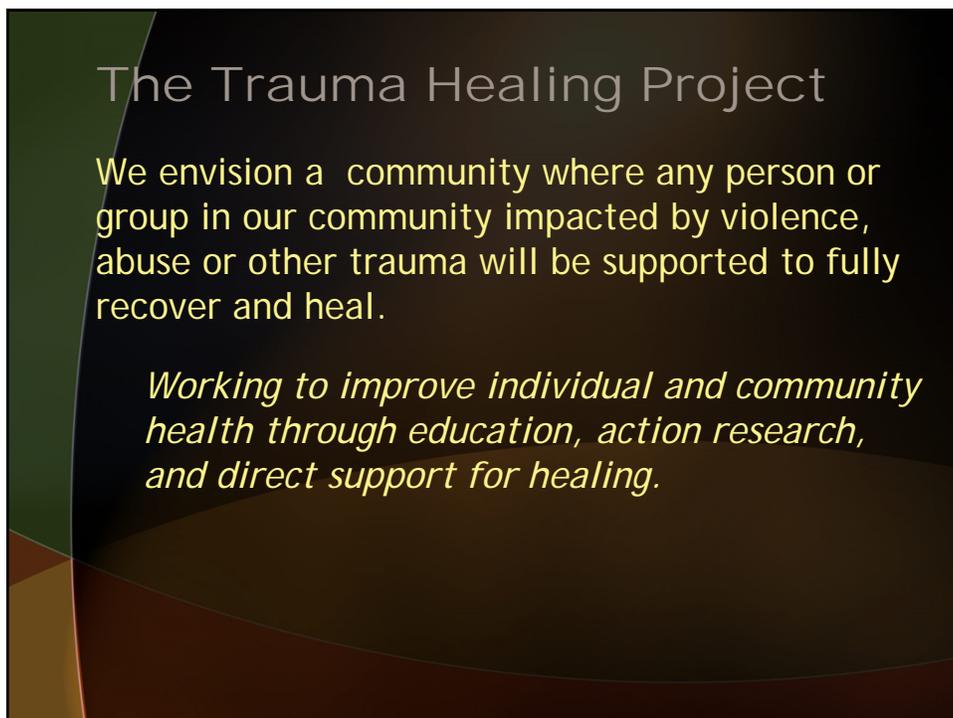


Children in Court:
A Trauma-Informed Perspective

August 10, 2015

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The Trauma Healing Project

We envision a community where any person or group in our community impacted by violence, abuse or other trauma will be supported to fully recover and heal.

Working to improve individual and community health through education, action research, and direct support for healing.

Today's Purpose**

- Increase your understanding of, and curiosity about, the influence of trauma in your courtroom and upon the children you work with
- Provide a framework for applying this awareness in practice
- Clarify your role for ensuring services and contact are trauma-informed

Today's Agenda**

- Definitions
- Why Trauma-Informed Care Matters
- Trauma-Informed Considerations
- Checklist/Outline

Trauma Specific vs Trauma Informed

- **Trauma Recovery/Trauma Specific Services**
 - Reduce symptoms
 - Promote healing
 - Teach skills
 - Psycho-empowerment, mind-body, other modalities.
- **Trauma Sensitive**
 - Bring an awareness of trauma into view
 - Trauma lens
- **Trauma Informed Care**
 - Guide policy, practice, procedure based on understanding of trauma
 - Assumption: every interaction with trauma survivor activates trauma response or does not.
 - Corrective emotional experiences.
 - Parallel process

Why Now – Is it a Fad?

- **Developmental neuroscience, interpersonal neurobiology.**
- **Enormous advances in neurobiology in the last two decades, brain imaging.**
- **Adverse Childhood Experiences Study (Kaiser & CDC)**
 - Link with mental, behavioral and physical outcomes.
 - Compelling Evidence for Public Health perspective

What it doesn't mean

- It doesn't mean excusing or permitting/justifying unacceptable behavior.
 - Supports accountability, responsibility
- It doesn't mean just being nicer
 - Compassionate care vs TIC
 - Compassionate yes, but not a bit mushy
- It doesn't 'focus on the negative'
 - Skill-building, empowerment
 - Recognizing strengths

Why is it important?

