Trauma-Informed Care in the Juvenile Justice System

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Objectives: Workshop participants will be able to...

- Articulate the need to recognize and address trauma for youth and families who are involved in the juvenile justice system
- Explore resources and strategies that can promote recovery, rehabilitation, and resiliency of youth involved in juvenile justice by using resources of the National Child Traumatic Stress Network
- Understand, Recognize and begin to address issues related to vicarious trauma

David: One Young Man’s Pathway to the Juvenile Justice System

- David was placed into foster care at 4 years old after a long history of exposure to parental drug abuse, physical abuse and neglect.
- He had minor behavioral problems and was adopted at the age of 6½ by his foster parents.
- Between the ages of 6-12, David was physically by his adoptive parents. At the age of 12, David began to fight back and not obey. He was also exposed to domestic violence in his adoptive home and witnessed the sexual abuse of his younger sister.
- He was an average student, and in high school became a star baseball and basketball player, winning awards.
- He began to develop oppositional behaviors, telling off his parents, breaking curfew, stealing and shoplifting, and drinking alcohol with friends. At the age of 14, in a power struggle with his mother, he and his father started fighting each other and David caused his hand to start to punch his father. More called the police. David was arrested and put in juvenile detention because his parents refused to keep him in their home. During assessment at the detention center, he disclosed that he had been physically abusing his sister and that his adoptive dad had been sexually abusing his sister. His father was sent to prison.
- David and his sister were placed in foster care. He began to refuse to follow rules that foster mom set, more power struggles (physical ones occurred with mom), skipped school, got caught drunk, violated curfew, began developing and ongoing relationship with the juvenile court.
- He was evaluated by a court-referred psychologist who diagnosed him with Conduct Disorder and Oppositional Defiant Disorder. There was no trauma history assessment and no standardized tests to determine if he had any symptoms of PTSD. He went through 3 years of therapy that focused on emotional support and improving his behaviors.
- He was placed in a group home and enrolled in a new school over 100 miles from his home.
- The juvenile court judge ordered him to complete TF-CBT with an identified therapist.
Pathways to Juvenile Justice Involvement: Victimization and Juvenile Offending
(National Child Traumatic Stress Network, 2016)

- "Many studies have found that exposure to interpersonal violence is related to increased likelihood of delinquent behavior"
- "Studies estimate that over 90% of juvenile justice youth have experienced at least one trauma, with many experiencing poly-victimization."
- "Maltreatment in adolescence was found to have more detrimental outcomes for offending than childhood only maltreatment."

Risk of Juvenile Delinquency

- "Girls and boys who have been abused or neglected are nearly 60% more likely to be arrested as juveniles." (Widom, 2000)
- "60% of youth involved in the juvenile justice system suffer from diagnosable mental disorders" (Wood 2002, National Mental Health Association, 1999)

#1
A traumatic experience is an event that threatens someone’s life, safety, or well-being and overwhelms them emotionally and overwhelms their coping capacity...
Examples of Potentially Traumatic Events

- Child maltreatment
- Witnessing violence
- Interpersonal victimization
- Terrorism/War
- Natural disasters
- Loss of loved ones
- Serious accidents
- Medical trauma
- Historical Trauma: genocide, loss of homeland, loss of cultural identity,

- Substance use/abuse
- Involvement in violent activity
- Relational impairments
- Developmental lags
- Subsequent victimization
- Aggressive behavior
- Poor academic performance
- Numbness; desensitization to threat
- Recklessness and reenacting behavior
- Delinquency and adult offending
- Recidivism

Complex trauma includes youth experiencing interpersonal violation, usually at the hands of an adult who is supposed to be in the role of caring for them and protecting them...
This can be experienced as a violation of our social contract with children...

Biopsychosocial Implications for Child Development

- Altered Biological Stress Systems and Neural Circuitry/Structure
  - Elevated cortisol levels
  - Changes in physiological response to fear/threat
  - Restriction of brain growth
- Disruptions in Attachment Behavior
  - Caregiver-Infant bonding
  - Disorganized behavior, problems in emotion regulation, disrupted relationships, and more
- Changes in Social Development and Understanding of Social Stimuli
  - Encoding and interpreting social stimuli, and accessing more aggressive responses
  - Hostile Attribution Bias
  - Interpreting facial expressions

Trauma changes our biology, including brain development which can result in very well-developed emergency response systems in the brain at a cost to the executive functions of our brain that enhance learning and self-regulation...
Impact of Trauma on Youth Development

Complex/chronic trauma hijacks the resources youth need to support successful development and uses them for survival...

