminal records. You know, you've still been put out there as a temp, you're still being put out there to go work for those sort of places and that. You're a bit wary. Do these people really know? Do they know about me? It's, it's still out there. You're still thinking about it…(If other employees in the other firm found out about his criminal background) Well, they'd just go to the boss and say, ok I know what this person is and where he's been and whatnot and I don't want him back on my site again and whatnot. There could be something like that, or you might end up around the back of the shed and getting a beating or something like that. You don't know. (P 8)*

Participant 8 said that it was the uncertainty in this situation that made it so difficult and fostered the feelings of fear and wariness.

One participant, who had been out of prison for less than three weeks, brought up a fear he has for his future. He spoke with me about other prisoners he had met whilst in prison, what had happened upon their release, and their subsequent recall back to prison.

> *I talked with a couple of young fellas who come out and they go " ah no, I'm going to be doing this and I'm going to be doing that, you*

know, it's time for me to change" and while I've been in, I've seen them come back two, maybe three times. I ask them, "What happened?" "Oh I got out and I got on the dole and they started taking money out for my fines and stuff like that and I was left with 5 bucks a week to live on, so I went and did some burglaries". (P 2)

Participant 2 was very concerned that this would happen to him – that he would be forced to engage in illegal activities simply to get by due to the financial commitments he must uphold. He was most fearful that he would have more debt that he could realistically handle and that he would not be able to get any help or support from any agencies (Work and Income, for example) due to the stigma that accompanies his ex-prisoner status. The manager who attended this interview explained that while in prison, all payments are suspended (child support, Inland Revenue, court fines, reparation, money owed to Work and Income) and approximately three weeks post release these payments recommence.

Participant 1 was also at this interview and he too expressed the same fear as Participant 2 (being so desperate and feeling so isolated that criminal activity seems like the only solution), as well as being fearful that he would never be free of his stigma.

If I don't get my A into G that's exactly what's going to happen to me. And I know that. It's like a never-ending story. (P 1)

We discussed how he was planning on going to see those agencies he owed money to and see about setting up a payment plan. He told me that he had already started to do this by going to the courthouse to set up payments for his reparation.

> *I went down to the courthouse and I said, "this is what I can afford" and the lady said "how much" and I said "$2 a week" and she makes a face and I said "well do you want to do my budget with me?", I brought all the stuff there, and she goes "see you're wrong – it's $1.80 a week".*

Even though he could clearly only afford $1.80 per week, he has begun making $5 weekly payments. This was only one of his payments that he had set up and already he was paying more than he could afford.

The interview that was the most troubling to me was with Participant 10. He told me that prior to his court hearing, while he was on bail, he was very fearful of the repercussions of his offences. He had strong concerns about going to trial, the subsequent media coverage and most of all, how he would be treated in prison. He knew that he would most definitely be going to prison; this was not a catastrophising thought. He was on bail for a year and while waiting for his trail…

> *I tried to live a normal life as I possibly could. It worked for a while. But then the time's coming and I'm thinking I just can't deal with this.*

So he planned to kill himself. He explained exactly how he was going to do it, where he was going to do it and how he would get there. He talked about the desperation he felt and how scared he was of going through the court system and living as a prisoner. He did not mention life after prison. I am not certain that he thought he would make it out of prison. Participant 10's family figured out what he was planning to do and informed the police, who came and picked him up a few days earlier than he was

scheduled to be picked up and kept him in a cell on suicide watch until his trial date.

Participant 10 then went on to tell me of the treatment he received as a person on suicide watch. He explained that it was such a degrading experience for him. He was stripped of all of his clothes and given "a cape sort of thing that tied up at the sides" and watched constantly. He was put on suicide watch again after he was sentenced, this time he was allowed clothes, but no blankets or pillow, and again he was constantly watched. This very action of being under surveillance and feeling judged was the main thing he was trying to escape through suicide. Placing someone on suicide watch is a very difficult situation. Doing all that can be done to prevent suicide is optimal, however as Participant 10 points out, it was a very degrading experience that caused him even more feelings of stigma and humiliation.

At the time of the interview, Participant 10 was suffering from a fatal illness. I got the sense that he wanted to share as much as possible about his journey from being a member of the general public to prisoner to ex-prisoner, and he did not hold back especially when it came to discussing intimate and sensitive information such as his desire to kill himself.

Ostracism

Gerber & Wheeler (2009) wrote of how being ostracised has the effect of being a "social death…the most potent form of rejection" (p.472). It was very evident in the results of the current research that this is true for the participants. Some participants spoke of feeling like they would never be

able to leave their past behind and that created a very strong sense of ostracism.

> *Having to talk to people about where you're coming from and why you're applying for this and that – it's so demeaning. Because you are still a criminal. You will always be a criminal. (P 10)*

> *It's always there. You know it's always there. You know it, you know? It doesn't ever go away…there's always that chance that it's going to get rehashed again. And there's always somebody "you went to prison 10-15 years ago, eh?" and then it brings it all back up and brings it all back into the open again, so you're back to square one again. (P 1)*

> *You're mindful of things…It's always there. You're still that number, you're still that person. You can't get away from it. (P 8)*

A number of participants spoke of how they feel they will be easily recognised as an ex-prisoner forever, any time they apply for a job, try to get different accommodation, try to fly overseas, apply for a loan, attempt to get insurance of any kind, or any time they have to identify themselves. Attempts to create a better life for themselves will result in dredging up the past and will put them right back there, as it is not a past that can ever truly be moved on from. A prime example of this was the participant in this study who talked about how he was forced out of his job 21 years after he was released from prison because the company he was working for was bought out and the new bosses did not want an ex-prisoner working for them. It made no difference to the new bosses that the participant had not been in prison for over two decades. The stigma associated with being an ex-prisoner is ever-lasting.

More than 50 years ago Goffman (1963) wrote that the mark of stigma

prevents people from being allowed full access to all parts of society, and

this appears to still be the case today. The ostracism that stigma creates

has had a striking effect upon the participants in this study, from the

participants who had been out of prison for a mere 3 weeks to the

participant who has been out for 24 years.

Participant 3 told me that after a number of years of being a model

prisoner he was allowed to leave prison grounds on a Work to Release

programme. He was so proud of himself and extremely excited at the

prospect of "getting to be part of society again". However, the company he

was working for was sold within a matter of weeks of him working there

and he was fired because the new owners did not want any offenders on

their staff. Participant 3 said that the impact this had on him was immense,

and it was at this point that he had a realisation.

> *That was the first time that I've ever really experienced that (stigma
> due to his status as an offender). In my life, ever. And to think
> 'Whoa, I'm not the same as them'. It really hit me. It really did. First
> time ever that I've ever felt that in my life.*

Another aspect of ostracism that affects ex-prisoners is that of familial

rejection and a lack of family support, which some of the participants felt.

As previously mentioned, being rejected from the family unit is the most

grievous of occurrences and one that can cause psychological and

physical harm (Fitness, 2005; Eisenberger et al., 2006). When those

participants who mentioned their family had disowned them spoke about it,

their demeanour changed entirely. The hurt and loss was evident in their tone and body language.

> *My family, they sort of disowned me. (P 15)*

> *I'll be honest, I had a bit of a problem with my sister when I first came out…she was frightened that I was going to do it to my nephews and nieces. She wouldn't be my support person for that reason. (P 13)*

Some of the participants mentioned how greatly relieved they were that their parents had passed away prior to their arrest, as they believed that the shame and humiliation of having a son in prison would have been too much for them to accept. There was an undercurrent of potential familial rejection and relief that it was not an option with deceased parents.

> *I'm so lucky that both my parents had died before all this happened. It would have destroyed my Mum. (P 10)*

> *Mum & Dad have been dead a few years. I've got 3 sisters left here in NZ. And only one of them will talk to me. The rest of them don't want to know me. (P 9)*

Lemert (1951) wrote about how a label can become so ingrained in people that they are excluded from conventional opportunities, such as housing. This resonated throughout the current study. Difficulty in finding accommodation was mentioned by many participants, whether the participants were speaking from the experience of struggling to find accommodation themselves, or those who were worrying in preparation for what they know will be a very challenging and ostracising experience when their time with the not-for-profit charitable trust was up. Finding

accommodation was such a concern for the participants that some of them mentioned that they would worry about these things prior to their release from prison.

