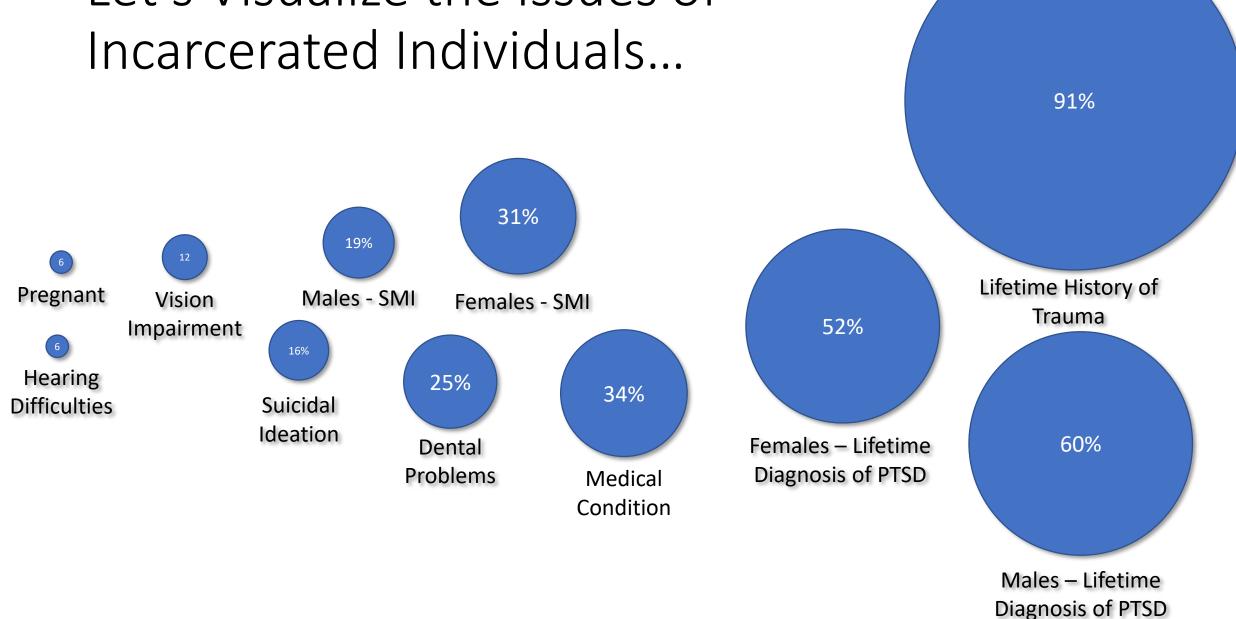


Why is Traumatic Victimization Important?

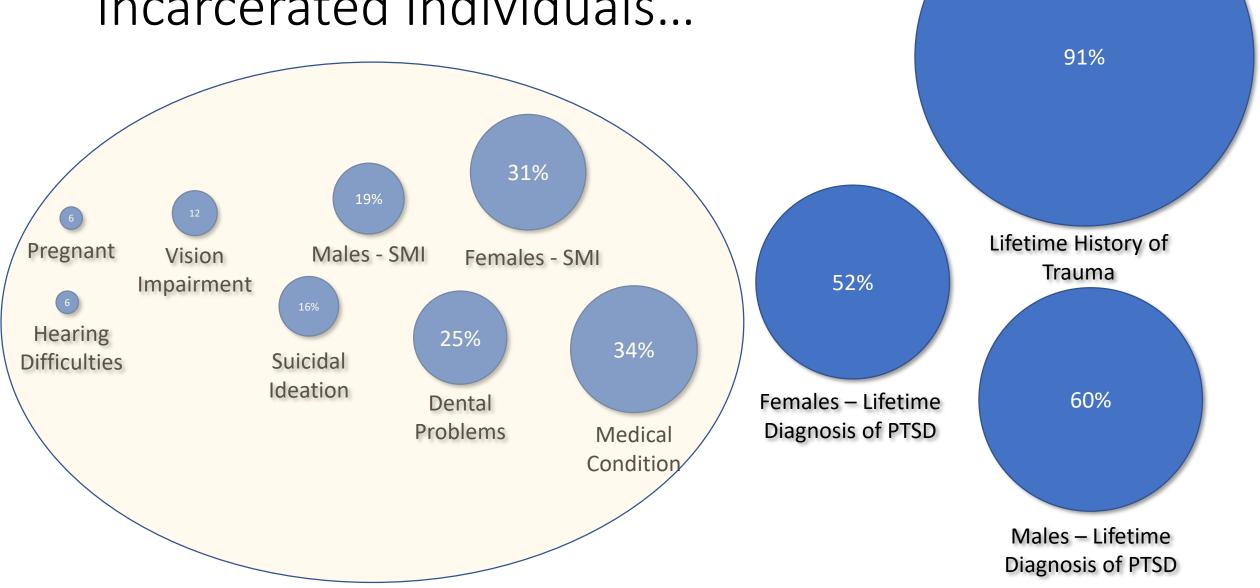
Dr. Justin Ramsdell – Assistant Professor of Psychology, George Mason University

