

TRAUMA-INFORMED CARE FOR JUSTICE PROFESSIONALS

County Touchpoints: Effective Child Welfare and Justice Systems for Families Impacted by Opioid and Stimulant Use and Optimizing Community Approaches to Challenging Populations with Opioid and/or Stimulant Use in the Justice System Learning Collaboratives

A Joint Effort of the California Department of Health Care Services Medication Assisted Treatment Expansion Project, Health Management Associates, and California Health Policy Strategies



CALIFORNIA
HEALTH
POLICY
STRATEGIES, L.L.C.

NOVEMBER 9, 2021
12:00 PM – 1:00 PM

■ ZOOM FEATURES

- You will join the meeting muted
- The preferred audio is using “Phone Call” and enter your participant ID so that your name is associated with your phone number
- Use the “Chat” feature to type in a question or make a comment
- Use the “Raise Your Hand” feature by going to Manage Participants. You will see your name and can raise your hand
- Polling questions will be used
- Please note this session will be recorded. The recording content has not been professionally edited and the session was conducted using Zoom



■ SECURITY DISCLAIMER

- In the case of any security issues that may occur, this session will immediately end.
- A separate email will be sent to all participants with further instruction.

■ INTRODUCTION



Bren Manauh, LCSW-S, Certified Clinical Trauma Specialist
Project Director
Principal, Health Management Associates

LEARNING OBJECTIVES

Learn and apply information about the impact of exposure to trauma on human development and behavior

Understand and apply trauma-informed principles to interaction with plaintiffs, witnesses and other individuals key to successful case prosecution

Review secondary trauma and apply to personal assessment and self-care



CYNTHIA*

- Cynthia is wringing her hands and staring at the floor. She appears tense and upset. As you begin interviewing her, she bursts into tears, turns very red in the face, starts shaking and shouts “I can’t do this!” You feel uncomfortable because she is so upset; and you also feel impatient because it’s important you get information from her, and your schedule is packed.

*fictional, composite profile



JUAN*

- You are trying to interview Juan, but he will not make eye contact and he takes a long time to respond. When he finally does answer his responses are very short and not very informative. You feel frustrated with him because it seems he is being uncooperative.