- Trauma is pervasive & impactful
- Trauma, especially interpersonal violence, is often self-perpetuating.
- Trauma differentially affects the more vulnerable.
- Trauma affects how people approach services.
- The service system has often been retraumatizing.
- We can make a difference.

Definitions - Trauma

"For our purposes, trauma refers to events outside the typical range of human experience. In child welfare, it's common to have parties who have experienced some of the following: abuse and neglect, experiencing or witnessing interpersonal violence, serious accidents, unexpected death of a loved one, and community violence.

"Many parents and children in the child welfare system have experienced trauma in their lives; having a child enter foster care is traumatic to both the child and the parents."

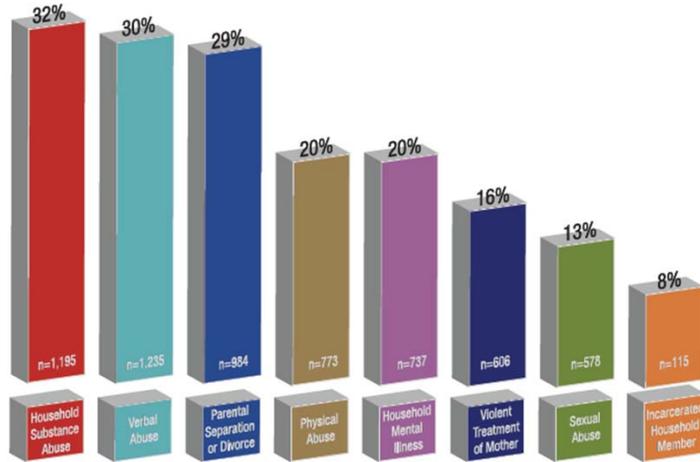
(Amy Benedum & Rakeem Washington, CRB Conf 2014)

Adverse Childhood Experiences (ACE) Study - 17,421 adults in San Diego, California.

Adverse events:

- recurrent and severe physical abuse (11%)
- recurrent and severe emotional abuse (11%)
- contact sexual abuse (22%)
- growing up in a household with:
 - an alcoholic or drug-user (25%)
 - a member being imprisoned (3%)
 - a mentally ill, depressed, or institutionalized member (19%)
 - the mother being treated violently (12%)
 - both biological parents *not* being present (22%)

PREVALENCE OF INDIVIDUAL ACEs IN OREGON

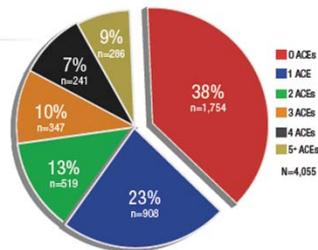


Due to the sensitive nature of these questions, not all survey respondents answered each question. Therefore, the number of respondents per question varies and are identified on the bottom of each bar. The percentage represents the percent of positive responses from the overall responses in that category.

HOW MANY ACEs DO OREGONIANS EXPERIENCE?

ACEs are common in Oregon. Individuals who responded to the 2011 BRFSS who experienced four or more ACEs generally had higher rates of negative health behaviors, mental health concerns and chronic diseases.

As individuals, communities and a state, our primary goal is to try to prevent ACEs from occurring initially. However, we must also continue to promote wellness and resiliency even in the presence of adversity.⁴



The Prevalence of Adverse Life Experiences

0-6 yo

- 30% Suffered repeated physical, sexual or emotional abuse in early childhood
- 47% Neglect
- 17% Had unmet basic needs (food, clothing)
- 13% Lived with an adult with a substance use issue
- 17% Were separated from parents

7-19 yo

- 54% struggled in school
- 50% dropped out of school
- 28% Ran away or left home early
- 30% Became teen parents
- 15% Became homeless at some point
- 46% Were substance users

19-30 yo

- 30% Were arrested or incarcerated at some point
- 52% Were substance users
- 26% Were homeless
- 74% Report job insecurity or become unable to work at all
- 28% Were separated from their children

What the Numbers Tell Us

Before Age 19:

63% experienced some form of abuse;

52% experienced extended maltreatment

30+ yo

- 40% Struggle with mental health
- 70% Describe struggling to get needed healthcare
- 30% Struggle to manage their medication
- NONE able to work
- 30% Describe being socially isolated