A Quick Review of Previous Material...

Let's Visualize the Issues of



Let's Visualize the Issues of Incarcerated Individuals...



PTSD Diagnostic Criteria

Exposure to actual or threatened death, serious injury, or sexual violence leading to the development of the following that persist for more than 1 month after the event:

- Intrusive symptoms
- Avoidance of stimuli
- Negative changes in thought or mood
- Marked changes in arousal or reactivity

PTSD Diagnostic Criteria

Exposure to actual or threatened death, serious injury, or sexual violence leading to the development of the following that must persist for more than one month following the event

Intrusive Symptoms	Avoidance of Stimuli	Negative Changes in Thought or Mood	Changes in Arousal or Reactivity
Must have 1	Must have 1	Must have at least 2	Must have at least 2
Recurrent, distressing and involuntary memories	Efforts to avoid distressing thoughts, feelings, or memories associated with the event	Inability to remember important aspects of the event	Irritable behaviors and/or angry outbursts
Recurrent, distressing dreams	Efforts to avoid extrenal reminders of the event that arouse distressing feelings, thoughts, or memories	Persistent and exaggerated negative beliefs or expectations about oneself, others, or the world	Reckless or self-destructive behavior
Psychological distress at internal or external reminders		Persistent, distorted cognitions about the cause or consequences of th eevent leading he individual to blame themselves	Hypervigilance
Feeling as though the evet is happening again		Persistent negative emotional state (guilt shame, anger, etc.)	Exaggerated startle response
		Diminished interest or participation in significant activities	Problems with concentration
		Feelings of detachment from others	Sleep disturbances
		Persistent inability to expereince positive emotions	

Risk Factors for the Development of PTSD

Prior Trauma

Trauma Severity

Severity of Injury

Life Circumstances Pretrauma

Negative Attributional Style

Personal or Family History of Mental Illness



Bringing ideas together...

Changes accompanying PTSD: Possible Arrest Distressing and intrusive **Traumatic event:** Participation in thoughts Death, serious injury, **Criminal Activity** Avoidance of all reminders or sexual assault Issues with sleep, Perceived as concentration, irritability, selfuncontrollable destructive behavior, and Challenges personal hypervigilance beliefs or self-concepts **Leading to:** Fear, horror, guilt, and shame Substance addiction Behavioral issues in children Lack of social support Increased future risk of PTSD Alienation As a child As an adult Need for protection Individual **PTSD Diagnosis Anxiety** reaction to Genetic Risk **PTSD Symptoms** Buffer **Factors Factors** traumatic Use Increased future risk of PTSD No Symptoms event

The Link...

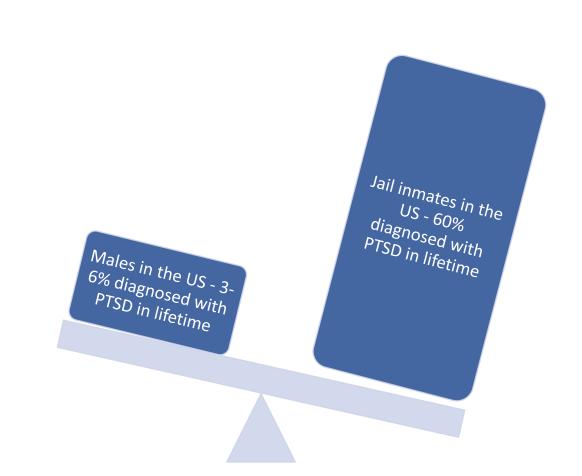
One study found that teenage African-American males who had issues with:

- Substance abuse
- Truancy
- Had poor academic performance
- Engaged in risky behavior Were most likely of any other group in the study to be...