*fictional, composite profile



TREVOR*

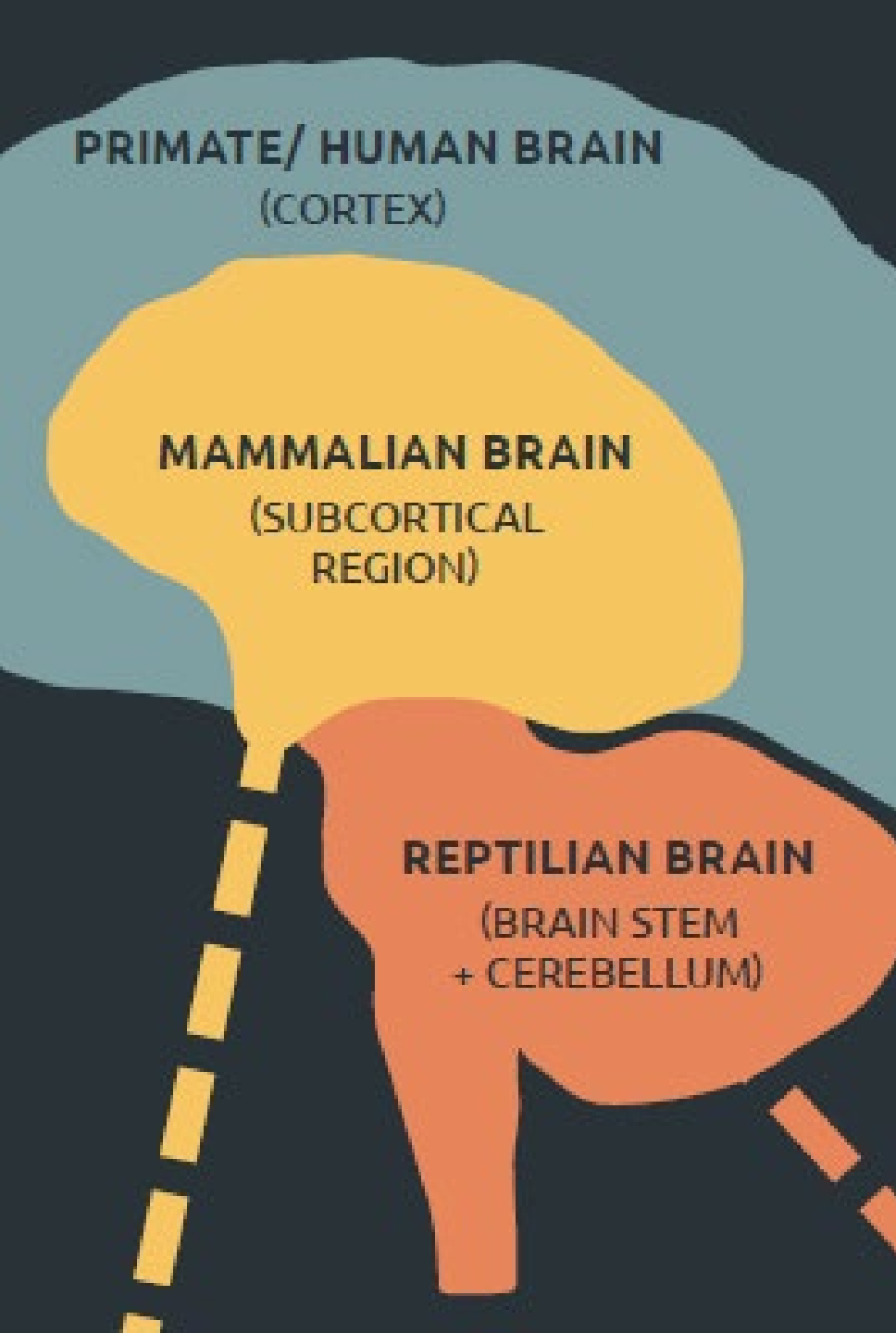
- Trevor is 17 years old. He is slouched down in his chair, and he won't meet your eyes. When he does look at you it's with hatred and anger in his eyes. The social worker who is in the room chastises him for not being more respectful and he says "f-- you! I don't have to deal with this "s-- -!" You find yourself feeling angry toward him for his behavior.

*fictional, composite profile

SEEING THROUGH A TRAUMA- INFORMED LENS

- Trauma Brain Pathways and Behaviors
- Adverse Childhood Experiences
 - Impact
- Principles of being trauma-informed





Triune Brain

Paul D. MacLean MD,.

Primate/Human

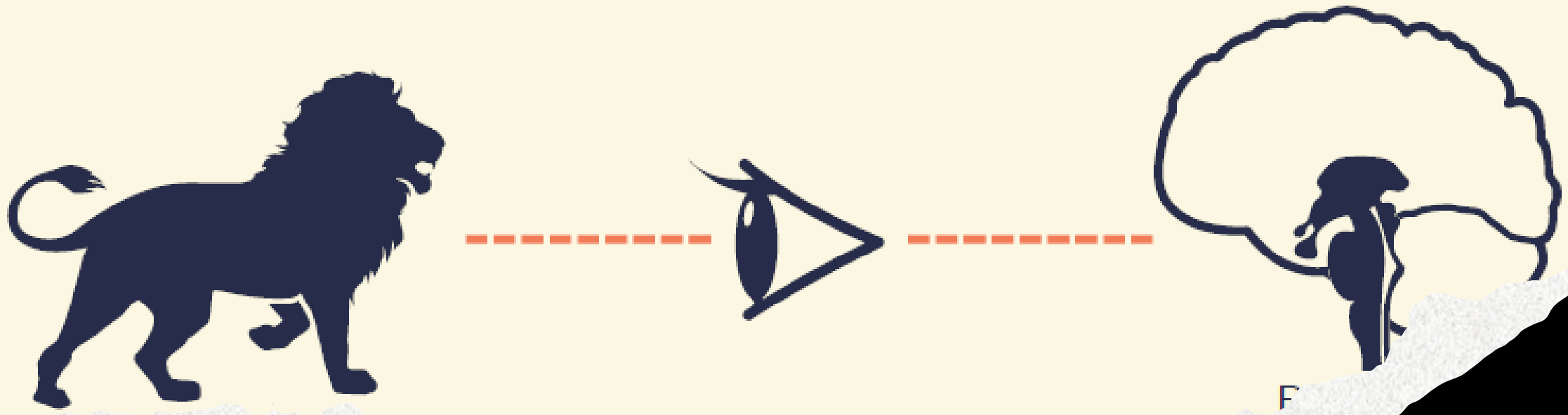
- Higher mental functioning
- Complex thought, creativity
- Language, feelings, empathy