Essential Elements of a Trauma-Informed Care

SAMSHA's (Cross-Systems) Four R's of Trauma-Informed Care

• Recognizing the trauma that your service population has experienced
• Realizing the impact that the trauma has had on those you are serving
• Responding to the way trauma has impacted the client and helping them with recovery through the assessments, services, environment, and culture of your work as an individual or organization
• Reducing and preventing re-traumatization
• Using the values of safety, honesty, transparency, empowerment, peer support, professional/consumer partnerships,
The Goals and Mission of a Juvenile Justice System

• Protecting Society
• Protecting the youth who come into the Juvenile Court
• Holding youth accountable for delinquent acts
• Helping to rehabilitate youth

Essential Elements of a Trauma-Informed Justice System (National Child Traumatic Stress Network, 2016)

1. Trauma-informed Policies and Procedures that recognize trauma, promote recovery and promote emotional and physical safety for all youth, families, and staff.
   a. Safety planning
   b. Decreasing powerlessness and disenfranchisement by ensuring adequate legal representation by attorneys who understand the effects of trauma on youth and families
   c. Creating safe spaces
   d. Creating an environment and interventions that do NOT add to traumatization or re-traumatize

2. Identification and Assessment of Youth who have entered the JJ system:
   a. Universal screenings to determine, if, what, and how often the youth has been exposed to trauma
   b. Have the screening conducted by someone who can positively engage the youth in this process, in a setting that allows safety and privacy.
Essential Elements of a Trauma-Informed Justice System (National Child Traumatic Stress Network, 2016)

3. Clinical Assessment/Intervention for Trauma-Impacted Youth
   a. Assessment instruments must be reliable and valid for justice-involved youth.
   b. Assessment should continue to look at trauma exposure and to symptoms related to traumatic exposure including Post Traumatic Stress Disorder.
   c. Assessment should look at relationship between trauma exposure and behavioral health symptoms and linkages between impact of trauma and risk of delinquency and recidivism.
   d. Trauma-specific interventions, such as evidence-based and best practice trauma-focused therapies.
   e. Trauma-informed services throughout the continuum of JJ system including prevention, the sooner the trauma is identified and addressed the better.

Assessment Examples

- Use of standardized assessments: (By a licensed qualified clinical professional)
  - UCLA PTSD Reaction Index* for the DSM V (ages 7-18 yrs., Pynoos & Steinberg, 2013) (* Has a users fee)
  - CPSS Child PTSD Symptom Scale (ages 8-18 yrs., Foa, Johnson, Feeny & Treadwell, 2001)
  - TSCC, Trauma Symptom Checklist*, (ages 8-16 yrs., Briere, 1996)

Essential Elements of a Trauma-Informed Justice System (National Child Traumatic Stress Network, 2016)

4. Trauma-Informed Programming and Staff Education
   a. Trauma-informed education and programming for all staff at all stages of the JJ system.
   b. The trauma-informed education should emphasize safety, resilience for youth, families, and staff and the work environment.
   c. An excellent resource: Think Trauma Curriculum, Caring for Children Who Have Experienced Trauma (National Child Traumatic Stress Network).
5. Prevention and Management of Secondary Traumatic Stress (STS)
   a. Administrators and staff need to recognize and respond to adverse effects of secondary and primary traumatic stress, workforce safety, effectiveness, and resiliency.
   b. Going beyond identification and self-care, but a culture that cares for its staff.
   c. This element can enhance staff and youth safety, increase job satisfaction, and reduce staff turnover, etc.

6. Trauma-informed Partnering with Youth and Families
   a. Engaging youth and families as partners is core to trauma-informed care.
   b. Traumatic experiences can cause isolation and distrust of systems for families and youth collaboration increases cooperation and working together for the best interests of the youth and society.
   c. Can reduce recidivism in the long run.
   d. Provide resources and reduce obstacles to family participation.