> *Accommodation, you know, it's, when you're sitting in there (in his prison cell) and you're thinking about what am I going to do or where am I going to go or all that, well that certainly comes to mind. (P 6)*

It was clear from the discussions I had with the participants that obtaining accommodation was among the foremost things that the participants struggled with when it came to creating a new life for themselves. They were left feeling that their community had excluded them. For those whose family had also rejected them, this ostracism was immense.

It is difficult to find accommodation when living with the label of ex-prisoner, but it is extraordinarily difficult to do so when that label has the added attachment of 'sex-offender'. Certain conditions placed on sex offenders means that they are not allowed to be in or near parks or schools, and cannot be around children in general. Some participants explained how this creates a sense of ostracism for them, as there are parks, schools and children everywhere. It makes what would seem to be a relatively simple matter of finding accommodation nearly impossible for these men.

> *Participant 13: Some conditions, for example like myself, we're not allowed near a school or near a park. And if you get caught, if you're seen on probation, that's when you get recalled.*
>
> *Interviewer: It must be quite difficult because there are parks and schools everywhere.*
>
> *Participant 12: That's right! That's why we can't get houses.*

As well as the issue with conditions, there is the problem of getting approval of accommodation for ex-prisoners who are under Probation Services, with particular regard to sex-offenders. I had a conversation with two participants who explained to me that before any sex-offender moves into new accommodation, Probation Services must go to the property and determine if it is suitable for that ex-prisoner. Once it has been approved by Probation Services, then the ex-prisoner may move into it. However, this becomes a problem when Probation Services are too busy with other probationers and cannot go to assess the property for three or four days, or sometimes longer. Properties are taken quickly and if an ex-prisoner cannot go through the proper channels in time, then they miss out.

On top of losing out due to the time constraints of Probation's staff, one participant informed me that because ex-prisoners on probation can be recalled back to prison, now real estate agents "discriminate" against ex-prisoners. According to this participant, most real estate agents have a complete loss of faith in all ex-prisoners, and there are a number of real estate agents who will not allow any ex-prisoner to rent from them.

Participant 14 made an observation with regards to the ostracism he has experienced since he was released from prison. At the end of our interview, I asked him if he had anything else he would like to share with me. His response encapsulated how he feels to be labelled and ostracised.

> *This is the worst thing that ever happened to anybody - being marked as different for the rest of your life. You've got to be a survivor to be able to cope with it. (P 14)*

Unemployment

As shown in the literature review, research has found that those who have spent time in prison have a very hard time finding employment, leading to the loss of self-efficacy and the feeling of not belonging to the community in which they live (Chui & Cheng, 2013; Lockwood et al., 2012). This came through in the current research as a strong issue for the majority of the participants. Even those who had worked whilst in prison found it extremely difficult to find employment once released back into the community.

There was a sense of resignation about their unemployment situation that a number of participants discussed. There was an anticipation of being rejected due to their ex-prisoner status when it came to finding a job.

> *Because I knew that looking for a job was not going to be an easy one because of my background with things and that, nobody is going to give me a job. So that was really hard, you know? It still is. (P 14)*

> *But I'd say the employment side of things would be the biggest stigma. A lot of them, the minute they see or hear that you've been inside, they don't want to know you. It doesn't matter what offence you've committed that put you inside. As far as most employers are concerned, you're nothing but a thief, and we don't want thieves in our company. (P 9)*

This anticipated rejection had a strong impact on their decisions to even apply for work. Participants in this study spoke about how they may as well not bother applying for jobs, even though they had experience in the advertised position. Participant 3 spent quite a bit of time during our conversation discussing this point with me. At the time of our interview he

was feeling extremely despondent about not being able to find a job, and was unsure of he ever would be able to work again. He desperately wanted to work, and to be a contributing member of society once again. However, he was uncertain that he ever would be able to reach that goal.

> *Like before prison, for example, I could walk into a meat industry place and I'd apply for a job, show them my CV and I'd pretty much name my hourly rates. That's how sure I am, I value my experience. You know? I could tell them that and get a job! But with the conviction behind me, I can't do that… So in some ways, right now, when I see a vacancy, yeah that sort of kicks in. Alarm bells ring. Should I just even bother applying for that job even though, that's my trade? I'd really like to go and apply for that job, but hey…it might be a waste of time. Because a lot of application forms now have 'have you got a prison conviction' or criminal history? I don't bother carrying on, eh? The door shuts right there. Woah, what am I going to do now? (P 3)*

Some participants discussed how they knew for certain that they would be not be successful in their job seeking and that it is now inevitable that at some point in the job application process they would be asked to disclose if they have any criminal convictions. Many job application forms will want those who have criminal convictions to identify themselves. If this does not occur at the beginning of the application process, it will happen at some point prior to signing an employment contract. This belabouring of the past prevents ex-prisoners from moving on with their lives and removes the ability to leave behind their status as an ex-prisoner.

> *I've lost several jobs because I've had to go for criminal record checks. (P 8)*
>
> *Most employers now, if you've got a conviction – see you later! (P3)*

It makes no difference to employers how long the prospective employee was in prison or what they had been in prison for, according to my participants, they are immediately dismissed from the job application process as soon as they indicated that a prison sentence was served. This was evidenced in a conversation by Participants 7 and 8.

> *Participant 7. You know, even now 6, 7 years later, I go for a job interview, the minute you turn around and say you've got a criminal record (slaps hands together) it doesn't matter.*
>
> *Participant 8. Doesn't matter. You might as well just…*
>
> *Participant 7. Yeah you just don't bother.*
>
> *Participant 8. You might as well just turn around and walk out.*
>
> *Participant 7. Cause you're not going to get a job.*

There was an expressed expectation of instant dismissal that came through in the interviews. This perceived instant dismissal of the tainted individual serves to keep those with the stigma of being an ex-prisoner in their place below everybody else and eventually prevents them from trying to make a better future for themselves.

The problem of being a person who has the skills and qualifications to apply for well-paying jobs in their area of expertise, but knowing they will never be successful in getting the jobs they are applying for, is a constant struggle with the end result of negative emotions impacting the participants' well-being. The body language of the participants and change in speech (tone, volume and length of pauses) when speaking about the subject of looking for work suggested that depression, frustration, and dismay were encompassed in a sense of resignation about their employment circumstances. These emotions surrounding the theme of

88

unemployment is supported by the research of Chui and Cheng, (2013), Homant and Kennedy (1982), Lockwood et al. (2012), Tewksbury (2012), Vennard and Hedderman (2009), and Winnick and Bodkin (2008) who also found feelings of this nature are common in those who are unemployed.

Prevarication and Deception

A number of participants expressed to me that they felt they needed to either lie to get a job, or they had to deceive people in order to get or keep a job. Participant 1 told me that he felt he had to lie about his criminal history in order to find work, but that he had a really hard time putting himself in the position of starting his post-prison life as a liar.

> *But if you think about it, if you want to get ahead, you have to lie your ass off. And so what's that doing for you? You are starting off again with a lie. And I refuse to do that. I refuse to do that. Only because I don't want to start and come out and try and start something by lying, lying about things. But I also understand when people say they've got no choice. And I understand that too. And if you're going for a job, "been to prison?" "– no". Do checks and they go you've been in prison, "look, I'm going to make sure that nobody hires you, because you're a liar." (P 1)*

The irony of this statement was not lost on me. It would appear that ex-prisoners cannot get work if they tell the truth and let their prospective employer know about their status as an offender, and yet if they do not disclose that information they *still* cannot get employment because they have deceived their potential employer. Because of his unwillingness to lie, Participant 1 had at the time of the interview not been able to find employment.

Other participants see disclosure of their criminal offence/s as a need to know piece of information, meaning they will only divulge their offender status if explicitly asked.

> *When I go for a job, if I get asked, yeah. Oh when was that and how long? Explain that. If they want to know what for, I'll tell them. If they don't want to know, well it's a need to know question really. (P 9)*

> *If people don't ask, (I) sure as hell don't tell. (P 8)*

Participant 3 was put into a very emotionally conflicting situation when he was forced by his employer to deceive his co-workers. At the time he was on a Work to Release programme from within a prison.