Mammalian

- Feelings
- Learning and memory formation
- Motivation, reward

Reptilian

- Survival and maintenance
- Regulating heartbeat, breathing and other vital organs
- Safety, avoiding harm



Brain stem (“reptilian brain”) connected directly to the retina; sends threat-related messages immediately before higher brain functions are aware/involved

What if “the bear” is there every day?

SURVIVAL RESPONSE

- Activation of survival responses in the brain/body:
- *Fight*
- *Flight*
- *Freeze*
- *Submit*
- Shutting down of non-essential tasks.
- Rational thought is less possible at this time.

Living in a state of emergency activates the survival/stress response on an ongoing basis - Triggering trauma physiology in the body with its related thoughts, feelings and behaviors.

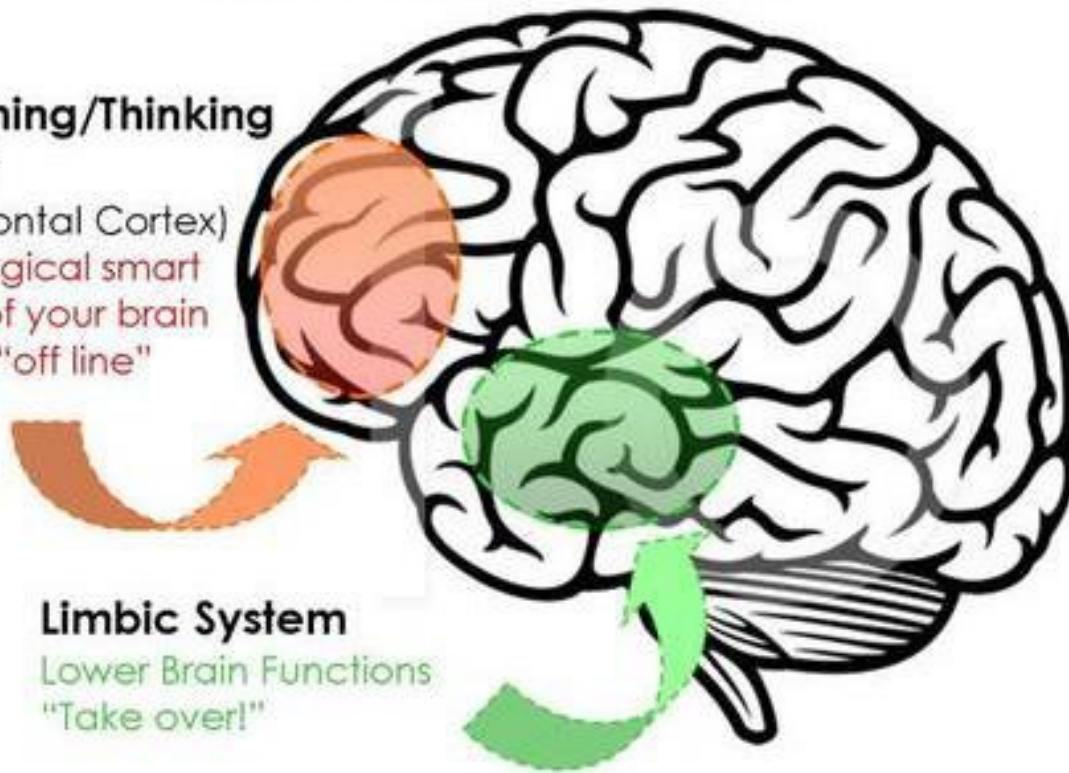
FIGHT - FLIGHT - FREEZE

What's really happening when we go into

"Survival Mode"

Learning/Thinking Brain

(Prefrontal Cortex)
The logical smart
part of your brain
goes "off line"



Limbic System

Lower Brain Functions
"Take over!"

