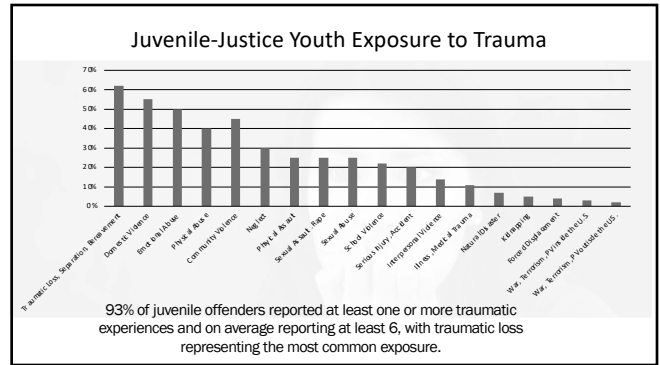


Creating and supporting Trauma Responsive Facilities

**Dr. Monique Khumalo
Youth Trauma & Justice Solutions**


1



2


Trauma has many names

- Post-Traumatic Stress Disorder
- Complex Trauma
- Adverse Childhood Experiences
- Complex Trauma
- The Wounding of the Spirit
- Racial Trauma
- Historical Trauma



3

Post-traumatic Stress Reactions




- Intrusion
- Avoidance
- Negative Alteration in Cognition & Mood
- Hyperarousal/Reactivity
- Numbing & Dissociation

4

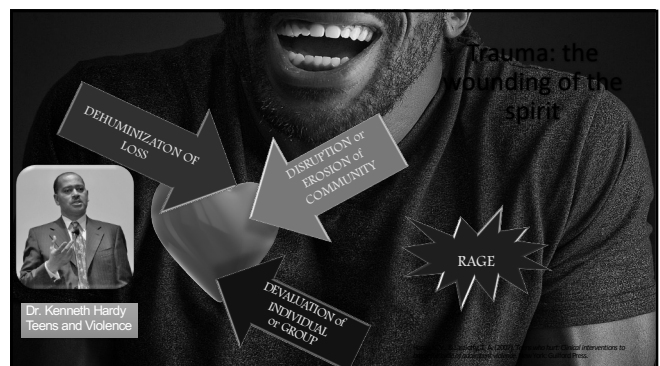
Trauma Responses Matter

- In a study of detained males, both CV exposure and Arousal symptoms predicted self-reported reactive aggression (Stimmel et al., 2014)
- After accounting for the 4 of trauma exposures, PTSD symptoms severity was associated with frequency of delinquent behaviors (Becker & Kerig, 2011)
- The connection between trauma exposures (in boys and girls) and CU traits was influenced by numbing of emotions (sadness, fear) particularly when trauma exposures involved betrayal (Kerig et al., 2012)



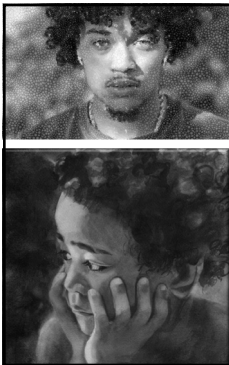
5

Trauma: the wounding of the spirit



Dr. Kenneth Hardy
Teens and Violence

6



COMPLEX TRAUMA

Refers to traumatic events that are:

- Chronic or multiple traumas that occur across the youth's life often beginning at an early age.
- Interpersonal in nature
- Impacting how a youth develops and responds to environment typically shaping his thoughts, emotions and behaviors

7



8

Why Polyvictimization Matters

- Poly-victimization is associated with emotional and behavioral problems that extend well beyond problems associated with PTSD and change over time (see Grasso et al., 2011)
- Youth who are poly-victims are at greater risk for psychosocial impairments in childhood, adolescence, and adulthood (Briere, Kaltman, & Green, 2008; Ford, Connor, & Hawke, 2009; Ford et al., 2010)
 - Increased risk for chronic medical diseases (Anda & Brown, 2010)
 - Four times more likely to be re-victimized (Finkelhor, Omrod, & Turner, 2007)
 - Increased risk for anger, aggression, & impulsivity (Ford, Connor, & Hawke, 2009; Ford et al., 2012)

9

Adverse Childhood Experiences (ACES)

