

# Trauma-Informed Approaches to Substance Abuse Treatment in Criminal Justice Settings

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# Goals of the Presentation:

Define “trauma” and discuss its impact & prevalence

Describe SAMHSA’s concept of trauma-informed approaches

Discuss how trauma-informed approaches can be used in correctional settings.

The image features four smooth, dark blue stones of varying sizes scattered on a light gray, textured surface. The stones are arranged in a loose, diagonal pattern from the top-left towards the bottom-right. The top of the image has a decorative header with a dark blue bar and a white bar below it, separated by a thin blue line. The text 'Understanding Trauma' is centered over the stones in a white, serif font with a subtle drop shadow.

# Understanding Trauma

## What is Trauma?

***Individual trauma results from an event, series of events, or set of circumstances that is experienced as physically or emotionally harmful or life-threatening and has lasting adverse effects on the person's functioning and mental, physical, social, emotional, or spiritual well-being.***

# The Three Es of Trauma

**Events**

*Events/*  
circumstances  
cause trauma.

**Experience**

An individual's  
*experience* of the  
event determines  
whether it is  
traumatic.

**Effects**

*Effects* of trauma  
include physical,  
social, emotional, or  
spiritual  
consequences.

# Potentially Traumatic Events

## Abuse

- *Emotional*
- *Sexual*
- *Physical*
- *Domestic violence*
- *Witnessing violence*
- *Bullying*
- *Cyberbullying*
- *Institutional*

## Loss

- *Death*
- *Abandonment*
- *Neglect*
- *Separation*
- *Natural disaster*
- *Accidents*
- *Terrorism*
- *War*

## Chronic Stressors

- *Poverty*
- *Racism*
- *Invasive medical procedure*
- *Community trauma*
- *Historical trauma*
- *Family member with substance use disorder*

# Experience of Trauma

**Experience depends on context, expectations & meaning**

**May result from threat to life, bodily integrity, or emotional safety**

**May be compounded by humiliation, betrayal, or silencing**

**Effects may be unrecognized**

## Effect of Trauma



The **effect** of trauma on an individual can be understood as a normal response to an abnormal situation.



# Effects of Trauma

**Trauma  
can...**

- **Cause short and long-term effects**
- **Affect coping responses, relationships, or developmental tasks**
- **Impact physiological responses, well-being, social relationships, and/or spiritual beliefs**

# Signs of Trauma Responses

## Behavioral

- **Blowing up when being corrected**
- **Fighting when criticized or teased**
- **Resisting transitions or change**
- **Very protective of personal space**
- **Reckless or self-destructive behavior**
- **Frequently seeking attention**

## Emotional/ Physical

- **Nightmares or sleeping problems**
- **Sensitive to noise or to being touched**
- **Difficulty trusting others**
- **Feeling very sad, angry, afraid; emotional swings**
- **Unexplained medical problems**

## Psychological

- **Confusing what is safe and what is dangerous**
- **Trouble focusing or concentrating**
- **Difficulty imagining the future**