Illustration for The Greenhouse KC LLC www.TheGreenhouseKC.com

Brain image courtesy of illustrations of.com #1214809

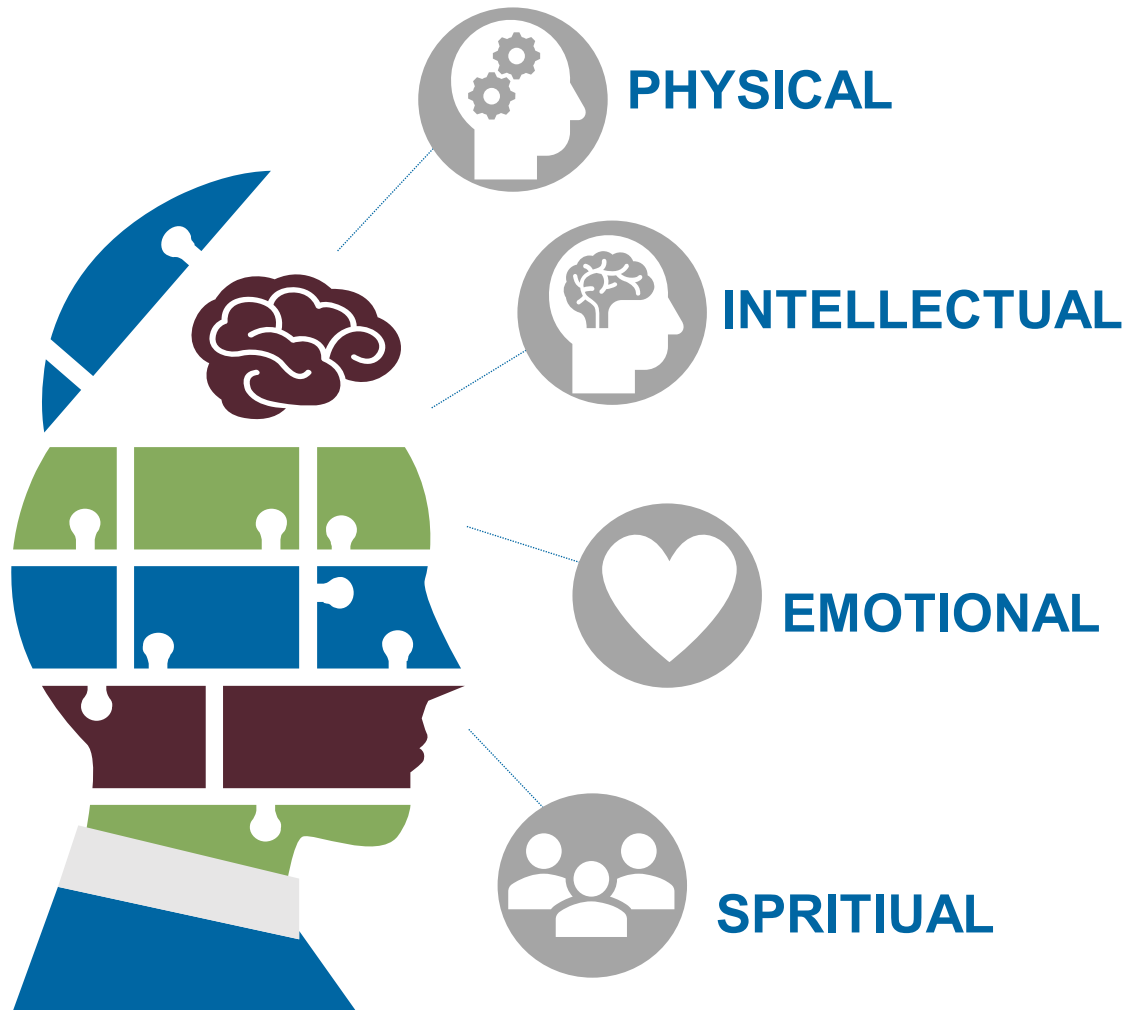
With severe or prolonged exposure to trauma the brain's baseline and pathways for neurohormones "reset", leading to ongoing physiological trauma response

WHAT IS TRAUMA?

