How Being
Trauma-Informed
Improves
**Criminal Justice System
Responses**

PRI
POLICY RESEARCH, INC.

Today's Speakers

- Travis Parker, M.S., L.I.M.H.P., C.P.C.
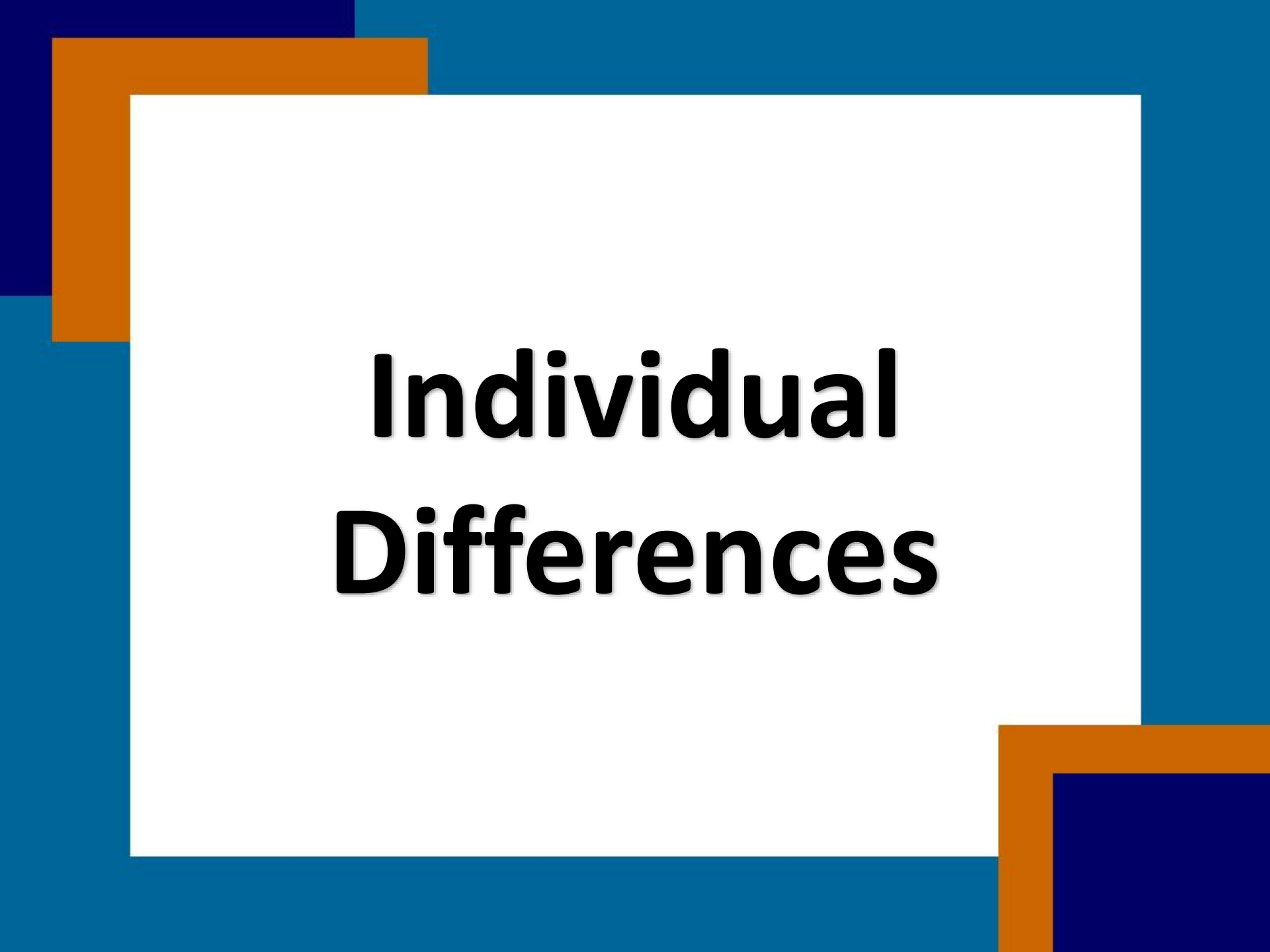 Program Area Director