7. Trauma-Informed Cross System Collaboration:
   a) Integrated services that recognize and respond to the needs for trauma-informed care and strength-based services prior to, during, and after JJ involvement.
   b) Systems such as schools, child welfare, law enforcement, mental health, healthcare, community based organizations, community and political leaders, advocates, mentors, etc.
Essential Elements of a Trauma-Informed Justice System (National Child Traumatic Stress Network, 2016)

8. Trauma-informed Approaches to Address Disparities and Diversity
   a. Meeting the diverse needs of youth and families based on race, culture, gender-identity, sexual preferences, intellectual and developmental level, socio-economic backgrounds
   b. Addressing the disparities and over-representation due to poverty, racism, classism
   c. Recognize and respond to historical, cultural, and intergenerational trauma

Addressing Vicarious Trauma (Secondary Traumatic Stress)

Defining Vicarious Trauma

• “The work of helping traumatized people is gratifying...”
• “Being a helper, however, also brings risks: Caring peoples sometime experience pain as a direct result of their exposure to other’s traumatic material.”
Compassion Fatigue

Burnout and Compassion Fatigue:
Physical, emotional, and mental exhaustion caused by long term involvement in emotionally demanding situations.

Defining Secondary Traumatic Stress or Vicarious Trauma

"Secondary Traumatic Stress is:
• The natural, consequent behaviors and emotions resulting from knowledge about a traumatizing experience by a significant other.
• The stress from helping or wanting to help a traumatized, suffering person.
• (It is a term also sometimes used to describe the other stressors or adversities that one can experience after a primary trauma)

Vicarious Trauma Research Findings...

• Research indicates vicarious trauma is experienced by people in a variety of professional and personal roles such as police, firefighters, nurses, doctors, judges, attorneys, therapists, teachers, parents, siblings, spouses, friends, etc...
• Previous trauma history, coping resources, and support system access can impact risk of experiencing vicarious trauma...
• Employers & communities need to address vicarious trauma, it needs more than just individual coping skills...
### Warning Signs of Vicarious Trauma and Compassion Fatigue (Risking Connections)

- Finding yourself sharing negative beliefs and hopelessness that are expressed by some of your trauma-exposed clients
- Having a skeptical or negative view of your clients, you give them negative labels
- Feeling defensive
- Dreading going to work
- Finding yourself having a hair trigger of overwhelming or negative emotions
- Finding yourself disconnecting from your own emotions
- Disconnecting from your friends and loved ones
- Taking your work home with you
- Cutting out your personal life and hobbies in order to make more room for work...

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### Strategies to Help with Vicarious Trauma, Burnout, and Compassion Fatigue

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Presenter’s Framework

An Organizational Culture that Promotes Support, Resiliency, & Reduces Risk of Vicarious Trauma

• Supervision includes support and partnering and help with difficult work and youth situations
• Supervision and peer practices include acknowledging talking about secondary trauma exposure and supporting each other
• Support goes beyond, “let me know if you need help” to asking, “How are you experiencing being exposed to the youth/family’s trauma”
• Provide support and education on trauma informed care for youth and care and prevention of vicarious trauma

An environment that supports self care, adequate rest, vacation time, and encourages a health enriched life outside of work

We are just a moment of time in a youth’s journey in life...

But if in that moment, if we really listen to them, seek to understand them, treat them as our competent vital partners, as experts in their own lives, and as equal teachers about their lives and needs, we have given them a beautiful gift, and if we are open, we can also receive and celebrate that gift...
Understand Boundaries and Theories of Change

Who likes change?

What do we know about people changing?

- People change because they want to
- People can want to change part of the way
- People change if they believe they can
- People change if they believe that what they are going to get is better than what they have.
- People can change best at their own pace and in doable sized steps...
Getting the ANTS out of our Heads

ANTS: Automatic Negative Thoughts
1. All or nothing thinking
2. Always thinking
3. Focusing on the negative
4. Negative fortune telling
5. Mind reading
6. Guilt Beatings
7. Labels
8. Blame

Circle of Concern

Circle of Influence

Develop a trauma-informed perspective: Karen Saavatine, et. al.
Risking Connections

- Respect
- Information
- Connection
- Hope
Celebrate...