Transformative Strategies to Enhance Our Work with Justice-Involved Females

International Community Corrections Association Boston: November 8-10, 2015

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What would corrections look like…

This Presentation

• Explore the importance of trauma-informed care and a communication model known as Creating Regulation and Resilience.
• Describe the CR/2 model.
• Introduce the skills and strategies associated with both phases of CR/2.
• Provide opportunities for demonstration and skill practice.
Understanding Trauma

• Trauma not identified as a causal or major contributing factor for criminal behavior.
• Prevalence data for women is extraordinarily high (particularly for reports of childhood victimization)
• Studies vary – high as 60% for probation samples; 90% in facility settings

Trauma

Refers to an EVENT that results in a REACTION or RESPONSE that can range from intense fear, helplessness, or horror.
- Briere & Scott, 2006

Includes naturally occurring events and those we create...

Adverse Childhood Events Study

Collaborative research between Centers for Disease Control and Prevention in Atlanta, GA, and Kaiser Permanente in San Diego, CA.
• Over 17,000 Kaiser patients participating in routine health screening volunteered to participate
• Data continues to be analyzed: More than 50 scientific articles and 100 conferences
• Reveals staggering proof of the health, social, and economic risks that result from childhood trauma.
Factors Explored

**Abuse:**
- Emotional abuse
- Physical abuse
- Sexual abuse

**Neglect:**
- Emotional neglect
- Physical neglect

**Household Dysfunction**
- Mother treated violently
- Household substance abuse
- Household mental illness
- Parental separation or divorce
- Incarcerated Household Member

As the Number of ACE's Increase

- The risk of medical, economic, social and behavioral issues also increases.
- Women 50% more likely to have a score higher than 5 than men.
- Messina & Grella (2012) women in prison –average score of 6 – 10

What does early trauma predict?

N = 1,206

<table>
<thead>
<tr>
<th>Predictor</th>
<th>Correlation</th>
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<tbody>
<tr>
<td>Mental health issues</td>
<td>( r = .31^{***} )</td>
</tr>
<tr>
<td>Poor stability (e.g., housing, financial issues, etc.)</td>
<td>( r = .29^{***} )</td>
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<tr>
<td>Family conflict</td>
<td>( r = .21^{***} )</td>
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<tr>
<td>Substance abuse</td>
<td>( r = .19^{***} )</td>
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<tr>
<td>Involvement with antisocial peers</td>
<td>( r = .17^{***} )</td>
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\*\*\* p < .001, \* p < .05
Another Critical Finding...

Personal childhood solutions to deal with early adverse experiences – seem to play a survival function

Engaging in drinking, drug-use self-harm behavior...

However, these behaviors have longstanding negative consequences in adulthood...

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Trauma-Informed Universal Precautions

- All women should be treated with RESPECT, humanity and dignity.
- Knowledge about trauma and the guiding principles should be integrated into all policies, procedures, and practices.
Principles of Trauma-Informed Care

- **Safety** (respectful always, provide explanations, de-escalation policies)
- **Trust** (clarify rules, roles, responsibilities, consistency, accountability)
- **Choice** (give her choices whenever possible; options limited but little things pick appointment time or day of visit, etc.)
- **Collaboration** (give her autonomy and decision-making; she is in control of what will happened)
- **Empowerment** (strengths based; What do you need to be successful?)
  - Principles of Trauma-informed Care, Harris & Fallot, 2006
  - Adults Surviving Child Abuse (ASCA)

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Dilemma: Translating the Model to Practice

I am not going to show her respect when she:

- Is verbally abusive
- Engaging in self-harm behavior
- Noncompliant
- Oppositional...

We need to build staff competence so they can manage complex, difficult behaviors in the moment.

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Core Associates & Orbis Partners Inc.
The CR/2 Model: Creating Regulation and Resilience

Integration of EBP and emerging research in two areas:
- Brain science and trauma
- Resilience
We Need the Fast Track

We Need the Slow Track

Trauma-Influenced Response

- Individuals may struggle with or are unable to return to rest and relaxation.
- The limbic system stays on stuck on “high” alert and is chronically activated.
- Stress hormones are not broken down and become toxic to the brain.
- Impacts ability to learn and remember new things.
- Often the individual is easily startled, has trouble reading social cues, has difficulty sleeping, and tends to avoid situations that increase stress.
For survivors, fear can dominate.

The Trauma-influenced Stress Response

Everything is a Snake in the Sand

Traumatized people chronically feel unsafe inside their bodies. The past is alive in the form of gnawing interior discomfort. Their bodies are constantly bombarded by visceral warning signs...