> *And the guy we worked for was subcontracting for this other company and we were working alongside civilians. But we were told not to let them know who we are. Who we were. 'You are not prisoners, don't let them know you're prisoners. If they ask you where you guys live, just tell them you live (somewhere else), don't let them know you're prisoners!' That's what we had to live with, going to work every day. (P 3)*

Participant 3 said this situation created a lot of internal conflict for him. He was so happy to be working, even if he was going back to prison every night, yet he was miserable because he was forced to "censor" himself with his work colleagues. He could not "talk freely to people". He said that found it "tough, because we weren't allowed to tell them who we were because we'd lose our jobs. We'd get sacked."

I did speak to a participant who had managed to find work without his employers knowing about his background. While Participant 7 was emphatic that he has never lied to get a job, he did omit his criminal record

from his job applications and interactions with his current and former employers and co-workers.

> *Actually, no, I've never lied. They just haven't asked me the question, so I have never told them an answer. If they don't ask me, I don't lie.*

He expanded on this to discuss how he felt his past and present bosses and co-workers would treat him if they knew of his criminal record.

> *….if the people that I worked with knew that I was either a) on parole at the time, or b) out of my time but had a criminal record, uuuumm I don't think they would have treated me in the same way as they did.*

When Participant 7 was asked how he felt living his working life under a lie, he responded by talking about the uncertainty he lived with.

> *It's the same, it's really the same as being inside. Some people find out what you're in there for (in prison), you end up getting a hiding. I found that out too well myself.*

There is an expectation here that Participant 7 would be treated poorly, or even violently, should his co-workers and/or employers find out about his past criminal conviction. Participant 7 had received "a hiding" from other inmates whilst he was incarcerated due to the nature of his crimes. He was fearful that should his co-workers know about his past offences, he would receive the same treatment from them.

Modified labelling theory has shown that negative stereotypes are abundant within society and that those who have been labelled expect

rejection from others (Link et el., 1989; Link, Mirotznik, & Cullen 1991;

Link, Struening, Rahav, & Nutbrook, 1997). The expectation of rejection or

negative treatment from others has come through a few times in these

findings, most notably with regards to unemployment, ostracism and loss

of personhood, as well as in this current section of prevarication and

deception. With the participants of this study, lying and deceiving others

appears to be a coping mechanism; a way to either put off the apparent

inevitable discrimination or to detract from the label the participants have

been given in the hopes of proving their worth and moral standing through

hard work.

Stigma

Much like the research of Jones et al. (1984) this research shows that the

lived experience of stigma that ex-prisoners deal with is all-consuming. It

pervades every aspect of the ex-prisoners' lives from the practical (where

they can live) to the subjective (how they see themselves) and everything

in between.

> *It's always there. You know it's always there. You know it, you know? It doesn't ever go away. (P 1)*

> *Everybody, to me in my mind no matter what you've done, everybody deserves a second chance. But it doesn't happen. (P 9)*

Goffman (1963), Jones et al. (1984), and Crocker et al. (1998) agree that

there is a shared assumption that those who are stigmatised possess an

attribute that marks them as different. This mark causes those who have it

to be devalued in the eyes of others to the point where they are outcasts in

their own communities. This came through in the current study where participants spoke of not leaving their homes for months at a time, unless it was to fulfil mandatory probationary duties or to maintain their living situation with the not-for-profit charitable trust. Participants also spoke of feeling unsafe, being ostracised, losing family care and support, being blacklisted by real estate agencies, being unable to find work, and not having people listen to them. All of these things happen as a result of their mark: their identity as a tainted individual has caused them to be devalued to such an extent that they are no longer welcome to be a part of society any more. They get pushed aside and ignored as contributing members of society resulting in negative consequences from which it is hard to move on (Crocker at al., 1998; Major & O'Brien, 2005; Tewksbury, 2012).

Participant 1 explained that once an individual has a strong label attached to them, such as ex-prisoner, it is unlikely that anyone will see them as anything else.

> *There's a good old saying in prison – when you do good, no one remembers. When you wrong, no one forgets. Somebody said that to me and it always stuck in my head. It's so true. Because I've done a lot of good things out in the community. I've done a lot of good things. But nobody remembers that. (P 1)*

He spoke about how he had spent years doing good things for other people, but now due to his criminal activity he will never be seen as a good person again, regardless of his future actions. He was upset that all the good he has done in his life has now been negated by his offender status.

Link et al. (1989), Link et al. (1991) and Link et al. (1997) have confirmed that negative stereotypes that are associated with labelling are abundant in society and when displayed on a regular basis it causes those who have been labelled to expect rejection from others. This was shown in the current study when participants discussed how they had anticipated their family rejecting them and how they did not bother applying for jobs because they knew they would not be accepted. The stigma associated with being an ex-prisoner is so pervasive that even before leaving prison it was known by the participants that it would be very hard to find accommodation or work.

> *Once you're out, the stigma continues because you still have to find a job, you still have to get on with life. (P 10)*

Those participants who voluntarily identified themselves as being sex-offenders in this research spoke of their double banishment; that of banishment from the general prison population and also from community life, particularly with regards to accommodation, similar to the research of Ricciardelli & Moir (2013). The participants in the current study discussed their exclusion from the general prison population for their own safety and also took it further than Ricciardelli & Moir (2013) by explaining in detail just how difficult it is to be labelled a sex-offender and try to fit into the community again, more so than other ex-prisoners. In and out of prison the stigma seems greater for sex-offenders as opposed to other offenders. While ex-prisoners are considered to be blemished, it would seem that all sex-offenders are wholly tainted and all are not welcome in our

communities, despite some sex-offenders having completed extensive therapy in prison.

Pachankis (2007) discussed how having a concealable stigma meant living with considerable stressors, including the stress of disclosure. Similar to Pachankis (2007), participants in this study spoke about having to lie in order to get a job or being forced to lie to keep a job. Being forced to further conceal their stigma was emotionally taxing and some of the participants refused to do so. This meant some of those participants who refused to lie to get a job had not been able to find work. Being forced to lie to keep a job was extremely taxing and left a constant overhanging worry that people would find out. There was no certainty that co-workers would find out about the participants criminal backgrounds, however this did not stop the participants from predicting potential consequences. Anything could happen, from being fired to being beaten.

Allport (1954) described how vigilance is a common defence used by those who are stigmatised. It is explained that in order to deflect discrimination and potential violence, stigmatised individuals must remain vigilant at all times, which is a stressful and exhausting way to live. "The greater one's perceived stigma, the greater the need for vigilance in interactions" (Meyer, 2003, p.9). Crocker at al. (1998) say there is a "need to constantly be 'on guard'…alert or mindful of the possibility that the other person is prejudiced" (p.517). These explanations have a direct association with how the participants in the current study spoke about the way in which they now live. Participants expressed how hard they found having to be vigilant in their everyday life - worrying about being able to

trust people, applying for jobs with their new identity, interacting in general

with others - while remaining the person they used to be prior to going to

prison. Some of the participants said they had lived very normal lives until

they went to prison and they are now struggling to mesh their old selves

with their new status. Other participants expressed their frustration at

trying to fit into the world in which they now live when they have a

completely new identity.

> *It's just a really hard thing to try to understand at times. It's almost like I'm living in another identity? If I can explain it to you? It's like my body, or my mind has been moved into a new identity. And I'm trying to know this new person who I am now, living everyday with. I'm trying to know who this person is. Because that's what I'm being labelled now. (P 3)*

This issue with self-concept is similar to how Jones et al. (1984) described

the conflict between how the stigmatised view themselves and how others

perceive them which creates a vulnerable and unstable self-concept.

It has been discussed that previous studies suggest that it is highly likely

an individual who has been given the label of offender will ultimately return

to offending through acceptance of the label (Bernburg, et al., 2006; Lopes

et al., 2012). The current research shows that re-offending was certainly

on some of the participants' minds, and they worry that recidivism may be

their only means of survival; as opposed to offending in order to live up to

their label. As previously discussed, some of the participants discussed

the worry they have of being forced to turn to crime upon release and one

explained that he had asked those who had been released why they were

back in prison. The participant who had asked this question of other

offenders stated he was told that they had no choice but to steal in order to survive. They were living in places they did not want to be in and that they could not afford. They had so many fines coming out of their Jobseeker Support benefit that they had no money for food. They were stealing to make ends meet. They were not stealing because that is what offenders do – they were doing it because they felt in that moment they had no other options if they wanted to survive. It has already been established in the present study that ex-prisoners have been given a negative label and they have been rejected to the point that they feel unwelcome and unwanted. This makes asking for assistance extremely difficult, no matter how much it is needed.