Lauren Broffman, Center for Outcomes Research and Education (CORE) 21

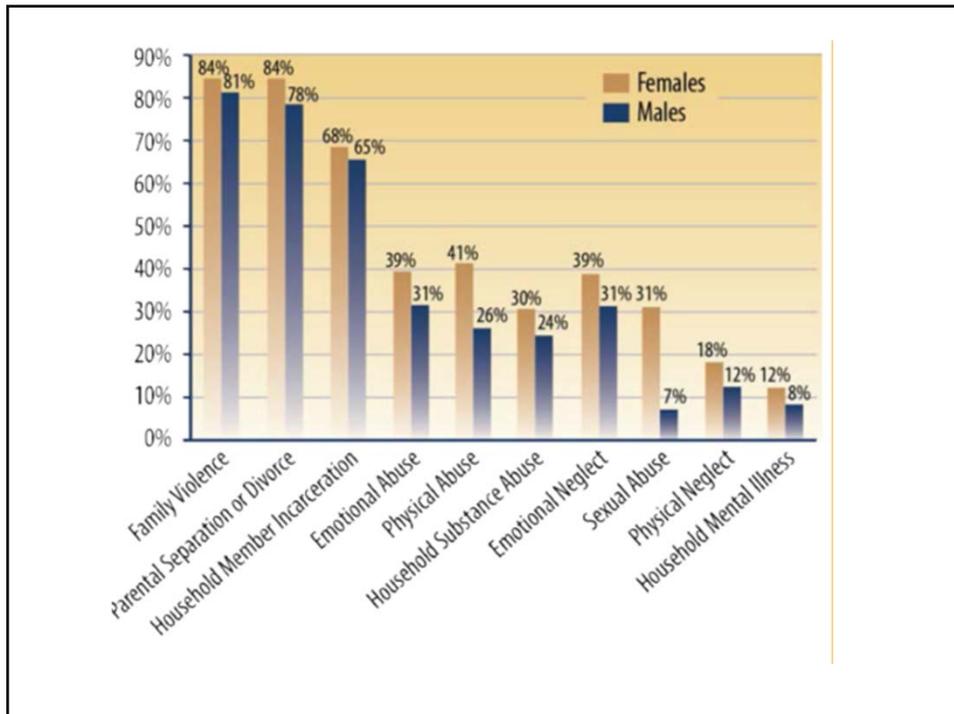
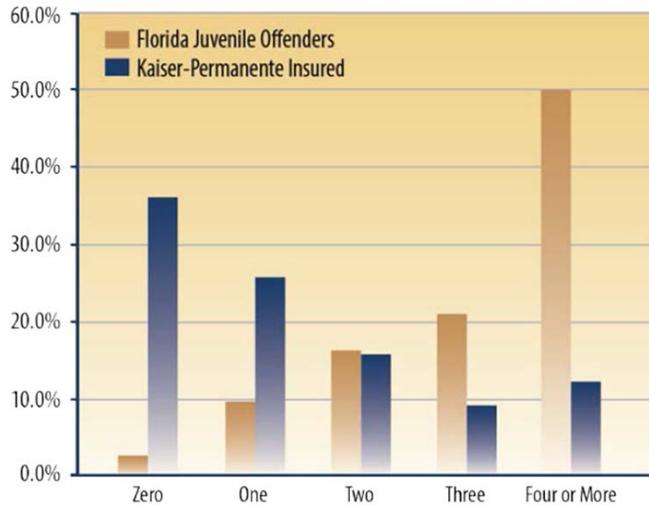


Figure 3. Comparison of ACE Scores Between Juvenile Offenders and Kaiser-Permanente Study.



Note. Prevalence for insured adults based the entire ACE Study sample ($n=17,337$) as posted by the CDC available at <http://www.cdc.gov/ace/prevalence.htm>.