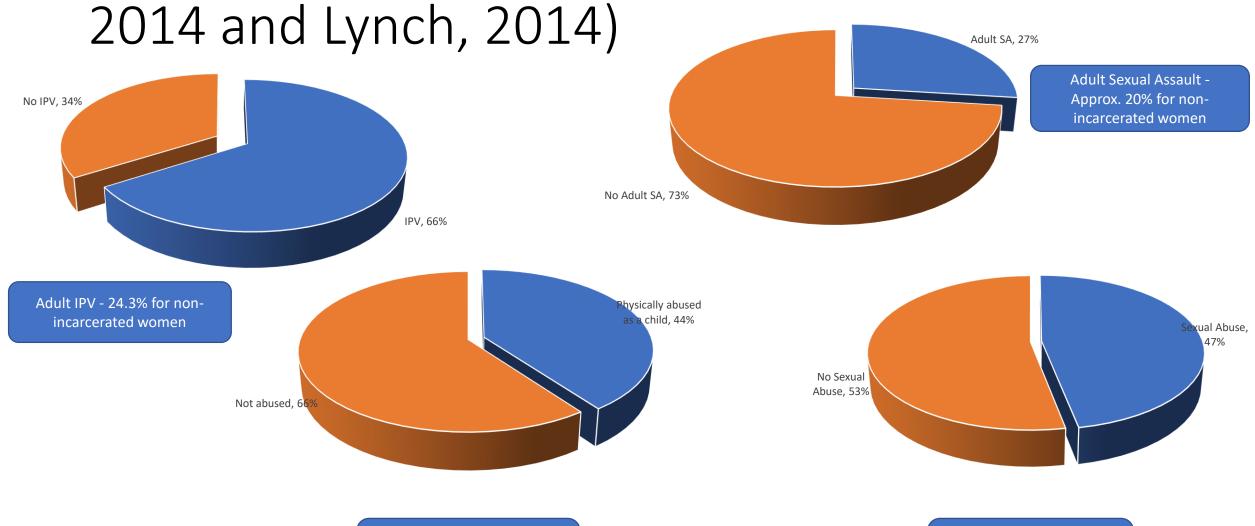
Victims

But it doesn't stop in childhood... What about incarcerated men?

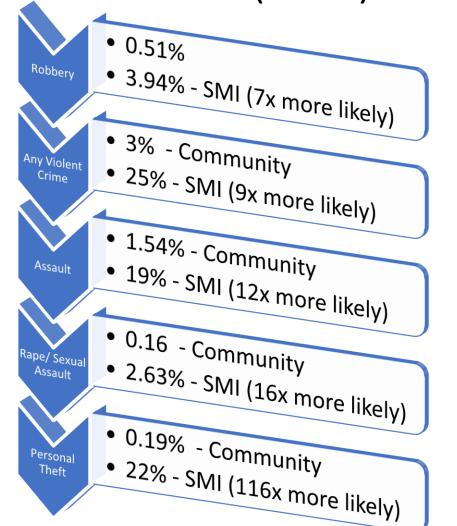
- The inmates in the study (Wolff, 2014) were more likely to report trauma that was sudden, violent, interpersonal, and life threatening.
- Inmates reported twice the rates of assaultive violence as community samples.
- 87% reported the serious injury of death of someone close.
- 71% experienced some form of childhood trauma.
- 68% had seen a dead body.
- 64% reported being attacked with a weapon.
- Lifetime prevalence of rape for the inmate sample was 15%... Compared to 1-3% in community samples.
- And the resulting rates of PTSD as a result of victimization are 10-16x higher.



What About Incarcerated Women? (Tripodi,



Physically Abused as a Child -Approx. 11% for nonincarcerated women Sexually Abused as a Child -Approx. 25% for nonincarcerated women Inmates diagnosed with severe mental illnesses (SMI)?