The participants who contributed to this study expressed their frustration and disappointment with the way they are forced to live once out of prison: the lack of assistance and empathy from government agencies, difficulty in finding a job and housing, living off extremely limited income, community exclusion, familial rejection, having a warped sense of self, and knowing they are considered outcasts by the communities they live in. It seems that instead of embracing the offender label and living up to it, those who have been labelled as an offender have little choice in how they are living and, as such, how they survive. This is very much in line with Lemert's (1951) assessment of labelling theory that states labelling does not cause deviance, instead deviance becomes the best option when it provides the best solution to life problems. It should be noted that according to the not-for-profit charitable trust, one year after these interviews were conducted

not one of my participants was recalled or arrested and sent back to prison.

It may very well be that after being labelled as an offender and living as an offender for a while due to survival or lifestyle choice, that the label is reinforced to such a degree that the individual then strives to live by the label (Bernburg, et al., 2006; Lopes et al., 2012). However that was not brought up by the participants of the current study. What was mentioned was the fear of having to return to criminal activities due to lack of support and assistance which was ever-present, in particular with those participants who were not long out of prison.

Crocker and Major (1989) theorised that individuals who have been stigmatised later in life, opposed to those who were born with a stigmatising condition, lack the "strategies of self-protection" that seem to come with being a member of a stigmatised group (p. 618). That is to say that, people who were born with a stigmatising or oppressive characteristic such as race, ethnicity, or a physical disability experience different psychological consequences of stigma to those who possess stigmatising qualities which were acquired during late adolescence or adulthood. Their reasoning behind this is that it takes time for people to "learn to devalue outcomes that are no longer attainable or likely" (p.618). It would seem that Crocker and Major (1989) are of the opinion that those being stigmatised will handle the inevitable repercussions of being a stigmatised individual by acclimatising to their situation. Jones et al. (1984) has a similar view in that if stigmatising conditions have a gradual manifestation, then those who feel the effects of the stigma will have time to adapt, as

opposed to those whose stigma comes on suddenly. This was evident in the current study.

The participants in the present research spoke about a multitude of ways in which they have adapted and changed their lives to better fit their new status as an ex-prisoner. Participants spoke about how they avoid leaving their home, how they avoid people as much as possible, how they keep their ex-prisoner status hidden whether they want to or not, and how they do the bare minimum to keep their Jobseeker Support benefit in order to avoid as much rejection as possible. These participants now live away from their families, in a completely different city, and do not have any support system in place, apart from the not-for-profit charitable trust that is helping them. They anticipate rejection from potential employers, humiliation at constantly having to announce their offender status, and ostracism from their community. Their entire lives have shifted perspective. The participants are very much aware that their lives will never be the same as they were prior to being charged with a crime and going to prison, and they have come to adapt to their situation.

> *I can tell you when I first went to prison, I was sitting in the RO (receiving office) thinking 'What the hell am I doing here? How did it come to this?' And I tell you what, no matter how much money you've got, where you come from, what your background is, you sit there and you ponder and you think, and you know that from that time on, whenever you get out of jail, it might only be one day, life has changed - then you will be stigmatised. (P 1)*

One of the managers of the not-for-profit charitable trust discussed how they have kept in contact with the men they have helped over the years who are still, a decade later, struggling to cope with their label because

every time it gets brought up, it takes them right back to square one – a square it is extremely difficult move on from.

> *We're still in touch with guys that we had 10 years ago and…there probably isn't an end to how they feel about themselves in that stigma sort of thing, they apply for another job and it's all there. It always keeps coming back…it just hits (them) every now and again. It always keeps coming back over something.*

In undertaking this research I saw that the label of ex-prisoner gets brought up on a regular basis for these participants, and they feel the resulting stigma that is attached to it: - whether it is when identifying themselves when applying for work or accommodation or in any situation that requires identification, or if someone innocuously says that they know them, or if they see someone they know who is connected to their past, or the company they work for gets sold, or in any of the circumstances that have been discussed in this study. I have spoken with men who have been out of prison for over a decade, and *still* they feel stigma and it is *still* a blow when it occurs.

> *Whatever you do, you've still got to declare it. End of story. So it makes no difference if it's day one out or day 3000. (P 7)*

> *It's always there. You're still that number, you're still that person. You can't get away from it. (P 8)*

Stigma for ex-prisoners is an all-pervasive force that has re-defined the lives of the participants of this research. They are aware that their label and the stigma that is associated with it is something they will *never* be able to move away from.

Chapter 5: Conclusion

Limitations of the study

As previously mentioned within this study, phenomenological research is the study of the lived experience of a specific phenomenon. In order to best achieve this, the researcher must bracket their own experiences, as it is the participants' descriptions of the phenomenon that form the meaning of the phenomenon, not the researchers. The limitation with this method is that it can be difficult to ensure pure bracketing on behalf of the researcher, which can lead to disruption in the interpretation of the data.

Due to the subjectivity of the topic being discussed, there can be difficulties in establishing a good rapport with, and understanding the information presented by, the participants. It can be difficult to grasp the full meaning behind the information a participant divulges when the participants are uncovering sensitive experiences that they may not have fully thought through themselves prior to the interview.

While the sample was very diverse and included participants with a wide range of ages, ethnic backgrounds, time spent in prison, length of time out of prison, with the participants having all spent time in different prisons, all of the participants were male, so there is no female representation included in this research.

Future research

The findings of this research have implications for future stigma research with ex-prisoners and offenders in general. The phenomenological approach can be used for follow-up studies that look into the experiences

of stigma that other groups of ex-prisoners face, for example female ex-prisoners, white collar offenders, and violent offenders, in order to make better generalisations across New Zealand's ex-prisoner population. It is important to ensure that the stigma experiences of both genders are being addressed, as females may have vastly differing experiences to males, just as it is important to look at various offending groups for the same reason. Although stigma research has been conducted with ex-prisoners in the past, it was extremely difficult to find any that had been undertaken in New Zealand. It is imperative that as a multi-cultural nation with our own values and social norms we conduct research into this area in order to create better and safer communities.

Stigma research within the offender population should not be limited to ex-prisoners. There is a capacity to take this research further and address stigma that all offenders face, regardless of whether the offenders have been incarcerated or not.

Additionally, researching stigma from the perspective of ex-prisoners should be done with potential social policy changes in mind. This research is a starting point; a first step in gathering information that has the potential to affect social change. With the alarmingly high rate of recidivism in New Zealand it would be pertinent to explore different avenues to combat this troubling trend. This research has briefly touched on why recidivism occurs from the participants' point of view. It is highly recommended that research is taken further in this area.

Summary

This qualitative, phenomenological study has looked at the stigma experiences of ex-prisoners. Fifteen adult male ex-prisoners who had been living in the community from between three weeks to 24 years were interviewed. The two managers of a not-for-profit charitable trust also contributed their wealth of knowledge after a decade of working with ex-prisoners. The interviews were transcribed and using phenomenological analysis were analysed for themes. The themes that emerged were Loss of Personhood, Fear, Ostracism, Unemployment, Prevarication & Deception, which stemmed from the ever-present phenomenon of Stigma. This research has provided an explanation of what living with stigma in the context of being an ex-prisoner is like, as well as providing a New Zealand perspective amongst the literature from overseas.

In general, the findings from this study confirm those found in existing literature, regardless of the nationality or age of the literature. Based on the findings in the present research, the stigma experiences of ex-prisoners are both life altering and on-going. Whilst all participants had stigma experiences, there was very little difference in the effects of that stigma between those ex-prisoners who had been out for three weeks and those who had been out for a decade or more. The same main issues were touched on in nearly all interviews with the majority of participants expressing frustration and anger at the stigma-related situation they find themselves in – regardless of how they got there. Some participants were somewhat bewildered with their new status, some were angry at the treatment they received in prison and just prior to their incarceration, some

were frustrated at the treatment they still receive after years of being out of

prison. All participants knew that life will never truly be in their control

again.