- Ashley Krider, M.S.
  Senior Project Associate

Today's Agenda

- Review Goals of Trauma Training

- New Content: *Individual Differences*

- Trauma-Informed Strategic Planning Tool

- Q & A

How Being Trauma-Informed Improves CJS Responses

- Keys to becoming trauma-informed
  - Develop understanding
  - Increase awareness
  - Recognize signs
  - Learn how to respond

- GOAL: Trauma-Informed Responses
  - Increase safety
  - Reduce recidivism
  - Promote recovery

Individual Differences

Event

Experience

Effect

Traumatic Events

Pervasive Effect

Activity

Individual Differences

Participation: Use Chat Box

A. What are factors that may make an individual *more resilient* in the face of powerful life events?

B. What are factors that may put an individual *at a higher risk* of experiencing events as trauma?

Learning check

- Family ties
- Strong primary relationship
- Connection to community
- Employment
- Biology
- Meaningful activity
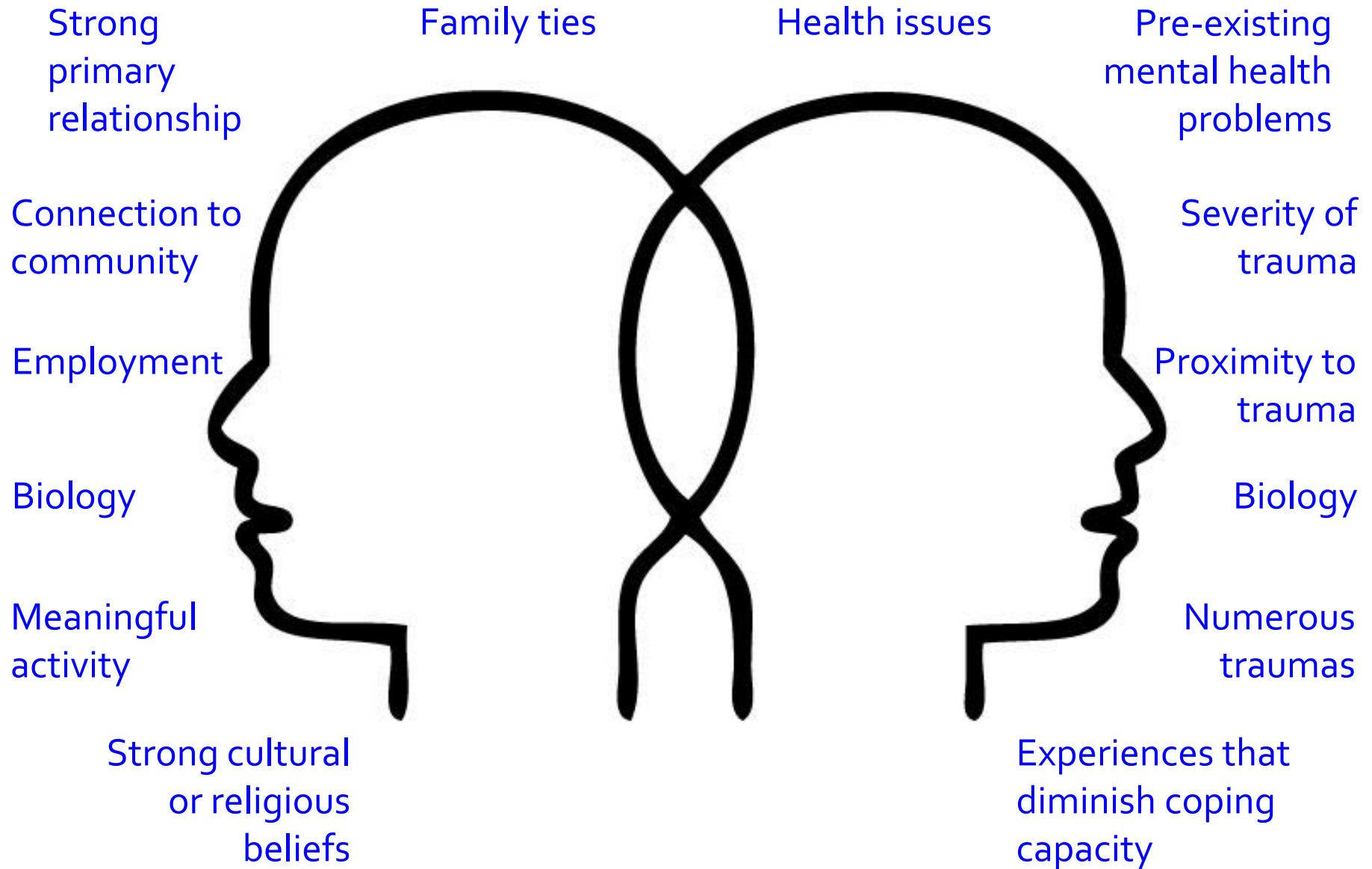- Strong cultural / religious beliefs

