Surviving the Trenches: The Impact of Trauma Exposure on Corrections Professionals

Hosted by the National Reentry Resource Center and American Probation and Parole Association with funding support from the U.S. Department of Justice’s Bureau of Justice Assistance

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Speakers

Presenter

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Moderator

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National nonprofit, non-partisan membership association of state government officials

Provides practical, non-partisan advice informed by the best available evidence

Engages members of all three branches of state government

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<th>Corrections</th>
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<td>Reentry</td>
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<td>Justice Reinvestment</td>
<td>Law Enforcement</td>
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<td>Substance Abuse</td>
<td>Youth</td>
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National Reentry Resource Center (NRRC)

- Authorized by the passage of the Second Chance Act (SCA) in April 2008
- A project of the CSG Justice Center, supported by the Bureau of Justice Assistance
- Has supported more than 600 SCA grantees, including 40 state corrections agencies
- Provides individualized, intensive, and targeted technical assistance training and distance learning to support SCA grantees

Register for the monthly NRRC newsletter at: csgjusticecenter.org/subscribe/

Share this link with others in your network who are interested in reentry!
American Probation and Parole Association (APPA)

- Member association representing community corrections professionals in all levels of government and in tribal agencies
- Regarded as the voice for pretrial, probation, and parole practitioners including line staff, supervisors, and administrators
- Public and private sectors in criminal and juvenile justice
- Members also include educators, volunteers, victim service providers, and interested citizens
- Provides training and technical assistance including a journal, research, information clearinghouse services, and advocacy
- Training Institute and Leadership Institute

www.appa-net.org
Agenda

Types of Trauma

Managing Traumatic Stress

Resiliency & Redefining Stress

Q&A
Do you believe that working in the criminal justice system has changed the way you view the world?

- Yes: 92% (N=2,906)
- No: 7%
- Unsure: 1%

(Lewis, 2016)
• **Cynicism:** A pervasive distrust of human nature and motives

• A professional mindset
  – Officer safety

(Gilmartin, 2002)
TRAUMATIC STRESS

• Traumatic stress differs from organizational stress in a number of ways:
  1. The event is often sudden or unexpected
  2. Creates some level of distress
  3. Can overwhelm coping capacity
  4. Has the potential to alter the way one views the world

• What constitutes a traumatic event is in the eye of the beholder.
**PRIMARY TRAUMATIC STRESS**

**JAILS AND PRISONS**

- Personally experience or observe an event that poses a risk to self or others
  - Being assaulted
  - Receiving threats
  - Riots and hostage of peers
  - Intervening in violent conditions
  - Addressing suicides
  - Medical emergencies
  - Dealing with unethical conduct
  - Overseeing executions
PRIMARY TRAUMATIC STRESS

PROBATION AND PAROLE

- Personally experience or observe an event that poses a risk to self or others
  - Being assaulted
  - Receiving threats
  - Stalked by offender
  - Observing violence, death or suicide
  - Attacked by animals in the field
  - Near-misses

(Lewis, 2013)
How many primary traumatic events have you experienced in your career?

- 4 or more: 29%
- 3: 17%
- 2: 19%
- 1: 19%
- None: 16%

N=2,513

(Lewis, 2016)
Did you feel supported by your agency during or after your primary traumatic event?

- Always: 14%
- Frequently: 15%
- Somewhat: 33%
- Not much: 24%
- Not at all: 16%

N=434

(Lewis, 2016)
PHYSICAL SYMPTOMS OF TRAUMA

• Headache
• Muscle tension
• Increased heart rate
• Higher blood pressure
• Fatigue
• Exhaustion
COGNITIVE SYMPTOMS OF TRAUMA

• Shock, disbelief, and numbness
  - Especially for unexpected events

• Intrusive imagery of the event

• Rumination
  - Trying to make sense of it

• Questioning one’s world views
  - Viewing the world and the people in it as less predictable and less controllable
EMOTIONAL SYMPTOMS OF TRAUMA

- Anger
- Anxiety
- Irritability
- Depression
- Sadness
- Guilt
BEHAVIORAL SYMPTOMS OF TRAUMA