References

Allport, G. W. (1954). *The nature of prejudice*. Cambridge, Mass: Addison Wesley Pub. Co.

Austin, J. & Hardyman, P. L. (2004). The risks and needs of a returning prisoner population. *Review of Policy Research, 21*(1), 13-29. doi: 10.1111/j.1541-1338.2004.00055.x

Ayduk, Ö., Gyurak, A., & Luerssen, A. (2009). Rejection sensitivity moderates the impact of rejection on self-concept clarity. *Personality   and Social Psychology Bulletin, 35*(11), 1467-1478. doi:10.1177/0146167209343969

Baumeister, R.F., Twenge, J.M., & Nuss, C. (2002). Effects of social exclusion on cognitive processes: Anticipated aloneness reduces intelligent thought. *Journal of Personality and Social Psychology, 83,* 817-827.

Becker, H. (1963). *Outsiders: Studies in the sociology of deviance*. New York: The Free Press.

Benson, M. L., Alarid, L. A., Burton, V. S., & Cullen, F. T. (2011). Reintegration or stigmatization? Offenders' expectations of community re-entry. *Journal of Criminal Justice, 39*, 385-392. doi: 10.1016/j.jcrimjus.2011.05.004

Bernburg, J., & Krohn, M. (2003). Labelling, life chances, and adult crime: The direct and indirect effects of official intervention in adolescence on crime in early adulthood. *Criminology, 41*(4), 1287-1318

Bernburg, J., Krohn, M., & Rivera, C. (2006). Official labelling, criminal embeddedness, and subsequent delinquency: A longitudinal test of labelling theory. *Journal of Research in Crime & Delinquency, 43*(1), 67-88.

Bhatti, B., Derezotes, D., Kim, S., and Specht, D. (1989) *The association between child maltreatment and self-esteem.* In Mecca, A.M., Smelser, N.J., & Vasconcellos, J.(Eds.) The Social Importance of Self-Esteem, Berkeley, CA.: University of California Press.

Blascovich, J., Mendes, W. B., Hunter, S. B., Lickel, B., & Kowai-Bell, N. (2001). Perceiver Threat in Social Interactions with Stigmatized Others. *Journal of Personality and Social Psychology, 80.* 253-267.

Bresnahan, M., & Zhuang, J. (2011). Exploration and validation of the dimensions of stigma. *Journal of Health Psychology, 16*(3), 421-429. doi:10.1177/1359105310382583

Brown, C. (2011). Vocational psychology and ex-offenders' reintegration: A call for action. *Journal of Career Assessment, 19*(3), 333-342. doi:10.1177/1069072710395539

Buckley, K. E., Winkel, R. E., & Leary M. R. (2004). Reactions to acceptance and rejection: Effects of level and sequence of relational evaluation. *Journal of Experimental Social Psychology, 40*, 14-28.

Byrd, K., OíConnor, K., Thackrey, M. & Sacks, J. (1993). The utility of self-concept as a predictor of recidivism among juvenile offenders. *The Journal of Psychology, 127*, 195-200.

Cluley, E. (2009). Longitudinal survey of prisoners: Problems and needs of newly sentenced prisoners. *Probation Journal, 56*(2), 183-184.

Chui, W. H., & Cheng, K. K-Y. (2013). The mark of an ex-prisoner: Perceived discrimination and self-stigma of young men after prison in Hong Kong. *Deviant Behavior, 34*(8), 671-684. doi: 10.1080/01639625.2013.766532

Clement, S., Schauman, O., Graham, T., Maggioni, F., Evans-Lacko, S., Bezborodovs, N., Morgan, C., Rusch, N., Brown, J. S. L., & Thornicroft (2015). What is the impact of mental health-related stigma on help-seeking? A systematic review of quantitative and qualitative studies. *Psychological Medicine, 45*, 11–27. doi:10.1017/S0033291714000129

Cohen, M.Z. (1987). A historical overview of the phenomenologic movement. *Journal of Nursing Scholarship, 19*(1), 31-34.

Cook, J. E., Purdie-Vaughns, V., Garcia, J., & Cohen, G. L. (2012). Chronic threat and contingent belonging: Protective benefits of values affirmation on identity development. *Journal of Personality and Social Psychology, 102*(3), 479. doi:10.1037/a0026312

Corrigan, P.W., & Pen D.L. (1999). Lessons from social psychology on discrediting psychiatric stigma. *American Psychologist, 54*, 765-776.

Corrigan, P. W., & Rao, D. (2012). On the self-stigma of mental illness: stages, disclosure   and strategies for change. *Canadian Journal of Psychiatry, 57*(8), 464-469. Retrieved from http://search.proquest.com.ezproxy.waikato.ac.nz/docview/10379

8332?pq-origsite=summon

Creswell, J. W. (2009). *Research design: Qualitative, quantitative, and mixed methods approaches.* United States of America: Sage.

Crocker, J., & Major, B. (1989). Social stigma and self-esteem: The self-protective properties of stigma. *Psychological Review, 96*(4), 608-630. doi:10.1037/0033-295X.96.4.608

Crocker, J., Major, B., & Steele, C. M. (1998). Social Stigma. In Fiske, S. T., Gilbert, D. T., & Lindzey, G. (Eds.) *Handbook of Social Psychology* (pp. 504- 553). Boston: McGraw Hill.

Department of Corrections. (2013a). Trends in the offender population, 2013. Retrieved from http://www.corrections.govt.nz/__data/assets/pdf_file/0012/73893 Trends_in_the_Offender_Population_2013_updated.pdf

Department of Corrections. (2013b). Working with offenders. Retrieved from http://www.corrections.govt.nz

Dixon, R. (2007). Ostracism: One of the many causes of bullying in groups? *Journal of School Violence, 6*, 3-26.

Downey, G., Feldman, S., & Ayduk, O. (2000). Rejection sensitivity and male violence in romantic relationships. *Personal Relationships, 7*, 45-61.

Durkheim, E., & Lukes, S. (1982). *The rules of sociological method and selected texts on sociology and its method.* London: Macmillan.

Eisenberger, N. I., Jarcho, J. M., Lieberman, M. D., & Naliboff, B. D. (2006). An experimental study of shared sensitivity to physical pain and social rejection. *Pain, 126*, 132–138.

Eisenberger, N.I., Lieberman, M.D., & Williams, K.D. (2003). Does rejection hurt? An fMRI study of social exclusion. *Science, 302*, 290-292.

Emlet, C. A. (2005). Measuring stigma in older and younger adults with HIV/AIDS: An analysis of an HIV stigma scale and initial exploration of subscales. *Research on Social Work Practice 15*(4), 291–300.

Fiske, S. T. (2004). *Social beings: A core motives approach to social psychology.* New York: Wiley.

Fiske, S. T., & Yamamoto, M. (2005). Coping with rejection: Core social motives across cultures. In K. D. Williams, J. P Forgas, & W. von Hippel (Eds.) *The Social Outcast: Ostracism, social exclusion, rejection, and bullying* (pp. 263-276). New York, New York: Psychology Press.

Fitness, J. (2006). Bye bye, black sheep: The causes and consequences of rejection in family relationships. In K. D. Williams, J. P Forgas, & W. von Hippel (Eds.), *The Social Outcast: Ostracism, social exclusion, rejection, and bullying* (pp. 263-276). New York, New York: Psychology Press.

Geenen, R., & Kool, M. (2012). Loneliness in patients with rheumatic diseases: The significance of invalidation and lack of social

support. *The Journal of Psychology, 146*(1), 229-241. doi:10.1080/00223980.2011.606434

Gerber, J., & Wheeler, L. (2009). On being rejected: A meta-analysis of experimental research on rejection. *Perspectives on Psychological Science, 4*(5), 468-488. doi:10.1111/j.1745-6924.2009.01158.x

Giorgi, A. (1997). The theory, practice, and evaluation of the phenomenological method as a qualitative research procedure. *Journal of Phenomenological Psychology, 28*(2), 235-235. doi:10.1163/156916297X00103

Giorgi, A. & Giorgi, B. (2008). Phenomenology. In J. A. Smith (Ed.) *Qualitative research: A practical guide to research methods* (pp. 26 52). London: Sage Publications Ltd.

