

THE COMPLEXITIES OF TRAUMA

Understanding Trauma in
the Criminal Justice
Population

Questions

- ▣ What is the incidence of trauma in criminal populations?
- ▣ Is trauma a factor in the etiology of criminal behavior?
- ▣ Does trauma need to be considered in interventions to reduce recidivism?
- ▣ How should we adapt our interventions to accommodate for the impacts of trauma?

Defining Trauma, Abuse and PTSD

- ▣ Psychological trauma refers to the impact of an extreme stress or critical incident on an individual's psychological and biological functioning.
- ▣ Traumatic events may arise when an individual is confronted with actual or threatened death or serious injury or some other threat to one's physical integrity.

Trauma

- It may also occur by witnessing these events occurring to others.
- In addition, adult victims or witnesses must experience intense fear, horror or hopelessness.
- In children this intense fear may be exhibited as agitated or disorganized behavior.
- It can include combat, terrorism, hostage-taking, natural and man-made disasters, homicides, robberies, physical and sexual assaults, major car accidents and serious life-threatening illnesses.

- ▣ Events that result in emotional/ psychological trauma have the three essential elements:
 - 1. It was unexpected.
 - 2. The person was unprepared.
 - 3. There was nothing the person could do to prevent it from happening.

- ▣ It is not the event that determines whether something is traumatic, but the individual's experience of the event.

Abuse

- Abuse is a class of traumatic events
- It refers to perpetration of three types-
 - Physical
 - Emotional
 - Sexual
- There is an extreme power-imbalance resulting in the victim's inability to prevent or control the event(s).
- It is often re-occurring, which can result in the most severe effects.

Posttraumatic Stress Disorder

- ▣ Presence of an “extreme traumatic stressor”.
- ▣ Intrusive symptoms-
 - Re-experiencing in images, thoughts, nightmares.
 - Flashbacks, illusions, hallucinations.
- ▣ Avoidance symptoms-
 - Avoiding places or thoughts symbolic of trauma.
 - Problems with recall of events.
 - Loss of interest in important activities.
 - Restricted range of affect.
 - Sense of foreshortened future.

Posttraumatic Stress Disorder

- ▣ Increased arousal.
 - Difficulty sleeping.
 - Irritability, anger.
 - Difficulty concentrating
 - Hypervigilance
 - Exaggerated startle response

Expanded Definitions

- ▣ “Trauma is not limited to suffering violence; it includes witnessing violence, as well as stigmatization because of gender, race, poverty, incarceration, or sexual orientation” (Covington, 2002a, p. 60).
- ▣ Root (1992) includes not only direct trauma, but also indirect trauma and insidious trauma. Insidious trauma “includes but is not limited to emotional abuse, racism, anti-Semitism, poverty, heterosexism, dislocation, [and] ageism (p 23).

How Does Trauma Affect the Individual?

- ▣ Victims of **childhood abuse and neglect** show physical, psychological, behavioral and societal consequences, including:
- ▣ **Physical-** Higher occurrence of ailments such as allergies, arthritis, asthma, bronchitis, high blood pressure, and ulcers.

Psychological Consequences of Childhood Abuse

- ▣ Psychological- In one study 80% of young adults who had been abused as children met criteria for a mental illness. Problems included depression, anxiety, eating disorders, and suicide attempts.
- ▣ Abuse and neglect are also associated with panic disorder, dissociative disorders, ADHD, depression, anger, PTSD, and reactive attachment disorder.

Behavioral Consequences of Childhood Abuse

- ▣ Abused and neglected children 11 times more likely to be arrested for criminal behavior as juveniles and 2.7 times more likely to be arrested for violent and criminal behavior as an adult and 3.1 times more likely to be arrested for violent crime.
- ▣ NIDA has found that as many as 2/3 of persons in substance abuse tx have childhood abuse hx.

- ▣ PET scans show increased activity of the right brain hemisphere at the same time that there is a decline in the use of oxygen in the Broca's area of the brain, the area used to give words to internal emotional experience (van der Kolk, 1996,).
- ▣ Inability to put feelings into words inclines the person to express himself in action, the common psychodynamic conceptualization for the diagnosis of conduct disorder.
- ▣ This trauma engendered physiologically based limitation combined with the dynamics described above creates conditions of great volatility.

Prevalence of Trauma (and PTSD) in Criminal Populations

- ▣ Widely variable estimates, based on definitions and type of source.
- ▣ 40% incarcerated women, 9% of incarcerated men report hx of abuse. (Bureau of Justice)
- ▣ Investigation of 85 juvenile criminals found that 82 percent of them were drug dependent, and more than half met or almost met the criteria for Post Traumatic Stress Disorder (Steiner, Garcia, Matthews, 1997).

- Children who had experienced severe child abuse or neglect were at significantly higher risk for juvenile arrest compared to the matched control group (Widom and Ames, 1994; Widom and Maxfield, 2001).
- By young adulthood, those reported as severely abused or neglected as children were 59 percent more likely to have been arrested for any offense as a juvenile and 28 percent more likely to have been arrested for violent crime.