ABUSE		NEGLECT		HOUSEHOLD DYSFUNCTION		BEHAVIOR				
Physical	Psychological	Physical	Emotional	Mental Stress	Incarcerated Relative	Lack of physical activity	Smoking	Alcoholism	Drug use	Missed work
Emotional	Emotional	Mother treated violently	Substance Abuse							
Sexual		Divorce								

CAUSES ↑

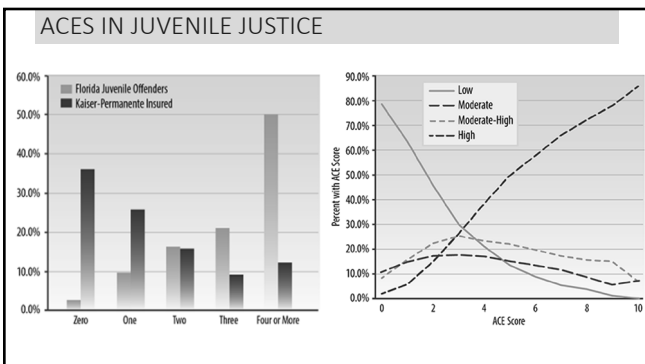
Adverse Childhood Experience Test

EFFECTS →

PHYSICAL & MENTAL HEALTH

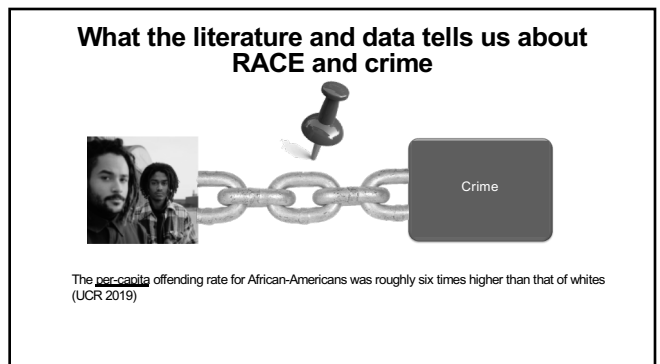
Severe obesity	Diabetes	Depression	Suicide attempts	STDs
Heart disease	Cancer	Stroke	COPD	Broken bones

10



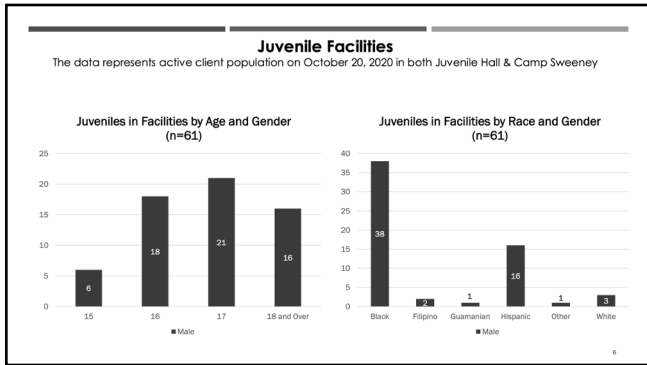
11

What the literature and data tells us about RACE and crime



The per capita offending rate for African-Americans was roughly six times higher than that of whites (UCR 2019)

12



13

Table 10. Urban ACE Indicators by Race

Comparison of White and Black residents of Philadelphia

	White	Black
Witnessed violence	25.9% (n=203)	52.0%*** (n=390)
Felt discrimination	15.8% (n=124)	49.5%*** (n=372)
Adverse neighborhood experience	19.3% (n=152)	29.2%*** (n=221)
Bullied	9.0% (n=70)	6.4% (n=48)
Lived in foster care	1.0% (n=8)	4.1%*** (n=31)

Notes: *p<.05 **p<.01 ***p<.001, Chi-square
Data Source: Philadelphia Urban ACE Survey, 2013
Data Prepared by: The Research and Evaluation Group at PHMC

14

Potential Impact of Racial/Historical Trauma

Symptom clusters include:

- Avoidance
- Intrusion
- Hypervigilance/Arousal

AND.....