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

SAMHSA 2012

TRAUMA



Trauma is **individualized** - Each person's experience and perception of trauma varies.

Trauma is something that **overwhelms coping capacity** and affects the **whole self**.

TRAUMA IMPACTS HOW WE EXPERIENCE OTHERS/THE WORLD



- Thoughts are driven by circumstances
- Trauma changes people's thoughts about the world and themselves
- The world **may be seen as a stressful, unpredictable, or a dangerous place**
- **It may be harder to trust other people or institutions**



CYNTHIA: A BIGGER PICTURE

- 30 years old
- Two children - 6 YO boy and 10 YO girl – are in foster care with Child Protective Services; Estranged from the fathers of both of her children as well as her family.
- Grew up in poverty and experienced childhood abuse – emotional and physical. Of Filipino and African American descent and has experienced racial discrimination.
- History of criminal justice system involvement due to substance use including, possession, DUI, and solicitation. Has served jail time for possession. Had several “failed” episodes of addiction treatment in the community.
- Has been physically and sexually assaulted while soliciting.

A close-up portrait of a man with dark hair and a mustache, looking slightly to the left. He is wearing a light-colored collared shirt. The background is a solid blue color.

FREEZE

JUAN – A BIGGER PICTURE

- 28 years old. Came to the US from Guatemala at the age of 16 after experiencing assaults and witnessing his father being killed. Prior to this, his family struggled to have enough to eat and a place to live.
- Works multiple menial labor jobs but still experiences intermittent homelessness during which he lives in his vehicle. Has experienced multiple instances of being called racial epithets by job supervisors, other workers and random people he encounters.
- He still has significant problems with pain because of the physical beatings he experienced.



FIGHT

TREVOR – A BIGGER PICTURE

- Trevor is 16 years old and in foster care. This is his 7th foster placement since he was originally placed in care at the age of 6 when his mother surrendered parental rights. He doesn't know who his biological father is. His mother frequently left him alone or with paramours, one of whom sexually molested him.
- While some foster placements have felt safe and supportive, Trevor has experienced times when he hasn't had enough to eat; been called names, physically attacked or punished, and otherwise treated poorly by foster parents and other kids in the placement.
- Trevor has been moved to multiple schools and struggles with grades and peer relationships. He has spent a lot of his educational “career” in alternative placements where he has experienced bullying.

TRAUMA

Affects the
Whole Self

Physical,
Emotional,
Intellectual,
Spiritual,
Sexual

***Traumatic
Event(s)***



Physiology
Changes

Fight, Flight,
Freeze,
Submit

Survival Mode Primal
Action

Behaviors

TRAUMA

Trauma changes people

The changes lead to behaviors

Therefore, behavior is a symptom: do a “self-check” re frustration response

IMPACT OF ADVERSE CHILDHOOD EXPERIENCES

- Research study of 17,000 participants (Anda and Felitti, 1995-1997)
- Adverse Childhood Experiences (ACEs) are shown to affect an individual's physical and emotional health throughout the life span
- Negative or potentially traumatic events that occur during childhood
- Increases a person's risk of certain health conditions and behaviors in adulthood
- Has significant impact on a person's physical, emotional and emotional health throughout life



CATEGORIES OF ACES

- Abuse
 - Physical
 - Emotional
 - Sexual
- Neglect
 - Physical
 - Emotional
- Household Dysfunction
 - Mental Illness
 - Domestic Violence
 - Divorce
 - Incarcerated Relative
 - Substance Abuse



ACE POLL

What percentage of the population is impacted by ACE, according to research?