- ▣ A small group of persons is shown engaging in antisocial behavior of one sort or another at every stage of life. I have labeled these persons *life-course-persistent* to reflect the continuous course of their antisocial behavior.
- ▣ A larger group of persons fills out the age-crime curve with crime careers of shorter duration. I have labeled these persons *adolescence-limited* to reflect their more temporary involvement in antisocial behavior.
(Moffitt, 1993)



Pathways

- ▣ An impressive body of research documents an overlap between persistent forms of antisocial behavior and other conditions of childhood such as learning disabilities and hyperactivity (cf. Moffitt, 1990a).
- ▣ Parents and other people respond to children's difficult temperaments and developmental deficits. In disadvantaged homes, schools, and neighborhoods,, the responses are more likely to exacerbate than amend.

- Maltreatment approximately doubles the probability of engaging in many types of crime.
- Low SES children are both more likely to be mistreated and suffer more damaging effects.
- Boys are at greater risk than girls, in terms of increased propensity to commit crime.
- Sexual abuse appears to have the largest negative effects.
- The probability of engaging in crime increases with the experience of multiple forms of maltreatment as well as the experience of Child Protective Services (CPS) investigation. (Currie, Tekin, 2006)

The role of violence, trauma and substance abuse is well documented in women's criminal pathways

(Belknap, 2001; Browne et al., 1999; Daly, 1992; Dougherty, 1998; Owen, 1998; Pollock, 1999; Richie, 1996; Widom, 2000)

- The incidence of physical abuse appears to be close to equal distribution between boys and girls in adjudicated populations (Acoca, 1998; Funk, 1999; Henggeler, Edwards, and Borduin, 1987; Lederman et al., 2004; Lenssen et al., 2000; Mason, Zimmerman, and Evans, 1998; Shelton, 2004; Wood et al., 2002).

- But for both at a much higher rate than in the general population (Leve and Chamberlain, 2004).

Trauma-based Cognitive Schema and Criminal Thinking

CRIMINAL THINKING

- ▣ Closed channel
- ▣ Victimstance-views self as victim.
- ▣ Lack of effort.
- ▣ Lack of interest in responsible performance.
 - Finds responsible living dull.

TRAUMA-RELATED THINKING

- ▣ Restricted, cautious, hyper-vigilant.
- ▣ Rightly views self as victim-generalizes.
- ▣ “Why bother”. Negative expectancy.
- ▣ Need to block and numb and/or need to break through numbness and feel, leads to risky, intense and chaotic activity.

Trauma-based Cognitive Schema and Criminal Thinking

CRIMINAL THINKING

- ▣ Lack of time perspective.
- ▣ Fear of fear.

- ▣ Power thrust.
 - Uses manipulation and deceit
- ▣ Uniqueness.
 - Different and better.
- ▣ Ownership attitude.
 - Objectifies others.

TRAUMA-RELATED THINKING

- ▣ Lack of future orientation.
- ▣ Intense fear, intrusive symptoms.
- ▣ Tries to control to feel safe.
 - Uses manipulation and deceit
- ▣ Self-deprecating.
- ▣ Poor boundaries, inability to experience intimacy.

Additional Personal and Behavioral Consequences

- ▣ Substance abuse
- ▣ Compulsive behavior patterns
- ▣ Self-destructive and impulsive behavior.
- ▣ Uncontrollable reactive thoughts.
- ▣ Inability to make healthy professional and lifestyle choices.
- ▣ Dissociative symptoms.
- ▣ Feelings of ineffectiveness, shame, despair, hopelessness.
- ▣ Feeling permanently damaged.

Emotional/Relational Consequences of Trauma

- ▣ Inability to maintain close relationships or choose appropriate friends.
- ▣ Sexual problems.
- ▣ Hostility
- ▣ Arguments with family, employers, co-workers.
- ▣ Social withdrawal.
- ▣ Feeling constantly threatened.

Have We Described the
Perfect Elements for Failure
in Specialty Courts and
Community Corrections?

Trauma-informed Services

- ▣ Are services that are provided for problems other than trauma but require that knowledge concerning violence against women and the impact of trauma.
- ▣ Trauma-informed services
 - ▣ • take the trauma into account;
 - ▣ • avoid triggering trauma reactions and/or retraumatizing the individual;

- adjust the behavior of counselors, other staff, and the organization to support the individual's coping capacity; and
- allow survivors to manage their trauma symptoms successfully so that they are able to access, retain, and benefit from these services (Harris & Falot, 2001).

As S. Bloom(2000) argues,

- ▣ “We have come to believe that retraumatizing people by placing them in environments that reinforce helplessness, scapegoating, isolation, and alienation must be viewed as antitherapeutic, dangerous, immoral, and a violation of basic human rights” (p. 85).

Trauma Recovery

Recovery unfolds in three stages.

- ▣ The central task in the first stage is establishing safety;
- ▣ in the second stage, experiencing remembrance and mourning;
- ▣ and the third stage, reconnecting with ordinary life (Herman, 1992).
- ▣ There are several treatment models based on this three-stage process (Bloom, S., 2000; Covington, 1999; Najavits, 2002).

The therapeutic culture contains the following five elements (Haigh, 1999), all of them fundamental in both institutional settings and in the community:

- Attachment: A culture of belonging
- Containment: A culture of safety
- Communication: A culture of openness
- Involvement: A culture of participation and citizenship
- Agency: A culture of empowerment

Characteristics of Offender Tx

- ▣ Hierarchical
- ▣ Highly structured
- ▣ Often manualized interventions developed and normed with (sociopathic) male prison inmates.
- ▣ Often segregated from other (non-criminal) populations in tx.
- ▣ Ignore women's unique pathways to crime.
- ▣ Ignore the specialized needs of trauma survivors.