Goffman, E. (1963). *Stigma: Notes on the Management of Spoiled Identity*. New York, New York: Prentice-Hall.

Griffiths, K. M., Christensen, H., & Jorm, A. F. (2008). Predictors of depression stigma. *BMC Psychiatry, 8*(1), 25. doi:10.1186/1471 -244X 8-25

Guignon, C. B. (2006). *The Cambridge companion to Heidegger* (2nd ed.). Cambridge, MA: Cambridge University Press.

Heatherton, T. F., Kleck, R. E., Hebl, M. R. & Hull, J. G. (2000). *Social Psychology of Stigma*. New York: Guilford.

Hegarty, P., & Golden, A. M. (2008). Attributional beliefs about the controllability of stigmatized traits: Antecedents or justifications of prejudice? *Journal of Applied Social Psychology, 38*(4), 1023-1044. doi:10.1111/j.1559-1816.2008.00337.x

Henrickson, M., Dickson, N., Mhlanga, F., & Ludlam, A. (2015). Stigma, lack of knowledge and prevalence maintain HIV risk among Black Africans in New Zealand. *Australian and New Zealand Journal of Public Health, 39*(1), 32-37. doi:10.1111/1753-6405.12301

Hessini, L., Kumar, A., & Mitchell, E. M. H. (2009). Conceptualising abortion stigma. *Culture, Health & Sexuality, 11*(6), 625-639. doi:10.1080/13691050902842741

Holliday, A., Hyde, M., & Kullman, J. (2004). *Intercultural communication: An advanced resource book.* London, England: Routledge.

Homant, R. J., & Kennedy, D. B. (1982). Attitudes towards ex-offenders: A comparison of social stigmas. *Journal of Criminal Justice, 10*, 383-391

Jones, E. E., Farina, A., Hastorf, A. H., Markus, H., Miller, D. T., & Scott, R. A. (1984). *Social Stigma: The Psychology of Marked Relationships*. New York: W. H. Freeman.

Juvonen, J., & Gross, E. F. (2005). The rejected and the bullied. In K. D. Williams, J. P. Forgas, & W. von Hippel (Eds.) *The Social Outcast: Ostracism, social exclusion, rejection, and bullying* (pp. 263-276). New York, New York: Psychology Press.

Kaiser, C. R., Vick, S. B., & Major, B. (2006). Prejudice expectations moderate preconscious attention to cues that are threatening to social identity. *Psychological Science, 17*, 332–338. doi:10.1111/j.1467- 9280.2006.01707.x

Lambie, I., & Stewart, M. W. (2012). Community solutions for the community's problem: An evaluation of three New Zealand community-based treatment programs for child sexual offenders. *International Journal of Offender Therapy and Comparative Criminology, 56*(7), 1022-1036. doi:10.1177/0306624X11420099

La Vigne, N., Davies, E., Palmer, T., & Halberstadt, R. (2008*). Release planning for successful re-entry: A guide for corrections, service providers and community groups.* Washington, D.C.: Urban Institute, Justice Policy Center.

Leary, M. R., Kowalski, R. M., Smith, L., & Phillips, S. (2003). Teasing, rejection, and violence: Case studies of the school shootings. *Aggressive Behavior, 29*(3), 202-214. doi:10.1002/ab.10061

LeBel, T. P. (2012). Invisible Stripes? Formerly incarcerated persons' perceptions of stigma. *Deviant Behavior, 33*(2), 89-107. doi:10.1080/01639625.201053836

Lemert, E. (1951). *Social pathology: a systematic approach to the theory of sociopathic behavior.* London: McGraw-Hill.

Lewis, J. (1998). Learning to strip: The socialization experiences of exotic dancers. *The Canadian Journal of Human Sexuality, 7*(1), 51-66.

Lick, D. J., & Johnson, K. L. (2014). "You can't tell just by looking!": Belief in the diagnosticity of visual cues explain response biases in social categorization. *Personality and Social Psychology Bulletin, 40*(11),1494-1506. doi:10.1177/0146167214549323

Link, B., Castille, D. M., & Stuber, J. (2008). Stigma and coercion in the context of outpatient treatment for people with mental illnesses. *Social Science & Medicine, 67*(3), 409.

Link, B. G., Cullen, F. T., Struening, E., Shrout, P. E., & Dohrenwend, B. (1989). A modified labelling theory approach to mental illness. *American Sociological Review, 54*(3), 400-423. Retrieved from http://www.jstor.org.ezproxy.waikato.ac.nz/stable/2095613?redirected

Link, B. G., Mirotznik, J., & Cullen, F. T. (1991). The effectiveness of stigma coping orientations: Can negative consequences of mental illness labelling be avoided? *Journal of Health and Social Behavior 32*(3), 302-320. Retrieved from http://www.jstor.org.ezproxy.waikato.ac.nz/stable/2136810

Link, B. G., Struening, E., Rahav, M., & Nutbrook, L. (1997). On stigma and its consequences: Evidence from a longitudinal study of men with dual diagnoses of mental illness and substance abuse. *Journal of Health and Social Behavior, 38*(2), 177-190. Retrieved from http://www.jstor.org.ezproxy.waikato.ac.nz/stable/2955424

Link, B. G., & Phelan, J. C. (2001). Conceptualizing stigma. *Annual Review of Sociology, 27*(1), 363-385. doi:10.1146/annurev.soc.27.1.363

Link, B. G., Yang, L. H., Phelan, J. C., & Collins, P. Y. (2004). Measuring mental illness stigma. *Schizophrenia Bulletin, 30*(3), 511-541. doi:10.1093/oxfordjournals.schbul.a007098

Lockwood, S., Nally, J., Knutson, K., & Ho, T. (2012). A comprehensive study on postrelease employment among offenders in Indiana. *Corrections Compendium, 37*(1), 1-38.

Lopes, G., Krohn, M. D., Lizotte, A. J., Schmidt, N. M., Vásquez, B. E., & Bernburg, J. G. (2012). Labelling and cumulative disadvantage: The impact of formal police intervention on life chances and crime during emerging adulthood. *Crime & Delinquency, 58*(3), 456-488.

Lucas, J. W., & Phelan, J. C. (2012). Stigma and status: The interrelation of two theoretical perspectives. *Social Psychology Quarterly, 75*, 310-333. doi:10.1177/0190272512459968

Lukies, J., Graffam, J., & Shinkfield, A. J. (2011). The effect of organisational context variables on employer attitudes toward employability of ex-offenders. *International Journal of Offender Therapy and Comparative Criminology, 55*(3), 460-475. doi:10.1177/0306624X09359933

Major, B., & O'Brien. L. T. (2005). The social psychology of stigma. *Annual Review of Psychology, 56*, 393-421. doi:10.1146/annurev.psych.56.091103.070137

Mak, W. W. S., Cheung, R. Y. M., Law, R. W., Woo, J., Li, P. C. K., & Chung, R. W. Y. (2007). Examining attributional model of self -stigma in social support and psychological well-being among people with HIV/AIDS. *Social Science & Medicine, 64*(8), 1549-1559.

Malinen, S., Willis, G. M., & Johnston, L. (2014). Might informative media reporting of sexual offending influence community members'

attitudes towards sex offenders? *Psychology, Crime & Law, 20*(6), 535-552. doi:10.1080/1068316X.2013.793770

Meyer, I. H. (2003). Prejudice, social stress, and mental health in lesbian, gay, and bisexual populations: Conceptual issues and research evidence. *Psychological Bulletin, 129*(5), 674-697. doi:10.1037/0033-2909.129.5.674

Meyer, I. H., Schwartz, S., & Frost, D. M. (2008). Social patterning of stress and coping: Does disadvantaged social statuses confer more stress and fewer coping resources? *Social Science & Medicine, 67*(3), 368-379. doi:10.1016/j.socscimed.2008.03.012

Mills, A., Gojkovic, D., Meek, R., & Mullins, D. (2013). Housing ex-prisoners: The role of the third sector. *Safer Communities, 12*(1), 38-49. doi:10.1108/17578041311293134

Ministry of Justice. (2014).*Sentencing multiple offenders*. Retrieved from http://www.justice.govt.nz

Moran, D. (2000). *Introduction to phenomenology.* New York, NY: Routledge.