- 17%
- 23%
- 48%
- 67%





IMPACT OF ACE

- Trauma/traumatic experiences are far more prevalent than previously recognized.
- **67%** of the population has at least 1 ACE
- 1 in 8 people have 4 or more ACE
- Increased ACEs score correlates to worse health and social outcomes.
- **What's your ACE score?** <https://www.npr.org/sections/health-shots/2015/03/02/387007941/take-the-ace-quiz-and-learn-what-it-does-and-doesnt-mean>



IMPACT OF ACES

Brain chemistry
imbalance

Many health
conditions/poor
outcomes

Vulnerability to
substance use and
mental health challenges

Psychosocial issues
including justice system
involvement



IMPACT OF ACE

A person with an ACE of 4 or more has:

2 ½ x the risk of COPD

2 ½ x the risk of hepatitis

4 ½ x the risk of Depression

12 x the risk of suicidality

As compared to those with 0 ACE

They are correlated with adult onset of chronic disease, such as cancer and heart disease, as well as mental illness, violence and being a victim of violence...and addiction/SUDs.



**TRAUMA IS MORE PREVALENT
AMONG INCARCERATED
INDIVIDUALS**

- In childhood:
 - Emotional abuse/abandonment
 - Physical abuse
 - Sexual abuse
- In adulthood:
 - trauma experiences continue into adulthood but at rates lower than found in childhood, with the exception, for men, of being threatened or harmed by a knife or gun, which occurs at roughly equal rates in childhood and adulthood
 - inmate- and staff-on-inmate physical victimization



TOXIC STRESS

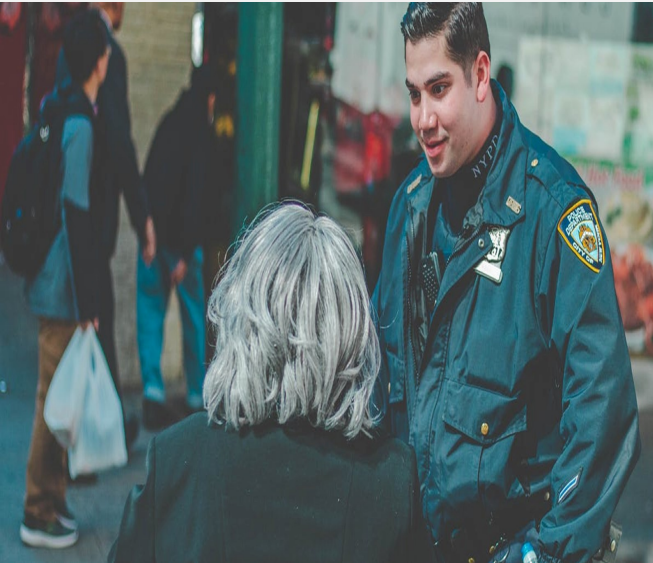
- Damage to function and structure of the brain as the child develops - devastating in children whose brains are rapidly developing from gestation through age three.
- Brain and body produce an overload of stress hormones — such as cortisol and adrenaline — that harm the function and structure of the brain.
- Too much stress – toxic stress – occurs with ongoing threat.
- Toxic stress results from living for months or years with ongoing trauma factors such as abuse, depressed or mentally ill parent, exposure to and experience with community violence.

TOXIC STRESS

[HTTPS://YOUTU.BE/KDTIPGVZNES](https://youtu.be/KDTIPGVZNES)



TRAUMA-INFORMED PRINCIPLES*



Reducing the re-traumatization of individuals and the professionals who serve them

Understand and recognize the impact of trauma exposure to understand why people behave in the ways they do, even though it causes them problems

Prevention of further harm and re-traumatization while creating opportunities for recovery

Without understanding trauma – and incorporating this understanding into our treatment – we are more likely to adopt attitudes and behaviors that are negative and unhealthy