# Additional Signs of Trauma

**Flashbacks or frequent nightmares**

**Always expecting something bad to happen**

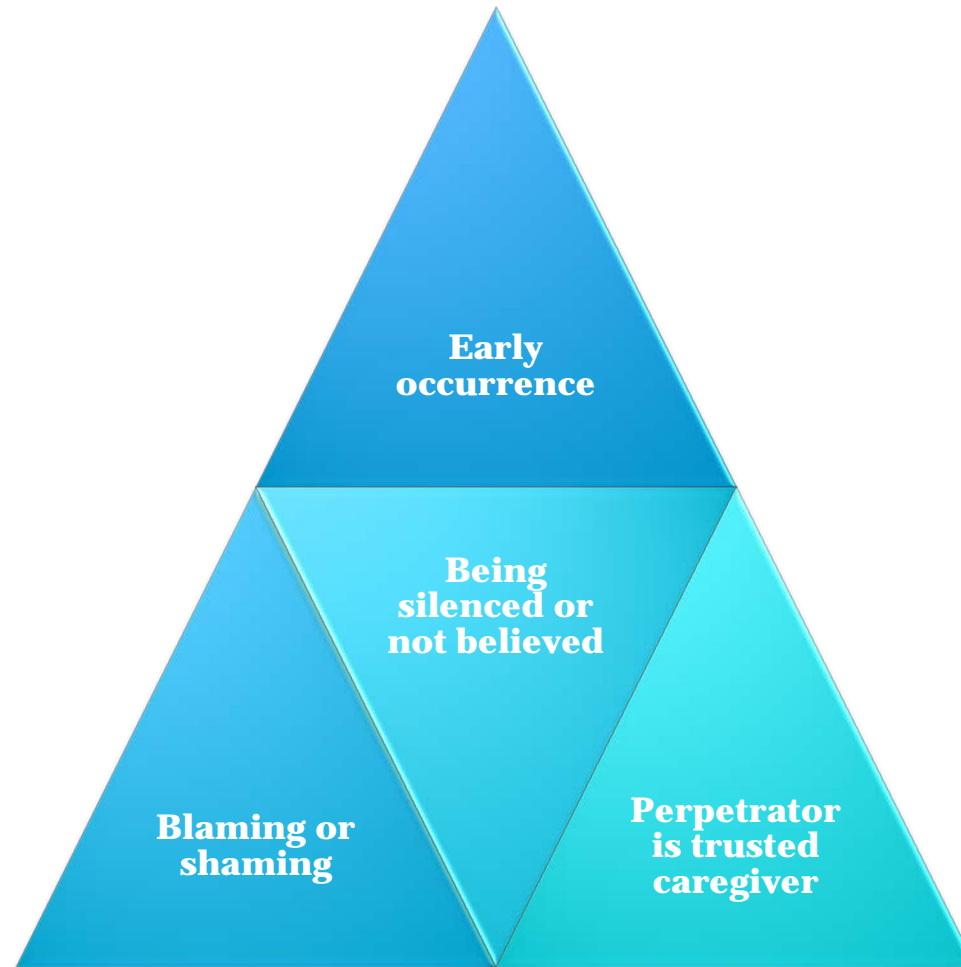
**Not remembering periods of your life**

**Feeling emotionally numb**

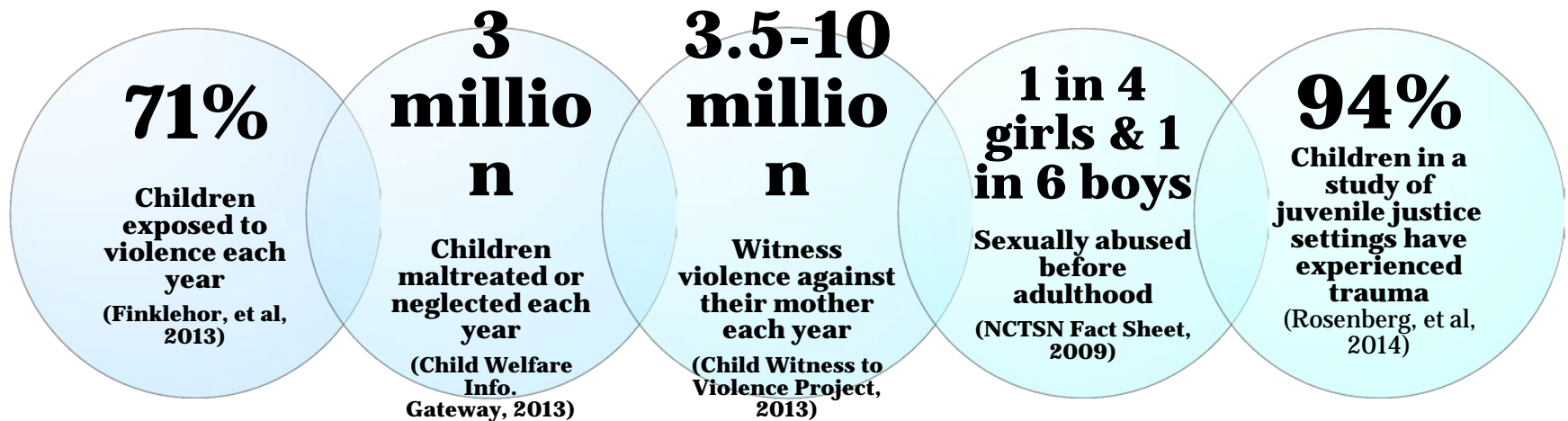
**Lack of concentration; irritability**

**Watchfulness, anxiety, anger, shame or  
sadness**

# Factors Increasing Impact



# Prevalence: Children Exposed to Potentially Traumatizing Events



# Trauma in Adults: Substance Abuse

**90% of homeless mothers have severe trauma histories. They have 2x the rate of drug & alcohol dependence as those without**

(SAMHSA 2011)

**About 1/3 of all veterans seeking treatment for a substance use disorder have PTSD diagnoses**

(National Center for PTSD)

