UNDERSTANDING TRAUMA IN THE CONTEXT OF JUVENILE JUSTICE SYSTEMS

The Office of Juvenile Justice and Delinquency Prevention & National Center for Mental Health and Juvenile Justice
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HOUSEKEEPING

To ask questions throughout the webinar, please type your question into the Q&A panel located underneath the participant tab. When you are finished entering in your question click send.

If we have not answered your questions during the presentation, we will set aside time at the end to address them.

Please note: due to the large volume of participants, all attendees are muted upon entry.

A recording of this webinar will be posted to:

http://www.ncmhjj.com/jjtpa/resources/archived-webinars/
Sixty percent of American children are exposed to violence, crime or abuse in their homes, schools, and communities.

Without intervention, children exposed to violence are more likely to:

- Fail in school and in jobs;
- Suffer from mental health problems
- Suffer from serious medical problems
- Become future victims of violence
- Become involved in the juvenile and criminal justice systems.
DEFENDING CHILDHOOD STATE POLICY INITIATIVE

The goal of the State Policy Initiative is to implement the recommendations of the Attorney General’s Task Force on Children Exposed to violence to:

IMPROVE THE ABILITY OF STATES TO IDENTIFY AND TREAT CHILDREN EXPOSED TO VIOLENCE AND TO IMPLEMENT A CROSS-SYSTEMS, TRAUMA-INFORMED APPROACH.

“...This is much more than a public health crisis which imposes a cost burden on our health care system amounting to hundreds of billions of dollars each year. It is also a significant public safety and criminal justice problem — with growing financial and human costs.”

ATTORNEY GENERAL ERIC H. HOLDER JR. in the report of the attorney general’s national task force on children exposed to violence
DEFENDING CHILDHOOD STATE POLICY INITIATIVE

Collaboration between state leaders and policymakers *at the highest levels of government*

Increased coordination of service provision

Identification of evidence-based treatment and interventions

Development of sustainable policies and programs

Critical Components
Three states were selected to be a part of this initiative:

- CALIFORNIA
- MASSACHUSETTS
- MICHIGAN

and asked to make strategic plans that will:

- Ensure all at-risk children and youth are screened, and if necessary, assessed, at multiple points of contact
- Provide evidence-based, trauma-informed treatment services to children and youth exposed to violence
- Identify mechanisms to collaboratively blend and braid funding sources to support screening, assessment, and treatment services
Dr. Isaiah Pickens
Assistant Director of Service Systems at the National Center for Child Traumatic Stress
OBJECTIVES

1. Define trauma, reminders/triggers, and traumatic stress reactions.

2. Review key components of trauma-informed care.

3. Identify minimum of 2 strategies for child-serving systems to address traumatic stress reactions.
THE IMPORTANCE OF SAFETY

- Physical and emotional safety are basic needs we automatically fight to preserve.
- Fear is a natural response that promotes self-preservation.
- Our experiences shape how we perceive threat and understand strategies for self-preservation.
- A traumatic event is an occurrence experienced by an individual as physically or emotionally harmful and makes an individual feel that his/her life is threatened or the life of someone s/he loves is threatened.

Photo Credit: http://www.sciseek.com/search/web/fear%20response
Acute traumatic experience versus chronic traumatic experiences

Different people can view the same traumatic experience differently.

Traumatic experiences impact how a person assesses threat and their automatic strategies for self-protection.

Sometimes it limits how a person copes with stress.
93% of juvenile offenders reported at least one or more traumatic experiences.

The average number of different traumas reported was six.

Youth in the JJ population have rates of PTSD comparable to those of service members returning from Iraq.
Traumatic Events in the Lives of Youth Involved with the Justice System

• Physical, emotional, or sexual abuse
• Community violence and victimization
• Abandonment and neglect
• Domestic violence
• Traumatic loss
• Prostitution/Sex trafficking
• Serious accident
• Medical trauma, injury, illness
• Natural disaster
Potentially Traumatizing Events in JJ Settings

- Seclusion
- Restraint
- Routine room confinement
- Strip searches/pat downs
- Placement on suicide status
- Observing physical altercations
- Fear of being attacked by other youth
- Separation from caregivers/community
When Stress Becomes TOXIC

Used with permission from the Harvard University Center on the Developing Child
http://developingchild.harvard.edu/resources/multimedia/videos/three_core_concepts/toxic_stress/
A CLOSER LOOK AT PROBLEMATIC COPING

- **Post-Traumatic Stress Disorder (PTSD)** is a diagnosis that helps explain reactions to trauma.