- Depression
- Anger
- Physical Reactions
- Self-Esteem

Carter et al (2011) - Initial Development of the Race-Based Traumatic Stress Symptom Scale: Assessing the Emotional Impact of Racism

15

Traumatic Experiences

Shape our view of:

- Our self
- Others
- The World

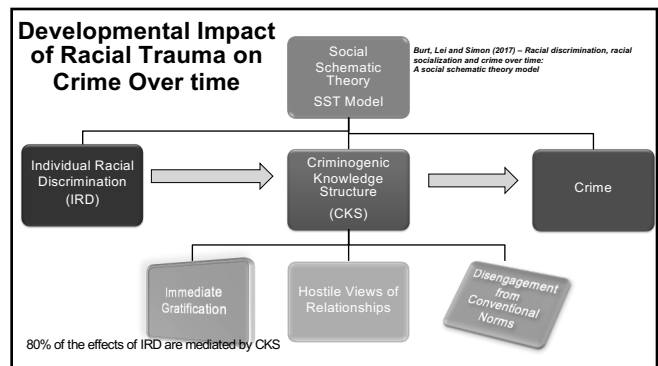
16

All experiences TEACH

Unpredictable, harsh and unfair social situations increase a youth's propensities to dysregulated behavior because they foster beliefs that


- Delayed rewards rarely materialize,
- The world is a hostile, unpredictable place, and
- Social rules and punishments do not apply equally to everyone (Burt and Simons 2015)

17



18

Criminogenic Needs



Attitudes & Orientation

1. Defies authority
2. Callous, little concern for others
3. Antisocial/pro-criminal attitudes
4. Not seeking or actively rejecting help

Personality & Behavior

1. Inflated self-esteem
2. Tantrums
3. Short attention span
4. Lack of remorse
5. Physically aggressive
6. Poor frustration tolerance
7. Verbally aggressive

Hoge, R. D., Andrews, D. A., & Multi-Health Systems, Inc. (2011). *Youth level of antisocial management inventory 2.0 (YLSOMI 2.0)*. North Tonawanda, NY: Multi-Health Systems.

19


Core Principles of a Trauma RESPONSIVE Approach to Care and Services



20

Core Principles of a Trauma RESPONSIVE Approach

Safety	Trustworthiness & Transparency
Peer Support	Collaboration & Mutuality
Empowerment/Voice/Choice	Cultural/Historical/Gender Responsivity/Humility



21

Essential Elements of a Trauma-Informed Juvenile Justice System



https://youtu.be/5_CGuyxjAMA

- 1 TRAUMA-INFORMED POLICIES AND PROCEDURES**
Trauma-informed policies and procedures make juvenile justice organizations safer and more effective by ensuring the physical and psychological safety of all youth, family members, and staff and promoting their recovery from the adverse effects of trauma.
- 2 IDENTIFICATION/SCREENING OF YOUTH WHO HAVE BEEN TRAUMATIZED**
Carefully timed traumatic stress screening is the standard of care for youth in the juvenile justice system.
- 3 CLINICAL ASSESSMENT/INTERVENTION FOR TRAUMA-IMPAIRED YOUTH**
Trauma-specific clinical assessment and treatment and trauma-informed prevention and behavioral health services are the standard of care for all youth identified as impaired by posttraumatic stress reactions in the screening process.
- 4 TRAUMA-INFORMED PROGRAMMING AND STAFF EDUCATION**
Trauma-informed education, resources, and programs are the standard of care across all stages of the juvenile justice system.

22

- 5 PREVENTION AND MANAGEMENT OF SECONDARY TRAUMATIC STRESS (STS)**
Juvenile justice administrators and staff at all levels recognize and respond to the adverse effects of secondary traumatic stress in the workplace in order to support workforce safety, effectiveness, and resilience.
- 6 TRAUMA-INFORMED PARTNERING WITH YOUTH AND FAMILIES**
Trauma-informed juvenile justice systems ensure that youth and families engage as partners in all juvenile justice programming and therapeutic services.
- 7 TRAUMA-INFORMED CROSS SYSTEM COLLABORATION**
Cross system collaboration enables the provision of continuous integrated services to justice-involved youth who are experiencing posttraumatic stress problems.
- 8 TRAUMA-INFORMED APPROACHES TO ADDRESS DISPARITIES AND DIVERSITY**
Trauma-informed juvenile justice systems ensure that their practices and policies do address the diverse and unique needs of all groups of youth and do not result in disparities related to race, ethnicity, gender, gender-identity, sexual orientation, age, intellectual and developmental level, or socioeconomic background.

23

Examples OHIO & FLORIDA

24



ODYS
What drove us to try something new in 2005?