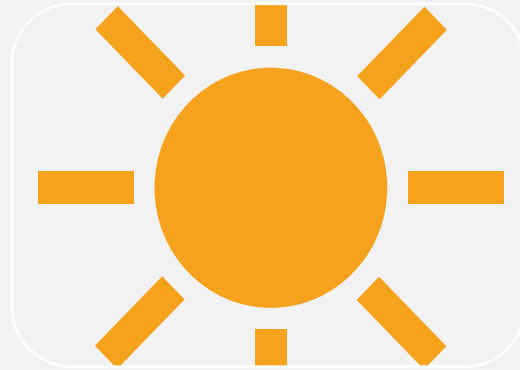
Understanding trauma/stress allows healthcare staff to act compassionately and take well-informed steps toward wellness

*California Department of Corrections and Rehabilitation – California Correctional Health Services Feb. 2020

THE 4 RS SAMHSA



Realization



Recognize



Respond



Resist Re-traumatization

- Appreciates many problem behaviors began as understandable attempts to cope.
- Strives to maximize choices for the person and control over their healing process and other life choices.
- Seeks to be culturally responsive; understands each person in the context of life experiences and cultural background.

APPLYING TRAUMA-INFORMED PRINCIPLES

- **How do these principles come into play with your interaction with Cynthia, Juan or Trevor?**
- Demonstrating Awareness and Knowledge of Trauma
- Respect and Dignity
- Making space to listen
- Rapport/safety/trust – Convey caring
- Sharing Information
- Sharing Control
- Respecting Boundaries
- Fostering Mutual Learning



REFLECTIVE LISTENING

Restating

Reflecting

Summarizing

Encouraging



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IN REFLECTIVE LISTENING, YOU WILL:



Listen for the content of the message.



Listen for the feelings of the speaker.



Respond to the feelings of the speaker.



Reflect back to the speaker what you think you are hearing.

ACTIVE LISTENING





Empathy Is the Key

SECONDARY TRAUMA



SECONDARY TRAUMA



Emotional duress
from hearing about
the firsthand
trauma experiences
of another



Cumulative effect of
repeated exposure
to trauma – impact
sense of self,
damage our outlook
on life, and harm
our overall well-
being



The worst
stories and
examples of
humanity



Often feeling
alone, solely
responsible



Mia

We do what has to be done...And it has an ongoing impact.

- ED at a Domestic Violence Shelter
- Nancy – Husband off the charts on the “Lethality Scale”; and daily exposure to horrible stories
- Send the staff home and leave Mia the therapy dog at home “because it’s too dangerous”
- Later news of a murder at a DV shelter in my hometown
- Latent/delayed trauma response



WHY PRACTICE SELF-CARE?

- Buffers you against stress, trauma
- Enables you to ride out the toughest times
- Helps you better separate work life from family life
- Allows you to continue to be effective in your chosen career

GROUNDING YOURSELF

- Develop your own way to “down-regulate your nervous system”
- Calmer - Able to focus and attend
- Mitigate negative health effects of stress
- Less reactivity



MIND YOUR THOUGHTS

Thoughts influence feelings

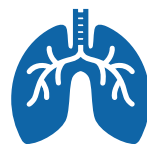
- Angry thoughts produce angry feelings, anxious thoughts produce anxious feelings, hopeless thoughts produce feelings of hopelessness, and calming thoughts help us calm down



Checking in on yourself

- + Importance of stepping back and reflecting on whether the typical thoughts you are having really fit the current realities.
- + Asking yourself, “How helpful are these thoughts?”
- + Taking note of your usual signs that you are stressed-out— e.g., poor sleep, headache, poor concentration, anger, social withdrawal

THREE GROUNDING PRACTICES



Slow, deep breathing from your gut: Can be range of simple practices from taking 10 deep breaths when you're stressed to meditating daily.



Focused concentration: Slow your thoughts down. (They usually jump all over the place.) Try to focus on one pleasant idea or memory at a time. If your mind jumps to something else, then gently prod it back.



Visual imagery: Focusing on a calming image, such lying on a beach or walking through the woods, reduces stress.

■ POLLING QUESTIONS

1. Overall, today's webinar was:

- A. Very useful**
- B. Somewhat useful**
- C. Not very useful**
- D. Not useful at all**

2. The material presented today was:

- A. At the right level**
- B. Too basic**
- C. Too detailed**



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Questions?
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