Resilience

Learning check

Risk

- Health issues
- Mental health problems
- Severity of trauma
- Proximity to trauma
- Biology
- Previous trauma
- Diminished coping

Individualized Experiences

Strong primary relationship

Connection to community

Employment

Biology

Meaningful activity

Strong cultural or religious beliefs

Family ties

Health issues

Pre-existing mental health problems

Severity of trauma

Proximity to trauma

Biology

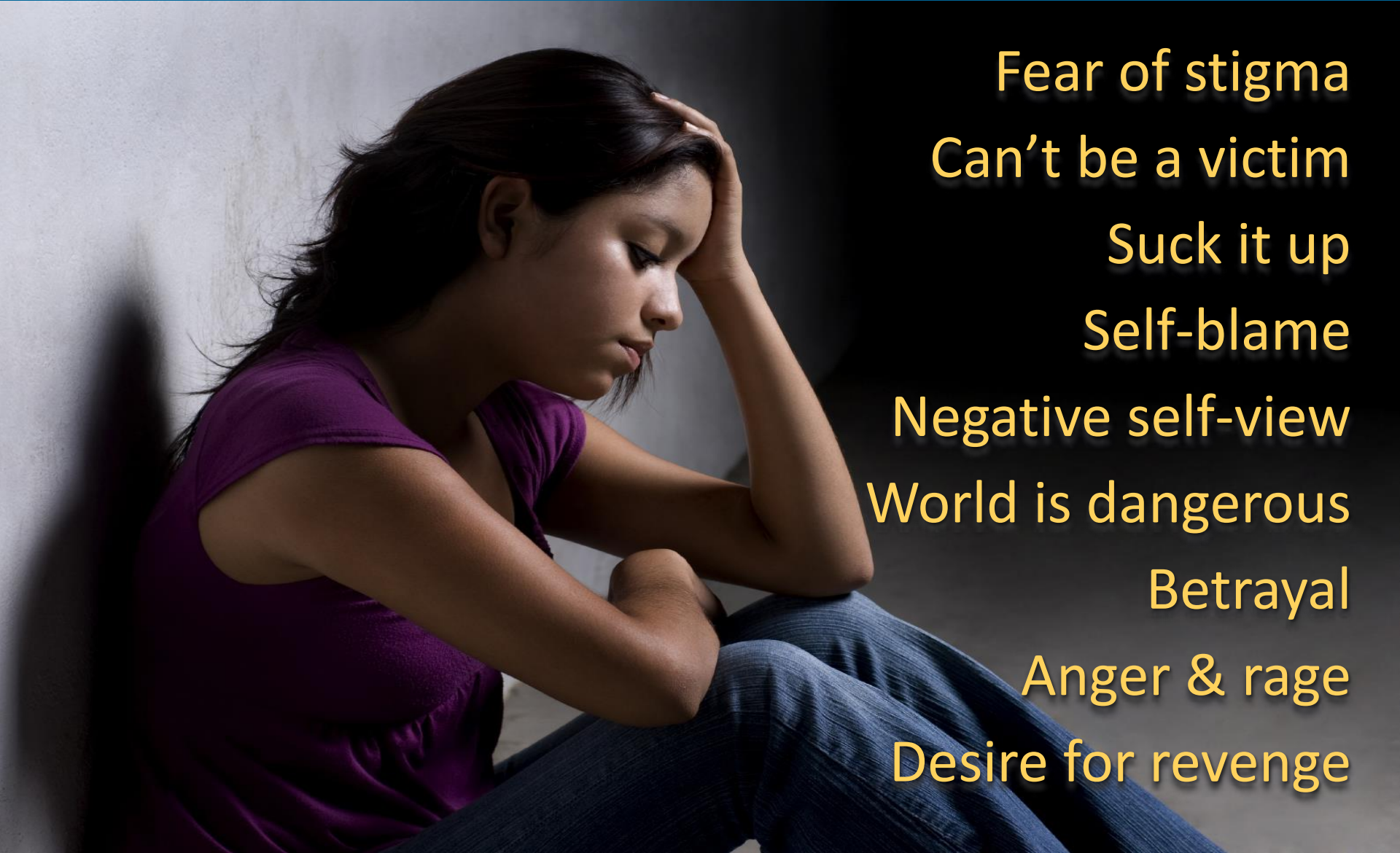Numerous traumas

Experiences that diminish coping capacity

Circumstances can affect risk

People *think* differently about trauma

Fear of stigma
Can't be a victim
Suck it up
Self-blame
Negative self-view
World is dangerous
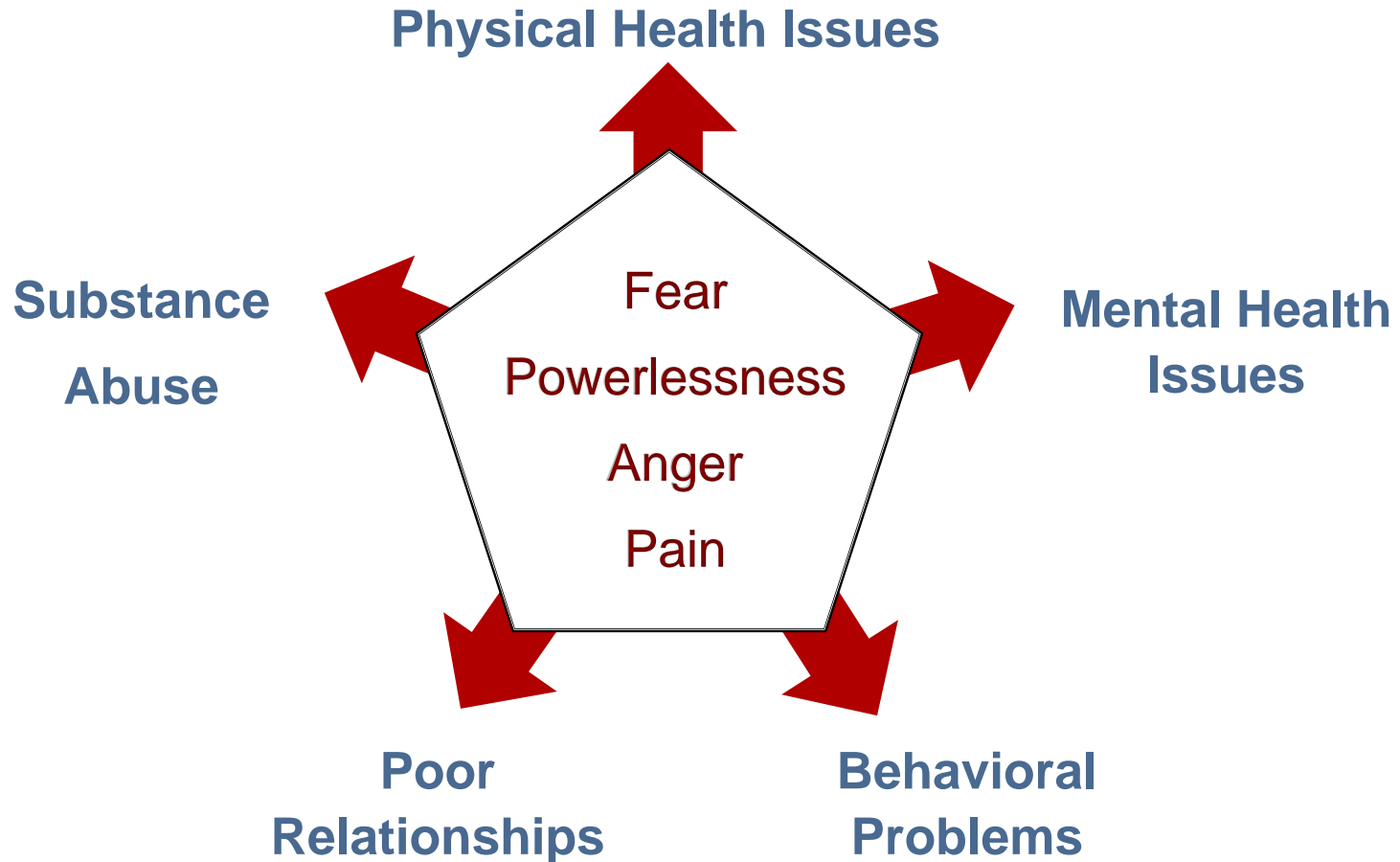Betrayal
Anger & rage
Desire for revenge