# Trauma in Adults: Substance Abuse

**About 65% of people  
in substance abuse  
treatment report  
childhood abuse**

(SAMHSA, 2013)

**About 75% of women in  
substance abuse  
treatment report  
trauma histories**

(SAMHSA, 2009)



Section 2

# Trauma-Informed Approaches



# The Four Rs

A trauma-informed program, organization, or system:

## Realizes

- ***Realizes*** widespread impact of trauma and understands potential paths for recovery

## Recognizes

- ***Recognizes*** signs of trauma in clients, families, staff, and others involved with the system

## Responds

- ***Responds*** by fully integrating knowledge about trauma into policies, procedures, and practices

## Resists

- **Seeks to actively *Resist*** re-traumatization.

# Trauma-Informed Approaches

Based on the universal expectation that trauma has occurred

Based on the question:  
“What happened to you?” NOT “What’s wrong with you?”

Seek to understand the meaning people make of their experiences

# Approaches that are not trauma-informed....

Recreate fear &  
helplessness of original  
trauma

Result in distrust,  
anger, frustration,  
sadness

If responses are seen as  
'symptoms,' increased risk of  
coercion

# In trauma-informed programs

All staff & clients are educated about trauma

Knowledge of trauma is incorporated into all aspects of service delivery

Minimize re-traumatization: “Do no more harm”