Teplin (et. al., 2005) studied the instances of victimization in over 1,000 jail inmates diagnosed with severe mental illnesses (SMI).

Inmates with SMI also had higher rates of victimization than general population jail inmates.

They compared the rates of victimization in individuals with SMIs to that of the community using data from the National Crime Victimization Survey in the 12 months prior to incarceration.

It's No Wonder...

That the rates of PTSD are so high in jail... it is also not a coincidence that the next largest group of inmates in jail are those who are addicted to substances.

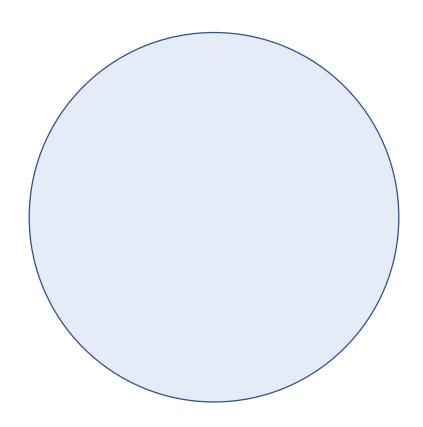
91% - History of trauma

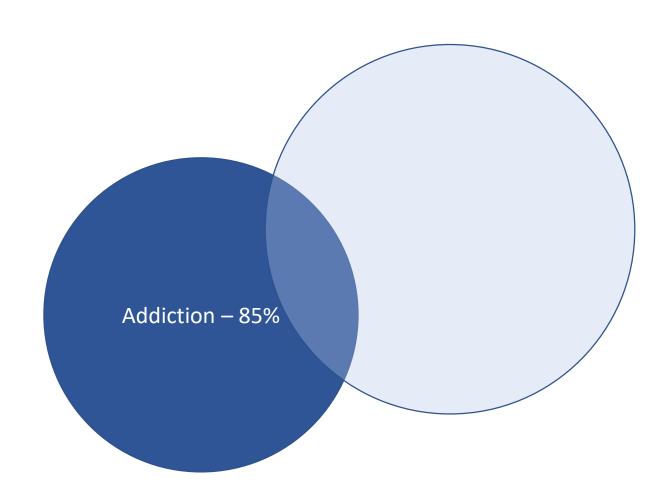
85% - Issues related to substance addiction

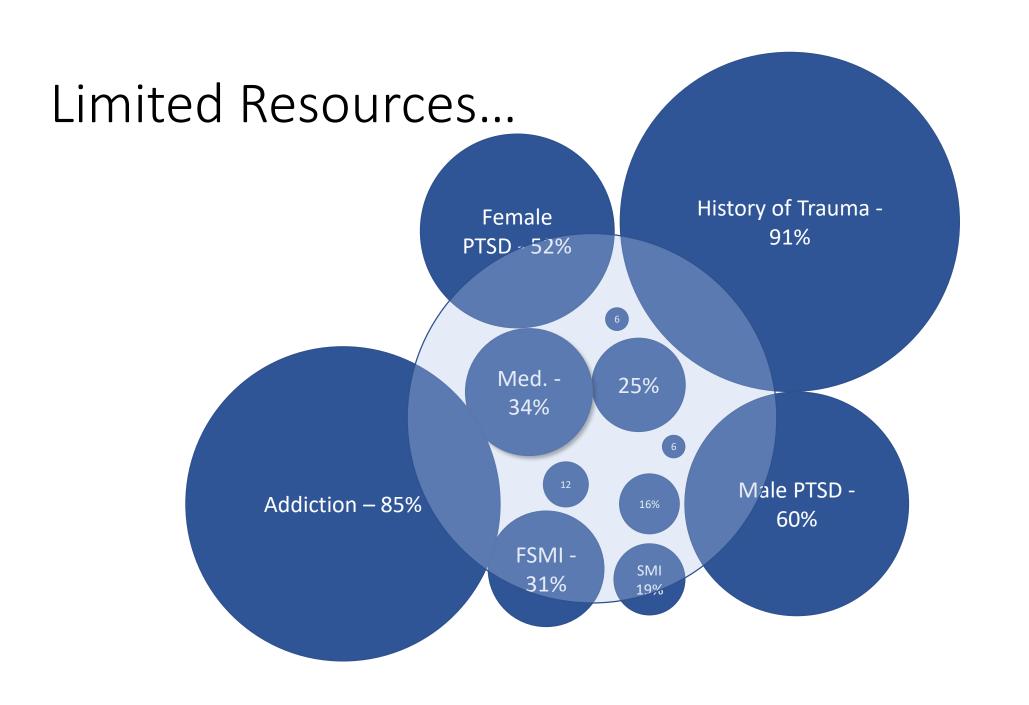
I know...