-Bessel van der Kolk (2005)
Unconscious Responses: Instinct and Survival Mode

- Hyper-mobilized, or constantly scanning for danger
- Hypo-mobilized, or withdrawing and shutting down
- Vacillate between hyper- and hypo-mobilized

* Many of the women we work with are functioning in one of these three states because their past experiences have taught them that doing so will keep them safe.

Traumatic Event!

Hyper-activity
Hyper vigilant
Hostile
Agitated
Panic
Rage

Stuck on “High”
Hyper-arousal

Stuck on “Low”
Hypo-arousal

Depression
Disconnection
Exhaustion
Fatigue
Numbness

Normal Range
Window of Tolerance

Resilience
Why We Should Remain Optimistic

• Despite conventional wisdom that says trauma will and must have a powerful, devastating, and lasting impact on our life for the most part the opposite is true.

• One of the most commonly observed outcome following exposure to a traumatic event is RESILIENCE.
  - Bonanno (2004)

Resilience

• Resilience is the ability of an individual to adjust and thrive after exposure to a highly disruptive event or events.

• It does not mean that life’s major hardships are not difficult and upsetting but rather they are surmountable.

  We confuse events with the people who experience them. Never underestimate the resilience of people who have experienced trauma… if you want to build resilience don’t go after the trauma but the imprint it has left.

More GOOD News

Neurogenesis and neuroplasticity

• We can teach an old dog new tricks.

• Brain can continue to develop new neural pathways and this occurs when we engage in new behaviors
The CR/2 Model: Creating Regulation and Resilience

A **communication model** for correctional professionals.

Serves as a **bridge** between theory, research and day-to-day work

Overview of the CR/2 Model: **Core Beliefs**

- Innovations in the neuroscience and resilience research have practical implications.
- Each of the women we work has existing strengths that can be mobilized.
- The way we communicate and work with women directly impacts outcomes.
- To achieve positive results it is important that we feel safe, that we are regulated, that we have sufficient resilience and that we are supported in our work.
The CR/2 Model

**Phase I:**
**Create Regulation**
Building a sense of calm and balance

Hear
Hold on
Explicit
Acknowledgment
Review

**Phase II:**
**Create Resilience**
Preparing to engage in effective action

Repar
Reflect
Explore
Plan
Firm
Individual
Review

Overview of the CR/2 Model:
**The Importance of Empathy**

Empathy is the experience of understanding another person’s situation from their perspective.

Requires that we are open to listen and understand what she is trying to convey.

Remaining empathic can be extremely challenging.
- Requires us to suspend any preconceived attitudes, values and beliefs that we might hold

Research consistently shows that expressions of empathy toward others contributes to feelings of safety and trust.

Overview of the CR/2 Model:
**An Integrated Approach**

Accountability
Support
Overview of the CR/2 Model: Defining of Regulation and Resilience

When we are regulated we are able to:

- Tolerate difficult thoughts, feelings, and sensations
- Connect with self and others
- Engage in effective action

When we are resilient we are able to:

- Access and utilize our skills and strengths
- Cope with day-to-day stresses and burdens
- Explore solutions to problems
- Set and achieve goals

The CR/2 Model: Phase I

Phase I: Create Regulation

Hold on
- Notice how we are feeling and thinking
- Use the Three R's to self-regulate

Anticipate
- Consider the world from her perspective
- Anticipate individual circumstances, situations or challenges she might be facing

Outcomes
- We feel regulated, calm and in control
- We are able to consider a variety of possibilities to explain her behavior

Phase II: Create Resilience

Reflect
- Explore individual review

CR/2

Anchor Skills and Strategies

Pause
- Notice how we are feeling and thinking
- Use the Three R's to self-regulate

Anticipate
- Consider the world from her perspective
- Anticipate individual circumstances, situations or challenges she might be facing

CR/2
The Three R’s

**Recognize**
- Notice
- Acknowledge

**Regulate**
- Breathe
- Orient
- Ground
- Create Calm

**Respond**
- Cultivate non-judgement
- Proceed with purpose

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**Elicit**

**Anchor Skills and Strategies**
Open-ended questions
- Understand the context, motivation and intent of the behavior
- Adopt a curious, empathic and interested style
- Avoid “yes” or “no” questions and “open up” the conversation
  - Where were you?
  - Who else was there?
  - Tell me what’s happening…
  - Describe what it is like…
  - Tell me a bit more about that…
  - What were you doing right before?