Create a warm, welcoming environment

# SAMHSA's Principles of Trauma-Informed Approaches

Safety

Trustworthiness & Transparency

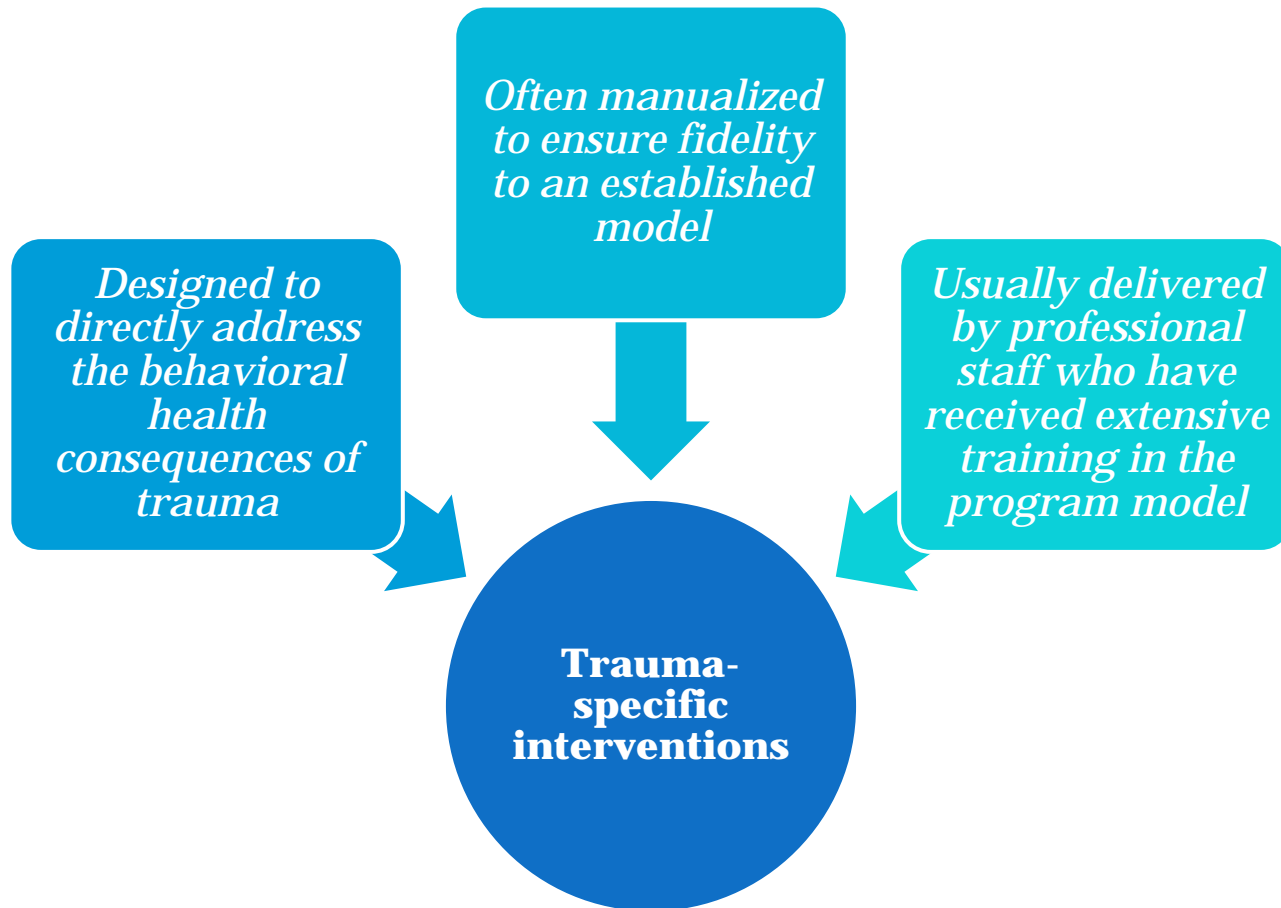
Peer Support

Collaboration & Mutuality

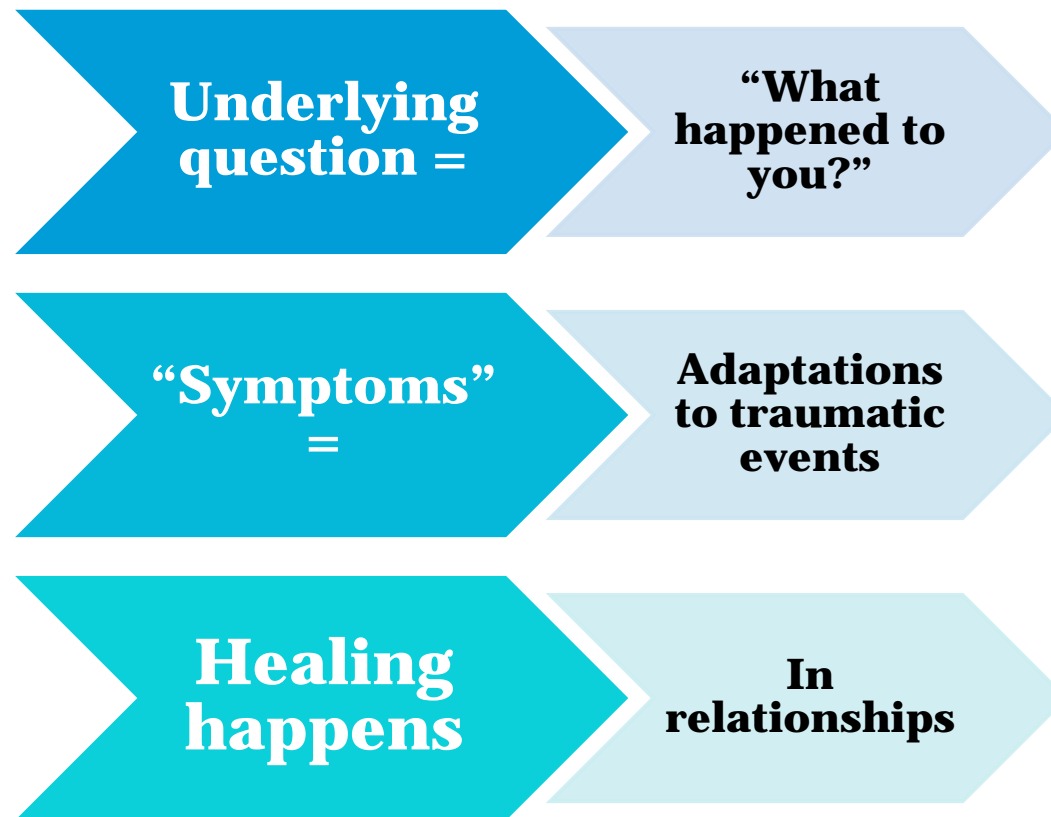
Empowerment, Voice & Choice

Cultural, Historical & Gender Issues

# Trauma-Specific Interventions



# Things to Remember




The background of the slide features four smooth, dark blue stones of varying sizes scattered on a light gray, textured surface. The stones are positioned in a loose, diagonal arrangement from the top-left towards the bottom-right. The top of the slide has a decorative header with a dark blue bar and a lighter blue bar below it, separated by a thin white line.

# Trauma-Informed Approaches in Correctional Settings



# Can a prison be trauma-informed?



**Creating A Place Of Healing and Forgiveness:**  
The Trauma-Informed Care Initiative at the Women's Community Correctional Center of Hawaii

**PROGRAM AT-A-GLANCE**

Recognizing that most inmates are trauma survivors and many common prison routines can re-traumatize women, the Women's Community Correctional Center of Hawaii, under the leadership of Warden Mark Kawika Patterson, works to create "a place of healing and forgiveness" through its Trauma-Informed Care Initiative (TICI).