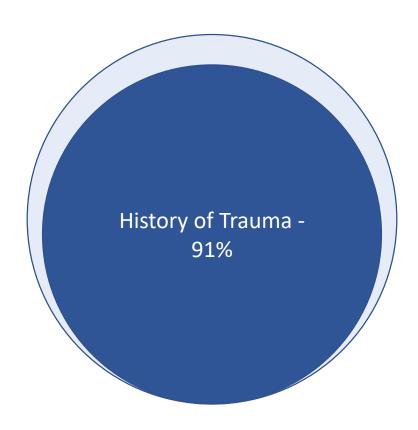
You take into consideration every resource you have available to help address the issues that fall within the limits of your job duties...

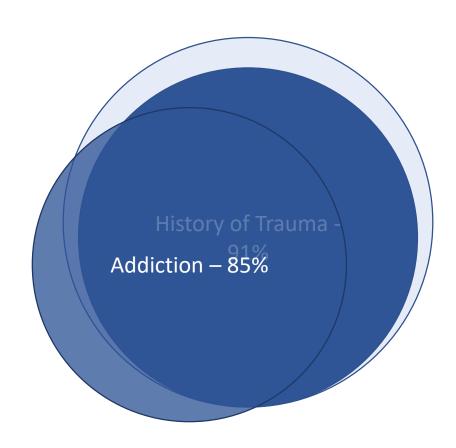
... And you have limited resources.