Long-term Effect

Physical Health Issues

Substance Abuse

Fear

Powerlessness

Anger

Pain

Mental Health Issues

Poor Relationships

Behavioral Problems

- Individual differences can affect resilience and risk

- Circumstances can affect risk

- People think differently about trauma

- Individualized experiences and response - each person is unique

Trauma-Informed Strategic Planning

SAMHSA's
Concept of Trauma
and Guidance for a
Trauma-Informed Approach

Prepared by
SAMHSA's Trauma and Justice Strategic Initiative

July 2014

Guidelines for Implementing a Trauma-Informed Approach

- Governance & Leadership

- Policy

- Physical Environment

- Engagement & Involvement

- Cross Sector Collaboration

- Screening, Assessment, & Treatment Services

- Training & Workforce Development

- Progress Monitoring & Quality Assurance

- Financing

- Evaluation

Step 1: Review		
	Priorities	**Action Steps**
Governance & Leadership How does agency leadership communicate its support and guidance for implementing a trauma-informed approach? How do the agency's mission statement and/or written policies and procedures include a commitment to providing trauma-informed services and supports? How do leadership and governance structures demonstrate support for the voice and participation of people using their services who have trauma histories?		

Local Site Example

Step 1: Review				
	Priorities	**Action Steps**	**Who**	**Timeline**
Governance & Leadership How does agency leadership communicate its support and guidance for implementing a trauma-informed approach? How do the agency's mission statement and/or written policies and procedures include a commitment to providing trauma-informed services and supports? How do leadership and governance structures demonstrate support for the voice and participation of people using their services who have trauma histories?	Build on existing policy/procedure language that prioritizes trauma: • Current sexual assault policy speaks to avoiding re-traumatization • Victim witness program may include trauma language • It is the ER's policy to not tell story multiple times • Deferred prosecution trauma services are available	Integrate a trauma-informed statement of importance for the CJCC: include on website, allude to it in meetings		
		Create a formal policy to increase trauma awareness at the victim witness program		
		Post a commitment to treating people in a trauma-informed manner at various CJS agencies, including the DA's Office Potentially use language other than "trauma" to speak to sensitivity across distinct life experiences		
		Add a standing line item regarding trauma within all relevant agency regular meetings Incorporate success stories into the workgroup		
	Integrate the peer/consumer voice	Add two peers with lived experience in the CJS to monthly trauma workgroup meetings		
		Drug Treatment Court relies on peer input		
	Determine what attributes of the problem-solving courts could be transferred to the dispositional courts. At the least, what can they do to avoid being part of the harming culture?	Determine what the ideal vision would look like: • Acknowledging the impact of trauma • Including discussion of bias/preconceived ideas about individuals in the CJS, and what to do about it		

Step 1: Review		
	Priorities	**Action Steps**
Policy How do the agency's written policies and procedures include a focus on trauma and issues of safety and confidentiality? How do the agency's written policies and procedures recognize the pervasiveness of trauma in the lives of people using services, and express a commitment to reducing re-traumatization and promoting well-being and recovery? How do the agency's staffing policies demonstrate a commitment to staff training on providing services and supports that are culturally relevant and trauma-informed as part of staff orientation and in-service training? How do human resources policies attend to the impact of working with people who have experienced trauma? What policies and procedures are in place for including trauma survivors/people receiving services and peer supports in meaningful and significant roles in agency planning, governance, policy-making, services, and evaluation?		