TICI is a unique collaboration among the facility administration, staff, and inmates; community non-profits; state and federal agencies; educators and researchers; and volunteers from churches and civic groups.

Reducing the use of restraints and isolation has been a focus of the training and activities of TICI, since these interventions are likely to re-traumatize women who are trauma survivors and cause trauma responses in women who had not previously experienced trauma.

With a focus on educating staff, inmates, community partners, and the public about the value of trauma-informed environments and practices in healing, TICI creates opportunities for women to "live a forgiven life."

*A group of women in green work clothes poses for the camera, smiling broadly, proudly displaying a six-foot wreath they crafted from flowers and foliage grown on the grounds. Nearby, women tend rows of hydroponic salad greens and herbs grown for the facility's kitchen, while others clear brush by a rushing stream. In the welding shop, an artist works on a large sculpture of an orchid. Women living in an open unit whose walls are painted brightly with tropical birds and flowers prepare for their jobs in the community and walk together to the bus stop beyond the main gate. Across the yard, mothers and their young children play and picnic in a grassy yard or under a pavilion constructed by community volunteers; child care workers offer parenting tips.*

These activities may seem unusual on the grounds of a correctional facility, but they are consistent with the mission that Warden Mark Kawika Patterson has pursued at the Women's Community Correctional Center of Hawaii (WCCC) since his arrival there as warden in 2006: To create a place where incarcerated women can live a forgiven life; a place of healing and transformation.

The WCCC has taken a community building approach to culture change at the facility within a trauma-informed framework. Warden Patterson was inspired by the Hawaiian concept of the pu`uhonua, a place of refuge, asylum, peace, and safety. Under the system of laws known as the Māhiki law-breaking was punished by someone who broke the law to make his or her wrong would receive amnesty, performed a ritual that person of blame, who law-breaker to return

and resume their life. The spirit of pu`uhonua – the opportunity to heal and live a forgiven life – informs the vision that is changing the environment for both incarcerated women and staff at WCCC.

**An inmate at WCCC:**

- is more likely than the general population of Hawaii to be a woman of Hawaiian/part-Hawaiian ethnicity (40%)
- is likely to report childhood and sexual victimization (60%)
- is likely serving time for either a felony drug charge (35%) or

Hawaii women's prison built a trauma-informed culture based on the Hawaiian concept of *pu`uhonua*, a place of refuge, asylum, peace, and safety.



# What allowed this to happen?

Warden Patterson at WCCC:

Recognized that most inmates are trauma survivors

Saw many standard practices as re-traumatizing

Understood that traumatizing practices affect staff as well as inmates

Brought together staff, inmates, community groups, government & academics to create a consensus for change within existing security requirements

# Making change permanent

## Leadership

- Commitment to substantive change

## Training

- Staff
- Inmates
- Community Partners

## Reinforced by

- Trauma-informed supervision

# Trauma-specific Treatment in Correctional Settings

Manualized, present-focused models work well in correctional settings

Address current problems & teach safe coping skills without unsettling people by revisiting traumatic memories

Includes: Seeking Safety, ATRIUM, TAMAR, TREM & M-TREM

# What's in it for the facility?

Controlling costs of healthcare, close custody, staff turnover & secure housing units

Reducing seclusion & restraint, de-escalating critical incidents

Safer facilities, increased job satisfaction

What would support development of trauma-informed approaches in your organization?



# Next Presentation

## RSAT Reentry Challenges

**August 19, 2015**  
**2:00 – 3:00 p.m. ET**

Description: Research indicates that effective substance abuse treatment programs include an aftercare component. There is no single definition of aftercare, but common components include: relapse prevention and continued treatment and/or peer support, combined with other health and human services that promote a stable lifestyle. The evidence also suggests that aftercare is critical immediately after release from prison or jail, and that it is beneficial to concentrate resources during this period, when individuals are most likely to commit new crimes or to violate the conditions of their supervision. This webinar will present some early findings on the types of aftercare services funded by RSAT, from the National Institute of Justice (NIJ) - funded Residential Substance Abuse Treatment (RSAT) Study. The presentation will describe the sample of RSAT-funded aftercare programs and present preliminary data on program services, challenges, and innovations.

**Presenter:** Kristin Stainbrook