- The Department's increasing use of seclusion and restraint as a primary behavioral intervention.
- Staff report that without seclusion and restraint they had no "tools" to manage disruptive and often violent youth behavior.
- Increase in injuries of youth and staff during the course of restraints.
- Spikes in youth rates of self-injury and in severity of injury.

25


"Creating Violence Free, Coercion Free Mental Health Treatment Environments."

- 1
- 2
- 3
- 4

Trauma Impact Reduction Program Steering Committee

DEVELOPED SUBCOMMITTEES:
Workforce Development * Treatment * Environments * Data * Policy * Screening/Assessment

Partnered with the Ohio Department Of Mental Health research team to determine outcomes



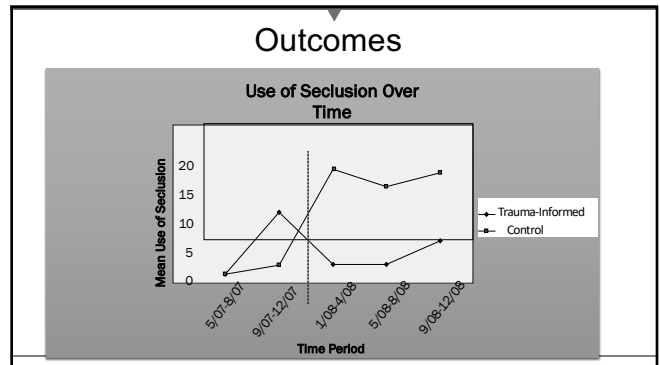
26

- 1
- 2
- 3
- 4




- Seclusion and restraint
- Suicide Prevention Policy
- Mental health unit programming
- Disciplinary Policies
- Intake Screening
- Assessment

27



28

Florida's history in providing Trauma Responsive Services

- The Florida Department of Juvenile partnership with Georgetown and Dr. (Marrow) Khumalo
- Working with Dr. Khumalo, three residential facilities were identified as pilot sites for the expansion and development of being "Trauma Responsive."
- Through over two years of collaboration, the Office of Policy and Programming, and additional key stake holders refined the assessment process which shaped The Trauma Responsive and Caring Environment (TRACE) self assessment.
- The TRACE was adapted from the National Center of Family Homeless Trauma-informed Organizational Self Assessment and "Creating Cultures of Trauma-Informed Care: A Self Assessment and Planning Protocol and is further supported by the Essential Elements of a Trauma-Informed Juvenile Justice System. Each of the domains included in this assessment are related to one of the "essential elements."

29



TRACE Self-Assessment tool
Description

30

TRACE Self-Assessment Categories

- 1. Supporting Staff Development
 - Traumatic Stress
 - Suicide Prevention
 - Clinical and MH Staff Specific Training
- 2. Staff Supervision, Support and Self-Care

31

TRACE Self-Assessment Categories (cont)

- 3. Establish a physically and emotionally safe Environment
 - Facility Physical Environment
 - Communication and Information Sharing
 - Privacy and Confidentiality
 - Crisis Prevention and Coercive Practice
 - Open and Respectful Communication
 - Consistency, Predictability & Flexibility
 - Race, Culture & Gender Responsivity

32

TRACE Self-Assessment Categories (cont)

- 4. Screening, Assessment and Trauma Specific Care Planning and Service Provision
- 5. Creating Written Policies

33

TRACE Staff Survey

34

TRACE Youth Survey

35

Youth Survey

- The youth survey contains 70 items which are rated along a continuum from strongly disagree to strongly agree or does not apply to me.
- The items are designed to assess youth's perspective or experiences within the program that are related to the TRACE topic areas noted on the self-assessment.

36



TRAUMA RESPONSIVE PROGRAM CULTURE

37

Trauma Responsive Program Culture

- Perceptions of the institutional environment do have an association with later recidivism (12 months post release)
 - Services and Re-Entry Planning
- Perceptions of institutional environment do have an association with report of anti-social activity 12 months post release)
 - Harshness, Intentional Order, Anti-social Peers

Schubert, C et al. (2012). Perceptions of institutional experience and community outcomes for serious adolescent offenders. *Criminal Justice and Behavior*, 39, 1, 73-95.

38

Incremental improvement when you include all of them.

- Safety
- Harshness
- Fairness
- Services
- Institutional Order
- Caring Adult
- Antisocial Peers
- Re-Entry Planning

Schubert, C et al. (2012). Perceptions of institutional experience and community outcomes for serious adolescent offenders. *Criminal Justice and Behavior*, 39, 1, 73-95.