Step 1: Review		
	Priorities	**Action Steps**
Physical Environment How does the physical environment promote a sense of safety, calming, and de-escalation for clients and staff? In what ways do staff members recognize and address aspects of the physical environment that may be re-traumatizing, and work with people on developing strategies to deal with this? How has the agency provided space that both staff and people receiving services can use to practice self-care? How has the agency developed mechanisms to address gender-related physical and emotional safety concerns (e.g., gender-specific spaces and activities)?		

Step 2: Develop		
	Priorities	**Action Steps**
Engagement & Involvement How do people with lived experience have the opportunity to provide feedback to the organization on quality improvement processes for better engagement and services? How do staff members keep people fully informed of rules, procedures, activities, and schedules, while being mindful that people who are frightened or overwhelmed may have a difficulty processing information? How is transparency and trust among staff and clients promoted? What strategies are used to reduce the sense of power differentials among staff and clients? How do staff members help people to identify strategies that contribute to feeling comforted and empowered?		

Step 2: Develop		
	Priorities	**Action Steps**
Cross Sector Collaboration Is there a system of communication in place with other partner agencies working with the individual receiving services for making trauma-informed decisions? Are collaborative partners trauma-informed? How does the organization identify community providers and referral agencies that have experience delivering evidence-based trauma services? What mechanisms are in place to promote cross-sector training on trauma and trauma-informed approaches?		

Step 2: Develop		
	Priorities	**Action Steps**
Screening, Assessment, Treatment Services Is an individual's own definition of emotional safety included in treatment plans? Is timely trauma-informed screening and assessment available and accessible to individuals receiving services? Does the organization have the capacity to provide trauma-specific treatment or refer to appropriate trauma-specific services? How are peer supports integrated into the service delivery approach? How does the agency address gender-based needs in the context of trauma screening, assessment, and treatment? For instance, are gender-specific trauma services and supports available for both men and women? Do staff members talk with people about the range of trauma reactions and work to minimize feelings of fear or shame and to increase self-understanding? How are these trauma-specific practices incorporated into the organization's ongoing operations?		

Step 3: Support		
	Priorities	**Action Steps**
Training & Workforce Development How does the agency address the emotional stress that can arise when working with individuals who have had traumatic experiences? How does the agency support training and workforce development for staff to understand and increase their trauma knowledge and interventions? How does the organization ensure that all staff (direct care, supervisors, front desk and reception, support staff, housekeeping and maintenance) receive basic training on trauma, its impact, and strategies for trauma-informed approaches across the agency and across personnel functions? How does workforce development/staff training address the ways identity, culture, community, and oppression can affect a person's experience of trauma, access to supports and resources, and opportunities for safety? How does on-going workforce development/staff training provide staff supports in developing the knowledge and skills to work sensitively and effectively with trauma survivors. What types of training and resources are provided to staff and supervisors on incorporating trauma-informed practice and supervision in their work? What workforce development strategies are in place to assist staff in working with peer supports and recognizing the value of peer support as integral to the workforce?		

Step 3: Support		
	Priorities	**Action Steps**
Progress Monitoring & Quality Assurance Is there a system in place that monitors the agency's progress in being trauma-informed? Does the agency solicit feedback from both staff and individuals receiving services? What strategies and processes does the agency use to evaluate whether staff members feel safe and valued at the agency? How does the agency incorporate attention to culture and trauma in agency operations and quality improvement processes? What mechanisms are in place for information collected to be incorporated into the agency's quality assurance processes and how well do those mechanisms address creating accessible, culturally relevant, trauma-informed services and supports?		

Step 3: Support		
	Priorities	**Action Steps**
Financing How does the agency's budget include funding support for ongoing training on trauma and trauma-informed approaches for leadership and staff development? What funding exists for cross-sector training on trauma and trauma-informed approaches? What funding exists for peer specialists? How does the budget support provision of a safe physical environment?		

Step 3: Support		
	Priorities	**Action Steps**
Evaluation How does the agency conduct a trauma-informed organizational assessment or have measures or indicators that show their level of trauma-informed approach? How does the perspective of people who have experienced trauma inform the agency performance beyond consumer satisfaction survey? What processes are in place to solicit feedback from people who use services and ensure anonymity and confidentiality? What measures or indicators are used to assess the organizational progress in becoming trauma-informed?		

For More Information

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