Remember:

- Without helpful affect regulation skills people who are traumatized may have to rely on *tension reduction behaviors* -external ways to reduce triggered distress. (Briere, 2004)
- Chronic trauma interferes with neurobiological development and the capacity to integrate sensory, emotional and cognitive information into a cohesive whole. Developmental trauma sets the stage for unfocused responses to subsequent stress. (Van der Kolk)
- (http://www.traumacenter.org/products/pdf_files/Preprint_Dev_Trauma_Disorder.pdf)

Remember:

- Our brains change and welcome change.
- Positive interactions which communicate safety and connection are foundational to changing unproductive brain patterns.
- Every interaction the survivor has with a provider system has the potential of
 - adding to the trauma experiences,
 - reactivation of trauma memories,
 - or providing a sense of safety and enhancing emotional regulation.

Definitions – Trauma-Informed Care

- Services and supports that are informed about and sensitive to trauma-related issues present in individuals who have experienced trauma.
AMH Trauma Policy (2014)
- Thoroughly incorporates, in all aspects of service delivery, an understanding of the prevalence and impact of trauma and the complex paths to healing and recovery. Trauma-informed services are designed specifically to reduce stress and to avoid re-traumatizing clients, volunteers and staff.
CHC Trauma Protocol (2015)

Definitions – Trauma-Informed Care

Put simply, trauma informed practice recognizes that past or present experiences of trauma can affect a parent's confidence and ability to keep children safe, work effectively with child welfare staff, and respond to the requirements of the courts.

(Amy Benedum & Rakeem Washington, CRB Conf 2014)

Practicing Trauma-Informed Care means:

We recognize that traumatic experiences *terrify, overwhelm, and violate the individual.*

We have a commitment not to repeat these experiences and, in whatever way possible, to restore a sense of safety, power, and worth.

Trauma-Informed FDC

Being Trauma-Informed and Being a Good Judge

- o Actually a good judge is trauma-informed even if not knowing it
- o Characteristics are required by Judicial Canon of Ethics
- o Characteristics go hand-in-hand with being respectful, observant, thoughtful, and transparent – explaining the process, the ruling and the basis for the ruling

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Within your own practice....

"A judge shall be patient, dignified, and courteous to litigants, jurors, witnesses, lawyers, court staff, court officials, and others with whom the judge deals in an official capacity, and shall require similar conduct of lawyers, court staff, court officials, and others subject to the judge's direction and control."

Rule 3.7 Oregon Judicial Code of Conduct

Your Role

- Educate yourself
 - Impact of trauma
 - Trauma-informed care
 - Trauma-specific services
- Set the tone
 - Standards for appropriate behavior
 - Facilitate transitions
- Educate others
- Hold standards for practice

A Developmental Perspective (children and parents)

- Problematic behavior evolves over time as a result of successive experiences
- A prior negative experience may increase the difficulty a person has in successfully accomplishing a subsequent developmental task
- A return to positive functioning is always possible

(Chapin Hall)

Parents with childhood trauma

- Fewer had stable employment or post-secondary education
- More had problems in 3 or more areas of current functioning
- A majority were resistant to participating in services to address their current problems
- Two-thirds described having previously participated in mental health treatment and one-third had experienced a psychiatric hospitalization

The Role of Services - Parents

- The service needs of parents with significant childhood trauma are great.
- Multiple, simultaneous service demands, however, may not be helpful.
- D'Andrade's work on reunification suggests multiple service demands on parents.
 - Average of 8 required service events per week.

The Role of Services - Children

- The emotional, physical, social and developmental needs of children impacted by trauma are great.
- Developmental assessment/knowledge of impact of trauma on child is critical and should guide every aspect of decision making
- Knowledge of locally available trauma-specific services is required by all parties

What Services?

- Trauma-informed?
- Trauma-specific?
- Evidence-based?
- Promising?
- Known to be helpful?

Research!!

- National Child Traumatic Stress Network
- SAMHSA
- California Clearing House

Trauma-Informed Considerations

- **Safety - Creating Safe Space**
 - Physical
 - Emotional
- **Restoring Power & Control**
- **Value the Individual(s)**
- **Plan for Triggers**
- **Parallel Process**

Creating Safe Space

(to reduce anxiety, and FFF so folks can engage and participate)

PHYSICAL SAFETY:

- **Assess your space, parking, signage, room size, chairs.**
- **Noise and distractions**
- **Smells, food, drinks**
- **Attend to unspoken unease**

Creating Safe Space

(to reduce anxiety, and FFF so folks can engage and participate)