- Decreased or excessive eating
- Alcohol / drug use
- Hyper-startle
- 1000-yard stare
- Sleep disturbance
- Withdrawal
- Family discord
- Crying spells
- Hyper-vigilance
- Violence
SPIRITUAL SYMPTOMS OF TRAUMA

• Anger at God or spiritual equivalent
• Question world view
• Withdrawal from faith-based community
• Cessation of faith-related practices
THREE EXAMPLES

• Nightmares, fearful thoughts, intrusive images, and suspicion of the motives of others

• All of these people spend a significant part of their work day listening to or reading about accounts of victimization

(McCann and Pearlman, 1990)
SECONdARY Traumatic Stress

“Compassion Fatigue”

• Professionals begin to experience trauma symptoms themselves due to their secondary exposure to human suffering. These include:
  - Hyper-vigilance
  - Intrusive thoughts
  - Feeling detached and numb
  - Difficulty falling or staying asleep
  - Irritability or outbursts of anger
  - Difficulty concentrating

(Figley, 1995)
“Those who work with offenders are called upon to bear witness to the crime.”

-Judith Herman, 1992
WORKING WITH JUSTICE INVOLVED INDIVIDUALS

Staff are exposed to disturbing aspects of human behavior via

• Observation
• Police reports
• Pre-sentence Investigations
• Criminal history
• Assessment interviews
• Victim contacts
• Collateral accounts
• Living environments
In the course of your day, how often are you exposed to traumatic material?

- Always: 22%
- Frequently: 29%
- Often: 22%
- Occasionally: 19%
- Rarely: 8%

N=2,373

(Lewis, 2016)
SECONdary Traumatic Events

• Officers experience traumatic stress as a result of their secondary exposure to violence, injury, and death
  – Offender suicide
  – Violent recidivism involving death
  – Violent recidivism involving child victims
  – Sexual recidivism
  – Violent death of offender
  – Line of duty violence, injury, or death of a co-worker
  – Violent death of offender
  – Delivering death notifications

(Lewis, 2013)
How many secondary traumatic events have you experienced in your career?

<table>
<thead>
<tr>
<th>Number of Events</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>4 or more</td>
<td>48%</td>
</tr>
<tr>
<td>3</td>
<td>14%</td>
</tr>
<tr>
<td>2</td>
<td>15%</td>
</tr>
<tr>
<td>1</td>
<td>15%</td>
</tr>
<tr>
<td>None</td>
<td>8%</td>
</tr>
</tbody>
</table>

(N=2,766)

(Lewis, 2016)
Did you feel supported by your agency during or after your secondary traumatic event?

- Always: 12%
- Frequently: 9%
- Somewhat: 27%
- Not much: 32%
- Not at all: 20%

N=424

(Lewis, 2016)
SECONDARY TRAUMA SYMPTOMS

Which symptoms of secondary trauma have you experienced in the past two months?

(Click all that apply)

- Loss of trust
- Loss of innocence
- Lower concentration
- Preoccupation with trauma
- Hyper-vigilance
- Sleep disturbances
- Chronic exhaustion
- Feeling detached/numb
- Avoidant behaviors
- Increased anger, disgust, sadness, and/or distress

(Salston & Figley, 2003)
SECONDARY TRAUMA SYMPTOMS

1. Loss of trust (63%)
2. Sleep disturbances (55%)
3. Increased anger, disgust, sadness, and/or distress (54%)
4. Lower concentration (50%)
5. Hyper-vigilance (43%)
6. Chronic exhaustion (42%)
7. Avoidant behavior(s) (42%)
8. Feeling detached or numb (42%)
9. Loss of innocence (29%)
10. Preoccupation with trauma (28%)

(N= 1,298) (Lewis, 2016)
VICARIOUS TRAUMA

• Exposure to someone else’s trauma can cause people to vicariously experience a change in their own worldview
  - Beliefs about humanity
  - Views of the world (safety)
  - Chronic suspicion
  - Cynicism
  - Loss of empathy

(Pearlman & Mac Ian, 1995)
Hiking in the Caribbean

On the Cliff of Awakening

(Laura van Dernoot Lipsky, 2009)
VICARIOUS TRAUMA SYMPTOMS
Which symptoms of vicarious trauma have you experienced in the past two months?
(Click all that apply)