- Common traumatic stress reactions include:
  - Intrusive thoughts
  - Re-experiencing
  - Avoidance
  - Negative thoughts & feelings
  - Dissociation
  - Hyper/hypo arousal

Photo Credit: http://www.catherinelleblancmft.com/how-to-reach-optimal-arousal/
How Youth Can Respond to Trauma:

INTRUSIVE SYMPTOMS

Images, sensations, or memories of the traumatic event recur uncontrollably.

This includes
• nightmares
• disturbing thoughts
• flashbacks
• physiological reactions
• intense/prolonged psychological distress
Kari’s Intrusive thoughts

Kari, a young man who was shot by a robber who stole his gold chain, spoke about his assailant:

I can’t get this dude out my head. I see him every day, every day. Every night I see this dude. And he’s locked up!!
How Youth Can Respond to Trauma:

AVOIDANCE SYMPTOMS

Avoidance of *internal reminders*
- thoughts, feelings, or physical sensations

Avoidance of *external reminders*
- People, places, objects
- Activities, situations, conversations
How Youth Can Respond to Trauma:

ALTERATIONS IN AROUSAL & REACTIVITY

- Irritable or aggressive behavior
- Self-destructive or reckless behavior
- Jumpiness or quick to startle
- Problems with concentration
- Sleep disturbance
- Hyperarousal/Hypervigilance
How Youth Can Respond to Trauma:

NEGATIVE ALTERATIONS IN COGNITION/MOOD

- Inability to remember parts of traumatic event
- Persistent negative emotions
- Persistent difficulty experiencing positive emotions
- Decreased interest or participation in activities
- Feeling detached from others
- Persistent exaggerated negative expectations
- Persistent distorted blame of self or others
Numbing: Ian loses his fear

So a lot of things that made me scared or made me nervous, they don’t scare me no more. They don’t affect me.

Like, if a whole bunch of dudes kept on lookin’ at me, I used to feel nervous. And, if someone kept on like giving me mean looks? I used to get nervous.

It don’t happen no more. It’s like some of the feelin’ is just gone. If they look at me mean now, I look at them right back like, “What?”

How Youth Can Respond to Trauma: DISSOCIATION

Mentally separating the self from the experience

May experience the self as detached from the body, on the ceiling, somewhere else in the room

May feel as if in a dream or unreal state
Trauma Reminders

Things, events, situations, places, sensations, and even people that a youth consciously or unconsciously connects with a traumatic event.
Loss Reminders

- Empty situations
- Shared activities
- Rituals
- Favorite activities
Hidden Reminders

• May be very difficult to identify

• Cause physical reactions without our being able to understand them

• Trust, affection, and connection can be hidden reminders of pain.
SURVIVING TRAUMA

- Resilience is the ability to experience a difficult life situation and recover.
- Individual and environmental factors impact the development of resilience.
- Healthy coping skills for traumatic experiences can be learned and help to foster resilience. Strategies include:

  - Practicing mindfulness exercises that involve regulating breathing and increasing general awareness.
  - Education that increases understanding of the impact of trauma.
  - Learning verbal and nonverbal communication skills for expressing anger.
  - Opportunities to connect with others who can model healthy ways of coping.
  - Practicing strategies for reading situations accurately and staying safe when emotionally overwhelmed.
  - Addressing underlying emotional difficulties such as depression and anxiety.
DEFINING A TRAUMA-INFORMED SYSTEM

- Trained staff at all levels of organization.
- Screening, mental health assessment, and neuropsychological evaluations available.
- Availability of trauma-informed psychoeducational programs and materials.
- Skill building opportunities for coping with stress.
- Frequent needs assessments that permit system responsiveness to trauma.
- Ongoing psychological treatment.
CONSIDERATIONS FOR MULTIPLE TRAUMA-INFORMED SYSTEMS

- Different elements of trauma-informed care may be more salient based on the system interacting with youth.

- Salient components of trauma-informed direct care in child welfare and justice settings:
  - Promote psychological safety through consistency and structure.
  - Mechanisms to safety plan by identifying triggers and building coping skills for stress.

- Salient components of trauma-informed care in school settings:
  - Disciplinary procedures that account for traumatic stress reactions.
  - Restorative justice practices that promote safety.

- Salient components of trauma-informed legal representation:
  - Advocating for psychological and physical safety.
  - If proper supports are advocated, can limit or reverse damage of trauma.
PRACTICAL STRATEGIES FOR MANAGING TRAUMA

- Clearly define roles, set expectations and develop routines that create predictability.
- Provide choices to help empower youth.
- Practice calming behaviors in non-crisis situations.
- Create a calming/safety zone
- Ensure safe environment for communication.
- Support strategies for processing information.
RESOURCES & REFERENCES

1. NCTSN Resources for Juvenile Justice and Mental Health Professionals


Q&A

CONTACT & MORE INFORMATION

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