Moustakas, C. (1994). *Phenomenological research methods*. London, England: Sage.

Murphy, M. C., Steele, C. M., & Gross, J. J. (2007). Signalling threat: How situational cues affect women in math, science, and engineering settings. *Psychological Science, 18*, 879 – 885. doi:10.1111/j.1467   9280 .2007.01995.x

Myers, D. G. (2009). *Social psychology* (10th ed.). New York: McGrawHill Higher Education.

Nadesu, A., (2008), *Reconviction patterns of offenders managed in the community: A 48-month follow-up analysis*. New Zealand: Department of Corrections. Accessed at http://www.corrections.govt.nz/__data/assets/pdf_file/0004/67225 Recidivism_Report2008.pdf

Nordgren, L.F., Banas, K., & MacDonald, G. (2011). Empathy gaps for social pain: Why people underestimate the pain of social suffering. *Journal of Personality and Social Psychology, 100*, 120-128.

Ogden, J., & Nyblade, L. (2005). *Common at its core: HIV-related stigma across contexts*. Washington, DC: International Centre for Research on Women.

Pachankis, J. E. (2007). The psychological implications of concealing a stigma: A cognitive-affective-behavioural model. *Psychological Bulletin, 133*(2), 328-345. doi:10.1037/0033-2909.133.2.328

Pachankis, J. E., Hatzenbuehler, M. L., & Starks, T. J. (2014). The influence of structural stigma and rejection sensitivity on young

sexual minority men's daily tobacco and alcohol use. *Social Science & Medicine (1982)*103, 67. doi:10.1016/j.socscimed.2013.10.005

Penner, J. L., & McClement, S. E. (2008). Using phenomenology to examine the experiences of family caregivers of patients with advanced head and neck cancer: Reflections of a novice researcher. *International Journal of Qualitative Methods, 7*(2), 92-101.

Polaschek, D. L. L. (2010). Treatment non-completion in high-risk violent offenders: looking beyond criminal risk and criminogenic needs. *Psychology, Crime & Law, 16*(6), 525-540, doi:10.1080/10683160902971048

Polaschek, D. L. L. (2011). High-intensity rehabilitation for violent offenders in New Zealand: Reconviction outcomes for high- and medium-risk prisoners. *Journal of Interpersonal Violence, 26*(4), 664-682. doi:10.1177/0886260510365854

Polaschek, D. L., & Kilgour, T. G. (2013). New Zealand's special treatment units: The development and implementation of intensive treatment for high-risk male prisoners. *Psychology, Crime & Law*, *19*(5-6), 511-526. doi:10.1080/1068316X.2013.759004

Prince, P. N., & Prince, C. R. (2002). Perceived stigma and community integration among clients of assertive community treatment. *Psychiatric Rehabilitation Journal, 25*(4), 323.

Puhl, R. M., Schwartz, M. B., & Brownell KD (2005) Impact of perceived consensus on stereotypes about obese people: A new approach for reducing bias. *Health Psychology 24*(5): 517–525.

Purdie-Vaughns, V., Steele, C. A., Davies, P. G., Ditlmann, R., & Crosby, J. R. (2008). Social identity contingencies: How diversity cues signal threat or safety for African Americans in mainstream institutions. *Journal of Personality and Social Psychology, 94*, 615-630. doi:10.1037/ 0022-3514.94.4.615

Ricciardelli, R., & Moir, M. (2013). Stigmatized among the stigmatized: Sex offenders in Canadian penitentiaries. *Canadian Journal of Criminology and Criminal Justice, 55*(3), 353-385.

Riches, M. (2014). *Constructing and Reconstructing Criminality in Aotearoa/New Zealand: Dominant Media Discourses on Crime and Criminality and their Impact on Offenders' Identities and Rehabilitation Efforts.* (Master's thesis, University of Waikato, Hamilton, New Zealand). Retrieved from http://researchcommons.waikato.ac.nz/bitstream/handle/10289/9361/thesis.pdf?sequence=3&isAllowed=y

Rucklidge, J. J., McLean, A. P., & Bateup, P. (2013). Criminal offending and learning disabilities in New Zealand youth: Does reading comprehension predict recidivism? *Crime & Delinquency 59*(8), 1263-1286. doi: 10.1177/0011128709336945

Sakdalan, J. A., & Collier, V. (2012). Piloting an evidence-based group treatment programme for high risk sex offenders with intellectual disability in the New Zealand setting. *New Zealand Journal of Psychology, 41*(3), 6.

Schwarzer, R., & Weiner, B. (1991). Stigma controllability and coping as predictors of emotions and social support*. Journal of Social and Personal Relationships, 8*(1), 133-140. doi:10.1177/0265407591081007

Seymour, M. (2006), The recurring cycle: pathways of homelessness, crime and imprisonment, *Prison Service Journal, 166*, 17-21.

Simbayi, L.C., Kalichman, S., Strebel, A., Cloete, A., Hendaa, N., & Meketoa, A. (2007). Internalized stigma, discrimination, and depression among men and women living with HIV/AIDS in Cape Town, South Africa. *Social Science & Medicine 64*(9), 1823–1831.

Simourd, D. J., & Olver, M. E. (2002). The future of criminal attitudes research and practice. *Criminal Justice and Behaviour, 29*, 427-446.

Slater, C., & Lambie, I. (2011). The highs and lows of working with sexual offenders: A New Zealand perspective. *Journal of Sexual Aggression, 17*(3), 320-334. doi:10.1080/13552600.2010.519056

Slotter, E. B, & Gardner, W. L. (2014). Remind me who I am: Social interaction strategies for maintaining the threatened self-concept. *Personality and Social Psychology Bulletin, 40*(9), 1148–1161.

Steele, C. M., & Aronson, J. (1995). Stereotype threat and the intellectual test performance of African Americans. *Journal of Personality and Social Psychology, 69*(5), 797-811. doi:10.1037/0022 3514.69.5.797

Steele, C. M. (1997). A threat in the air: How stereotypes shape intellectual identity and performance. *American Psychologist, 52*(6), 613-629. doi:10.1037/0003066X.52.6.613

Stuber, J., Galea, S., & Link, B. G. (2008). Smoking and the emergence of a stigmatized social status. *Social Science & Medicine, 67*(3), 420-430. doi:10.1016/j.socscimed.2008.03.010

Tewksbury, R. (2012). Stigmatization of sex offenders. *Deviant Behavior, 33*(8), 606-632. doi:10.1080/01639625.2011.636690

Thakker, J. (2012). Public attitudes to sex offenders in New Zealand. *Journal of Sexual Aggression, 18*(2), 149-15. doi:10.1080/13552600.2010.526245

Thornicroft, C., Wyllie, A., Thornicroft, G., & Mehta, N. (2014). Impact of the "Like minds, like mine" anti-stigma and discrimination campaign in New Zealand on anticipated and experienced discrimination. *Australian & New Zealand Journal of Psychiatry, 48(*4), 360-370.

Twenge, J.M., Baumeister, R.F., DeWall, C.N., Ciarocco, N.J., & Bartels, J.M. (2007). Social exclusion decreases prosocial behavior. *Journal of Personality and Social Psychology, 92*, 56-66.

Twenge, J. M., Catanese, K. R., & Baumeister, R. F. (2002). Social exclusion causes self-defeating behavior. *Journal of Personality and Social Psychology, 83,* 606-615.

Van Beest, I., & Williams, K.D. (2006). When inclusion costs and ostracism pays, ostracism still hurts. *Journal of Personality and Social Psychology, 91*, 918-928.

Van Beest, I., Williams, K., & Van Dijk, E. (2011). Cyberbomb: Effects of being ostracised from a death game. *Group processes & intergroup relations, 14,* 581-596. doi: 10.1177/1368430210389084

Van Manen, M. (1990). *Researching lived experience: Human science for an action sensitive Pedagogy.* Albany, N.Y.: State University of New York Press.

Vennard, J., & Hedderman, C. (2009). Helping offenders into employment: How far is voluntary sector expertise valued in a contracting-outenvironment? *Criminology & Criminal Justice, 9*(2), 225-245.