**Outcomes**
- We have a clearer understanding of the context in which the behavior occurred (feelings, thoughts, events contributing to the problem or situation)

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**Acknowledge**

**Anchor Skills and Strategies**
Reflective Listening
- Convey that we have heard what she is saying and understand the situation
- Give her the opportunity to further clarify concerns
- Send message that we respect her position and are listening

**Outcomes**
- We are able to accurately reflect her feelings and thoughts about the problem
Anchor Skills and Strategies
*Serves as a bridge between Phases
Summarize
Support autonomy
• Review major concerns
• Offer refinements, clarifications
• Invite her to proceed to the next Phase

Outcomes
• We can summarize the major concern or problem
• We respect her decision to move forward

The CR/2 Model:
Two Phases of Communication

Valerie

CR/2
**Reflect**

**Anchor Skills and Strategies**
- Acknowledge her interests
  - Positions vs interests
- Clarify agency parameters and professional interests
  - Policies, guidelines, rules that guide your practice

**Outcomes**
- We can clearly reflect her interests
- We have clarified agency parameters and professional interests

**CR/2**

**Explore**

**Skills and Strategies**
- Collaborative Problem Solving
  - Invite her to participate
  - Restate the challenge as an opportunity or a “How To”
  - Generate options
  - Evaluate the options and pick the best one

**Outcomes**
- We invite her to participate in a collaborative problem-solving process
- We work with her to generate options
- We work with her to evaluate options & pick the best one

**CR/2**

**Plan**

**Skills and Strategies**
- Setting Goals and Action Steps
  - Restate the option as a goal
  - Explore potential barriers
  - Identify action steps

**Outcomes**
- We work with her to transform options into goals
- We work with her to explore potential barriers
- We work with her to generate action steps

**CR/2**
Affirm Individual Strengths

Skills and Strategies
• Reinforce her strengths and efforts
• Focus on specific behaviors
• Be genuine and honest
• Avoid using the “I” word as it implies judgment
• Focus on personal strengths that are connected to her interests and goals and that will help her move forward
• At times her strengths may be embedded in behaviors typically classified as negative and maladaptive. Affirm her desire to survive without condoning the harmful behaviors

Outcomes
• We affirm and reinforce strengths and efforts to use adaptive strategies and skills.

Review

Skills and Strategies
Summarize
• Observation of her behavior at the beginning of the conversation
• Major concern explored and then identified.
• Goal statement and action steps.
• Strengths and efforts demonstrated throughout the conversation and invite her to reflect on that as well.

Strengthen commitment
• Invite change talk

Outcomes
• We affirm and reinforce strengths and efforts to use adaptive strategies and skills.
• We summarize the highlights of the CR/2 communication, major issues or concerns, goals, and strengths.
• We encourage efforts to go forward by affirming commitments
• We follow-up when possible

Valerie
Applications of CR/2

CR/2 can be used:

• Within any time frame
• For brief interventions and longer conversations with her
• With individuals and groups (small or large)
• Proactively (e.g., to prepare for a court appearance)
• To respond to disclosures of trauma

When Trauma-Informed

Focus of Research
Reductions in:
• Inmate-on-staff assaults
• Inmate-on-inmate assaults and fights
• Segregation placements
• Disciplinary reports
• Suicide attempts
• Compliance with court order
• Stable housing, employment, etc.
• Positive drug screens

Impacts of CR/2:
Staff Feedback

CR/2 helps you to support women and hold them accountable. We can do both.

CR/2...helps me deal with my own stresses on the job. If I can deal with the stress, I can do a better job.

The CR/2 training made me realize that what I say and how I say it makes a difference. What I say can cause more trauma or not.

I love the flexibility of CR/2. It can be used in a few seconds or a few minutes; you can use it in any situation... home... anywhere.

I love this; it can get a variety of colleagues on the same page; it's succinct. We all should use it and should support each other in using it.
Unsolicited Advice

- Provide all staff with training in trauma-informed care
- Acknowledge the way we communicate and work with women directly impacts outcomes
- Innovations in the neuroscience and resilience research have practical implications that can advance our work.
- We staff need to feel safe so it is important that we are regulated, that we have sufficient resilience and that we are supported in our work.
- Phase 1 before Phase 2...Don’t try to fix or move too quickly.

Resources

National Resource Center on Justice Involved Women
www.cjinvolvedwomen.org
- Technical Assistance

National Institute of Corrections
mbuell@bop.gov
- Technical Assistance

Training in Trauma Informed Care
Substance Abuse and Mental Health Services Administration (SAMHSA)
National Center for Trauma-Informed Care
NCTIC@NASMHPD.org
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