EMOTIONAL SAFETY

- Preparing participants - adults and children
 - What they will see, hear, smell, where to sit
- Expect and plan for reactivity, heightened sensitivity
- Introduce everyone present/key roles
- Transparency - Explain immediate agenda, process and expectations verbally and in writing whenever possible (e.g. when it's okay to talk, how to ask questions, order of events, etc.)
- Focus on strengths, foster collaboration, see child/yougn/parents as experts

Restoring Power & Control

(now that the anxiety is reduced)

- Provide a copy of all documentation being used/introduced.
 - If you have something and I don't.....
 - Refer to it as you proceed
 - Give instructions - can they write on it?
- Explain each document as it is used, define terms.
 - "What we mean when we say reasonable efforts."
- Ask everyone for input - SYSTEMATICALLY.
 - *Tell folks you will do this. "Is there anything you would like us to know/add?"

Value the Individual

- Ask the child/youth/family first.
“What is your/her grade?” “How do you pronounce your/her name?”
- “Are the services the right ones for you/your family?”
- “Is there anything you would like us to know?”

Plan for Triggers – For Everyone

- Trauma
- Stress
- Lack of Control
- Authority

Plan for Triggers – Child/Youth/Parents

- Tone
- Relationship
- Strength-based/Encouraging
- Be specific when you ask questions
- Be direct and compassionate

Triggers -

- “parent progress”/review of ‘problems’
- Concurrent planning
- Foster parents
- Non-verbals

Plan for Triggers - Yours

- Understanding helps you deal
- Important to remove negative judgement - court staff, partners and team included

Examples

- Tattoos
- "Uneducated" people
- "Bad" parents
- "Addicts"
- Domestic Violence

Parallel Process

Ask yourselves what *you* need to feel safe, empowered, and valued.

- Be well nourished.
- Know what to expect.
- Have time to prep emotionally .
- Have time to practice - review - ask questions.

...You're well on your way...

Trauma-Informed Court Systems Checklist**

- Training & Competency
- Planning & Preparation
- Court Policies & Practices
- Continuous Learning & Accountability

Trauma-Informed Court Systems Checklist

Training & Competency - All Court Staff and Interested Parties:

- Receive training about trauma and trauma-informed care.
- Can give examples and other evidence showing they understand and can apply trauma-informed principles to each aspect of the court process.
- Participate in debriefing and review sessions that consistently incorporate questions and assessments of trauma-informed practice.

Trauma-Informed Court Systems Checklist

Planning & Preparation

- Scheduling considerations include child/youth/parent(s) and support providers
- Notices and information provided in parent's preferred language
- Follow-Up calls to invite parents to attend discretionary processes (with support provider if available)
- Any specific agenda items or topics to be covered given in advance as possible

Trauma-Informed Court Systems Checklist

Court Policies & Practices

- Seating is arranged to mitigate intimidation (e.g. professionals not all on one side of the table/room)
- Judge & other court staff are prepared and grounded
- Review meeting agenda/purpose & process
- Information provided in multiple formats

Trauma-Informed Court Systems Checklist

Court Policies & Practices (continued)

- Space for silence (language, overwhelm)
- Questions for parent(s) are authentic - not rhetorical; make space for answers.
- Include time for questions and concerns from parent(s) and support providers
- Ensure strengths are reflected; use appreciative language

Trauma-Informed Court Systems Checklist

Court Policies & Practices (continued)

- Closure process -
 - Summary of what was covered (thoughtful) including any next steps to be followed (verbally and in writing if possible)
 - Closing statement
 - Specific ways for parent(s) to stay or be in touch

Trauma-Informed Court Systems Checklist

Continuous Learning & Accountability

- Multi-disciplinary oversight
- Court/partners - debrief and review
- Annual process and outcomes review
 - Case review
 - Written surveys (parents, partners, staff)
 - Focus groups (parents, partners)
- Documentation
 - Findings and recommendations
 - Continuous Improvement Plan

The Hope!

- When survivors said they had been listened to with compassion they were 2.9 times more likely to report being mostly or completely healed.
- When survivors believed that people understood the impact of trauma on their lives they were 2.2 times more likely to report being mostly or completely healed.
- When survivors believed that people knew how to help them heal they were 2.3 times more likely to report being mostly or completely healed.

References

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