Vess, J., & Watson, T. (2007). Risk assessment of child-victim sex offenders for extended supervision in New Zealand. *Journal of Forensic Psychiatry & Psychology, 18*(2), 235-247. doi:10.1080/14789940601116267

Viki, G. T., Fullerton, I., Raggett, H., Tait, F., & Wiltshire, S. (2012). The role of dehumanization in attitudes toward the social exclusion and rehabilitation of sex offenders. *Journal of Applied Social Psychology, 42*(10), 2349-2367. doi:10.1111/j.1559 1816.2012.00944.x

Wailoo, K. (2006). Stigma, race, and disease in 20th century America. *The Lancet, 367*(9509), 531-533. doi:10.1016/S0140-6736(06)68186-5

Wakslak, C. J., Nussbaum, S., Liberman, N., & Trope, Y. (2008). Representations of the self in the near and distant future. *Journal of Personality and Social Psychology, 95* (4), 757-73.

Ward, T., Vess, J., & Murdoch, S. (2012). A descriptive model of female violent offenders. *Psychiatry, Psychology and Law, 19*(3), 412-15. doi:10.1080/13218719.2011.589942

Wellford, C. (1975). Labelling theory and criminology: An assessment. *Social Problems, 22*(3), 332-345. doi:10.2307/799814

Wertz, F. J. (2005). Phenomenological research methods for counselling psychology. *Journal of Counseling Psychology, 52*(2), 167-177. doi:10.1037/0022-0167.52.2.167

Williams, K.D., Cheung, C.K.T., & Choi, W. (2000). Cyberostracism: Effects of being ignored over the internet. *Journal of Personality and Social Psychology, 79,* 748-762.

Williams, K. D., & Zadro, L. (2005). Ostracism: The indiscriminate early detection system. In K. D. Williams, J. P Forgas, & W. von Hippel (Eds.), *The Social Outcast: Ostracism, social exclusion, rejection, and bullying* (pp. 263-276). New York, New York: Psychology Press.

Willis, G. M., Malinen, S., & Johnston, L. (2013). Demographic differences in public attitudes towards sex offenders. *Psychiatry, Psychology and Law, 20(2*), 230.

Wilson, N. J., Kilgour, G., & Polaschek, D. L. L. (2013). Treating high-risk rapists in a New Zealand intensive prison programme. *Psychology, Crime & Law,* 19(5-6), 527-547. doi:10.1080/1068316X.2013.759007

Winnick, T. A., & Bodkin, M. (2008). Anticipated stigma and stigma management among those to be labelled "Ex-con". *Deviant Behavior, 29*(4), 295-333. doi:10.1080/01639620701588081

Yang, L. H., Kleinman, A., Link, B. G., Phelan, J. C., Lee, S., & Good, B. (2007). Culture and stigma: Adding moral experience to stigma theory. *Social Science and Medicine, 64*(7), 1524-1535. Retrieved from http://www.sciencedirect.com.ezproxy.waikato.ac.nz/science/article pii/S0277953606005958

Appendices

Appendix A: Recruitment poster

My name is Brigitte MacLennan and I am a Masters student at the University of Waikato. I am very interested in studying how stigma affects your life, as someone who has been in prison.

- ***Do you feel people judge you because you have been in prison?***

- ***Are you discriminated against because you have been labelled as an offender?***

- ***Are you willing to speak about your experiences?***

If you answered 'yes' to these questions I would love to speak with you!

All participants will receive a koha!

Please help me learn more about the stigma you deal with. I hope this new knowledge will have implications for better services in prison and more help for those released.

Please speak with (manager) if you are interested in participating.

Appendix B: Participant information sheet

My name is Brigitte MacLennan; I am a student in the Masters of Applied Psychology programme at the University of Waikato's Psychology School. I would like to invite you to participate in my research to learn about the stigma that recently released offenders face in their communities. In appreciation for your time and thanks for participating in this research you will receive a $20 Warehouse voucher.

There is no research in the area of stigma and offenders in New Zealand. This study intends to find new knowledge about the lived experience of stigma that recently released offenders face in an effort to address some of the issues surrounding this phenomenon.

You will be required to:

☐ Attend one session which will take approximately one hour in duration.

☐ At the beginning of the session some demographic details will be taken.

☐ The session will involve answering some questions about your experiences with stigma. The questions will focus on your experiences, thoughts and understanding of the stigma you have experienced, and how this impacts on your life. This will be more of a discussion than a question and answer session.

Data will remain anonymous and confidential:
You will be given an identification number at the beginning of our interview and this will be the only way you will be identified throughout the entire research process. All participant information, including demographic information, will be anonymous and only identifiable by the identification number of each participant. All data will be kept in a secure location and will be destroyed after 5 years.

Participation in this study is entirely voluntary:
You are free to withdraw from the research at any time without question or negative consequence. If you have any enquires regarding your participation in the study feel free to contact the researcher or supervisor:

Researcher: Brigitte MacLennan
School of Psychology at the University of Waikato
bas2@students.waikato.ac.nz
Phone: 021966052

Supervisor: Dr Armon Tamatea
School of Psychology at the University of Waikato
tamatea@waikato.ac.nz
This project has been approved by the School of Psychology Research and Ethics Committee and if you have any concerns about the research you may approach the convenor of the committee; Professor Michael O'Driscoll, Tel: 07 838 4466 ext 8899 and email: m.odriscoll@waikato.ac.nz

Appendix C: Consent form

Ψ **School of Psychology**

THE UNIVERSITY OF
WAIKATO
Te Whare Wānanga o Waikato
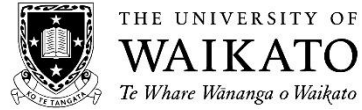
PARTICIPANT'S COPY

Research Project: An Interpretative Phenomenological Study of the Lived Experience of Stigma in Recently Released Male Offenders Living in a Hamilton Community

Name of Researcher: Brigitte MacLennan

Name of Supervisor (if applicable): Dr Armon Tamatea

I have received an information sheet about this research project or the researcher has explained the study to me. I have had the chance to ask any questions and discuss my participation with other people. Any questions have been answered to my satisfaction.

I agree to participate in this research project and I understand that I may withdraw at any time. If I have any concerns about this project, I may contact the convenor of the Research and Ethics Committee.

Participant's Name: _____Signature:_____ Date:_____

Appendix D: Demographic survey

Demographic Survey

Please provide answers to the following questions.

1. Please indicate your gender by ticking next to the gender you identify with.

   Male ___

   Female ___

2. Please write your current age in the space provided.

   _____

3. Please tick next to the ethnic group you most identify with.

   Maori ___

   NZ European ___

   Cook Island Maori ___

   Chinese ___

   Samoan ___

   Tongan ___

   Niuean ___

   Indian ___

   Other (please specify) _____

4. Please write how many times you have spent time in a NZ prison in the space provided.

   _____

5. Please write how long you have currently been out of prison in the space provided.

   _____

Appendix E: Interview prompts

Prompt 1: I'd be interested to hear your views on your transition from prison to the community.

Prompt 2: What are some typical experiences you have when: -

- Going to the bank
- Going to the supermarket
- Dealing with Work & Income
- Looking for work
- Getting a driver's license

Prompt 3: Can you tell me about any experiences have you had with stigma?

Prompt 4: Have your stigma experiences changed the longer you have been out of prison?

Appendix F: Participant letter post-data analysis

Dear

I would like to thank you again and tell you how very grateful I am that you invited me into your home and spoke with me about such a sensitive topic. I really, really appreciate that you did this for me. Thank you.

I am aware that this is extremely long and I apologise for that. I tried to cut it down, but you gave me <u>such fantastic</u> information. I really do not want to lose any of it. You absolutely do not have to read through all of this, if you do not want to.

If you do want to, please can you read over the summary of what we spoke about and make any necessary adjustments, make any corrections that need to happen, cross things out, add things in, whatever you feel is best. I have provided an extra blank sheet of paper for you to make any notes on that you would like me to have.

Please do not be alarmed by the quotes – I am intending on putting a few quotes in my thesis and I wanted to make a record of them at this stage in my analysis.

Please give this back to Geoff or Jill by Tuesday 30 September (even if you do not want to read this) and they will pass it along to me.

Again, thank you. You have helped me more than I can say.

All the very best,

Brigitte MacLennan