• Interpersonal relationship problems
• Distorted world view
• Question spirituality
• Less tolerant
• Loss of empathy
• Feeling desensitized
• Intrusive thoughts
• Intrusive imagery
  (Steed & Downing, 1998)

• Increased cynicism
• Chronic suspicion of others
VICARIOUS TRAUMA SYMPTOMS

1. Increased cynicism (72%)
2. Chronic suspicion of others (70%)
3. Less tolerant (70%)
4. Feeling desensitized (64%)
5. Distorted world view (58%)
6. Loss of empathy (56%)
7. Intrusive thoughts (41%)
8. Interpersonal problems (41%)
9. Intrusive imagery (32%)
10. Question spirituality (22%)

N = 1,285

(Lewis, 2016)
SANCTUARY TRAUMA

• Turning to someone (or an agency) from whom one expects support after a traumatic event but instead receives judgement and/or indifference
  – Minimized
  – Shamed
  – Blamed
  – Ignored
  – Turned away

• A form of re-traumatization that can be as devastating as the original trauma
AGENDA

Types of Trauma

Managing Traumatic Stress

Resiliency & Redefining Stress

Q&A
THE STARTING POINT

• “The expectation that we can be immersed in suffering and not be touched by it is as unrealistic as expecting to be able to walk through water without getting wet.”
  – Rachel Naomi Remen

• “Removing the judgments and inhuman expectations are precursors to healing.”
  – Laura van Dernoot Lipsky
UNDERSTANDING THE PROCESS

• Reactions to trauma exposure are adaptive and protective

• Conscious awareness = conscious choice

• Create a work culture that promotes healthy coping, awareness, and self-care practices
  - Addressing job impact is paramount to sustaining the highest quality of professionalism

(Leonhardt & Vogt, 2011; Lipsky, 2009)
TRAINING AND EDUCATION

• Psychological inoculation
  – Mentally prepared, psychological body armor

• Normalize stress reactions
  – Prevents belief of being the only one impacted
  – Early recognition = early intervention

• Healthy Coping
  – Self-awareness
  – Wellness dimensions
  – Stress-reducing strategies
Peer support programs can be very beneficial for professions that:

1. Are specially trained and/or educated
2. Possess a unique culture
3. Extend minimal trust to those outside the profession
4. Are reluctant to use external resources to manage stress

(Everly & Mitchell, 2000)
PEER SUPPORT PROGRAMS

• Must meet the needs of employees
  – Focus on secondary and vicarious trauma

• Address the stigma of support services
  – Acknowledging impact is not a sign of weakness, it is a mark of professional integrity

• The offer of peer support services should be procedural following incidents associated with high stress
  – May catch employees who otherwise would not request services on their own and/or may not recognize they need support
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Q&A
In 2009, the US Army began a $145 million initiative to increase resilience. Fitness was increased to include:

1. Physical fitness
2. Emotional fitness
3. Family fitness
4. Social fitness
5. Spiritual fitness

(Seligman, 2011)
RESILIENCE
Which factors of resilience do you believe are currently strong in your life?
(Click all that apply)

• There are a number of evidence-based protective factors that contribute to resilience:
  
  Optimism
  Problem solving
  Personal awareness
  Strong social support
  Sense of meaning
  Self-efficacy
  Cognitive flexibility
  Empathy
  Spirituality
  Comfort with emotion

(Reivich, & Seligman, 2011)
RESILIENCE

1. Problem solving (77%)
2. Personal awareness (67%)
3. Optimism (53%)
4. Sense of meaning (52%)
5. Empathy (52%)
6. Strong social support (52%)
7. Comfort with emotion (46%)
8. Cognitive flexibility (45%)
9. Self-efficacy (45%)
10. Spirituality (43%)

N = 528

(Lewis, 2016)
REDEFINING STRESS

• Stress is what arises when something we care about is at stake
  – Includes thoughts, emotions, and physical reactions

• Stress and meaning are inextricably linked
  – We don’t stress over things we don’t care about
  – We can’t create a meaningful life without experiencing some stress

(McGonigal, 2015 pp. xxi & xxii)
HONOR YOUR SERVICE

You may never know the number of lives you have impacted through your work, but know this...

You make our world a better place!
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