Is a Generally More Positive Institutional Experience Related to Better Outcomes?

System Involvement Outcome

Even after controlling for background characteristics, there is a 35%-49% reduction in the probability of system involvement in the next year

39

Trauma Responsive Physical Environment

40



41

Do Not Continuously Ask Staff

- What Time is it?
- When do we go to P.E.?
- Can I do details?
- Can I lead the exercises?
- Did you grade rooms yet?
- Did I get my mail?
- How do we eat?
- When do we eat?
- When do we come out for free time?
- Can you get some music on?
- Can you change the music?
- Can I sleep yet?
- Can I have extra food?
- What is my bedtime?

These questions may result in a downgrade!!

What are you trying to say?

42

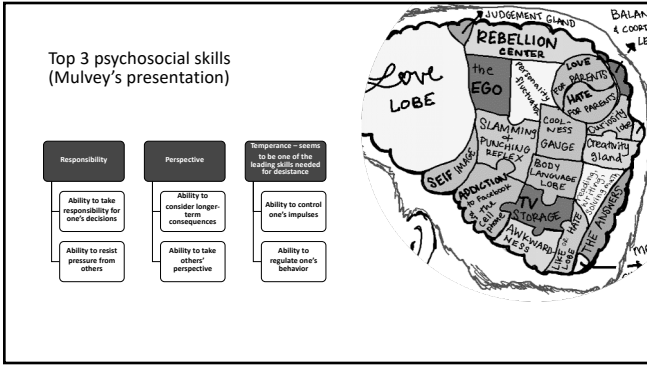


43

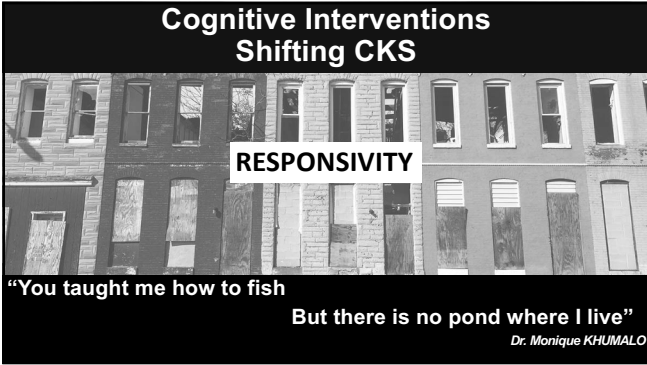


EFFECTIVE SERVICES

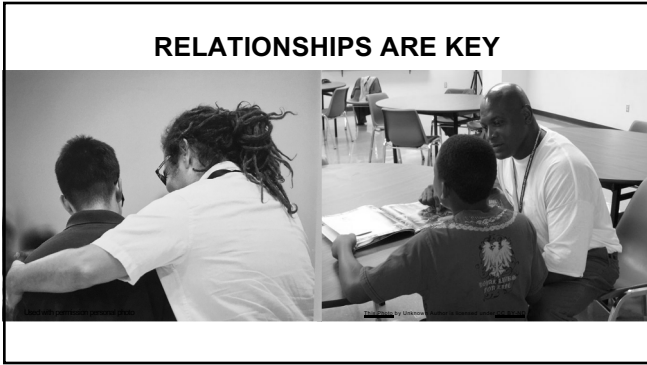
44



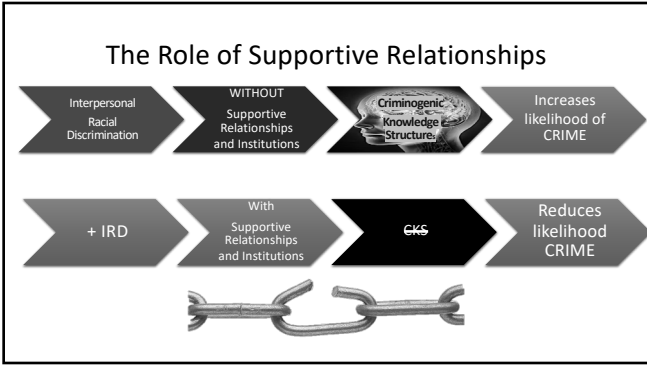
45



46



47



48