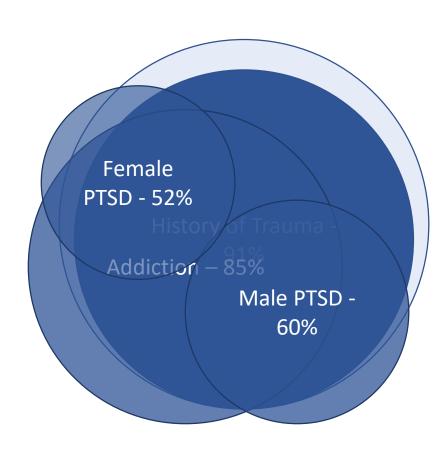


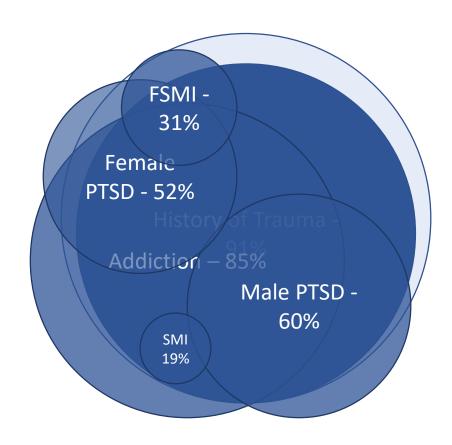


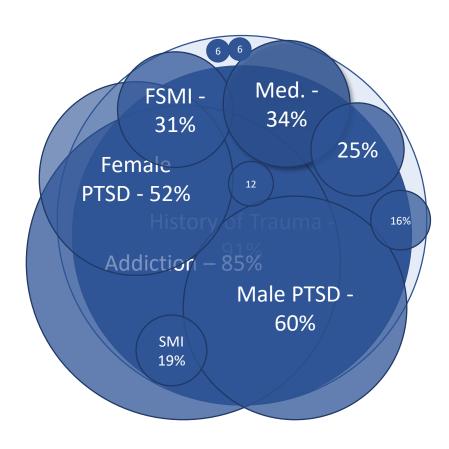


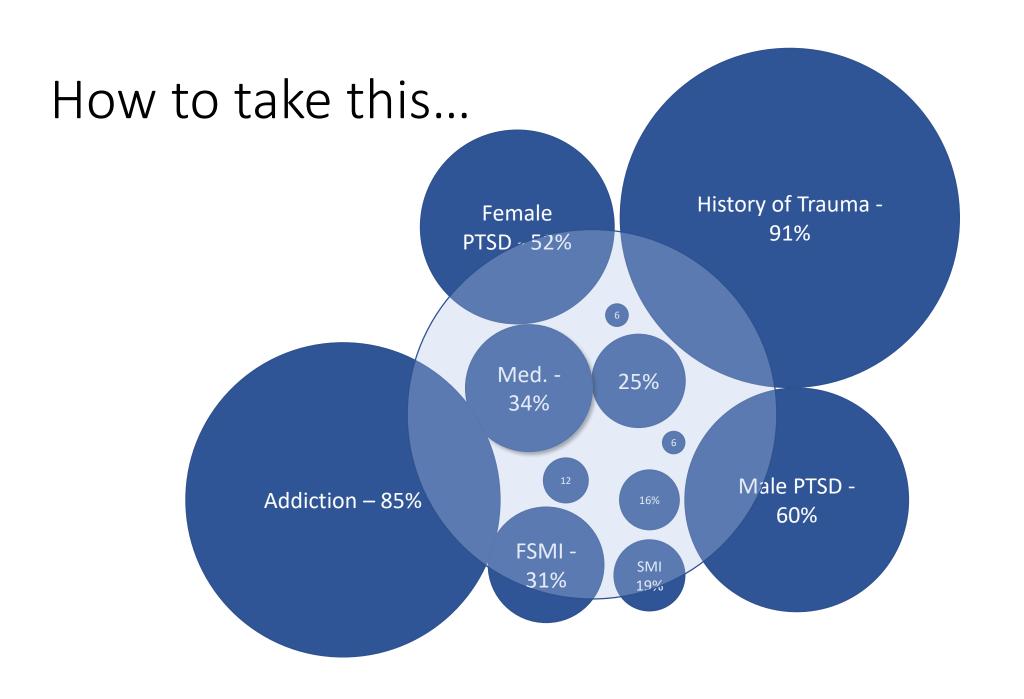




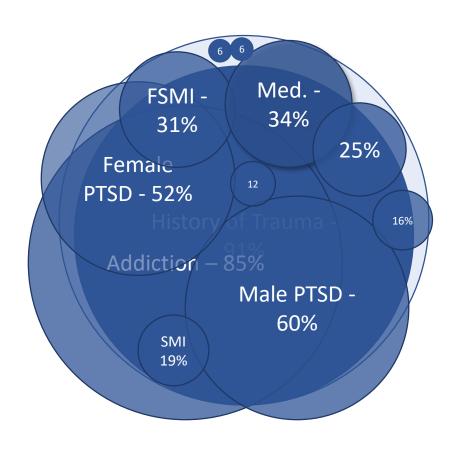








...And make it look more like this.



A Classroom Metaphor...

Goal – Have the highest average classroom grade.

- Imagine our classroom has 21 students
 - 7 have grades above 87 (high-performing)
 - 7 have grade between 75-86 (average)
 - 7 have grades between 50-74 (low-performing)
- We only have one teacher and a finite amount of time in the school day.
- If we want to increase the class average the most given our limited resources, how should the teacher divide his time between the groups?





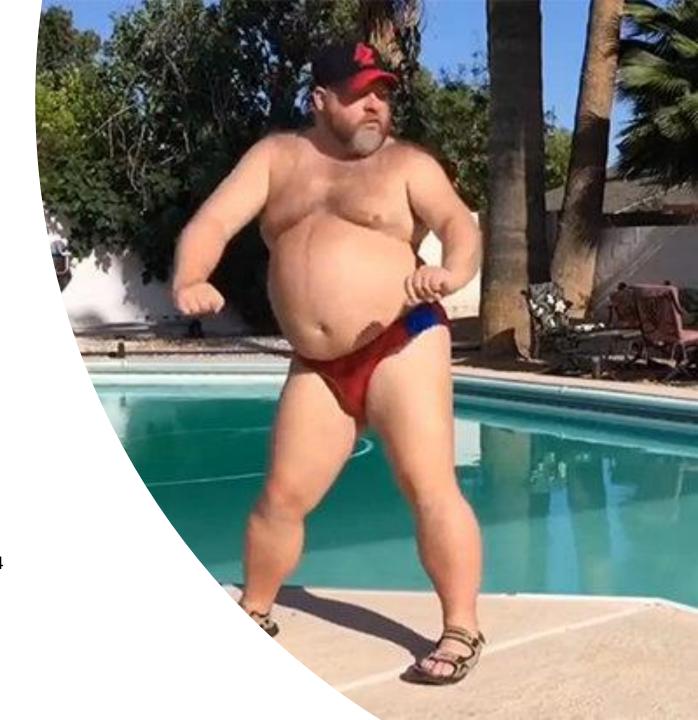
Should it be the highperformers? Think of it this way... This is the progression of Michael Phelp's 400 Intermediate Medly world record times:

- 2002 4:11.09
- 2003 4:10.73
- 2003 4:09.09
- 2004 4:08.41
- 2004 4:08.26
- 2007 4:06.22
- 2008 4:05.25
- 2008 4:03.84
- For the record... That is a 2.9% improvement.
- Now think of the amount of resources Michael Phelps had available and used for that tiny increase in performce.

What about the poor performers?

Now think of yourself (assuming you are not an Olympic level swimmer)...

- I'm guessing we would all swim the 400 IM in a time between 8-24 minutes.
- With a month of practice and a good coach, we could make some serious changes in a short period of time.
- Now assume you and Michael Phelps are both on the same team... But the championship is decided by the team's average time in the 400 IM.
- A month of pratice time for me... and my time drops by 4 mintues a month with Michael Phelps... His time drops 0.04 seconds. Which is better for our average?
- You can ignore Michael Phelps...



So we focus on those who need the help the most... The poor performers.

If we can improve the performance of those individuals with grades between 50-75, we get the most "bang for our buck" in terms of resources and meeting our overarching goal.

So what does this mean for the criminal justice system?



- This is used solely for the purpose of deciding where to use limited resources (typically during the re-entry phase) in order to decrease recidivism.
- In a perfect world... we would have more resources. But we don't.
- Involves three stages... that are not surprisingly named
 - Risk
 - Needs
 - Responsivity



- First step is to identify "high risk" offenders.
- "High risk" refers to the likelihood that the individual will reoffend again in any way... not just a violent crime.
- Static data points
 - Age at first offense, gender, upbringing, etc.
- Dynamic data points
 - Procriminal attitudes
 - Antisocial associates
 - Substance abuse
 - Poor use of leisure time
 - Problematic marital or family circumstances
 - Problematic circumstances at school or work
 - Likelihood of external monitoring or support
 - Likelihood of long-term incarceration



- In short... what needs does the individual have that will help keep them from offending again?
- Intervention needs to target "criminogenic factors" – these are needs that, when addressed, decrease the individuals likelihood of reoffending
- These need to address:
 - Impulsivity
 - Substance abuse
 - Active symptoms of mental illness
 - Feasibility of plans for the future
 - Stress
 - Personal support
 - Negative attitudes
 - Compliance with remediation



- So we have determined who is at the highest risk of reoffending and determined what his or her needs are...
- Responsivity refers to the nature of the intervention... It needs to be tailored to fit the needs of the individual and his or her capacity to participate in the intervention.
- This means we must take into consideration:
 - Cognitive ability
 - Strengths
 - Personality
 - Culture
 - Readiness to change
 - Etc.

Does it work?

This approach has been shown to work for individuals regardless of age, gender, race, mental illness, etc.

One study found that placing "high risk" offenders in these intensive community corrections programs decreased recidivism while placing "low risk" offenders in the same programs actually increased recidivism.

Another study found that using the Level of Service/Case Management Inventory (LS/CMI; Andrews, Bonta, & Wormith, 2004) resulted in strong predictions of time to recidivism with low risk offenders taking longer to reoffend than high risk offenders.

Does it work?

An analysis of over 80 studies (Zinger, et al.) on the RNR model found that interventions that used RNR principles had larger effect sizes whereas interventions associated with punishment had negative effect sizes.

In a meta-analysis of recidivism studies with female offenders, Dowden and Andrews (1999) found that any intervention program decreased recidivism, but RNR programs had the greatest reductions in recidivism.

Greater reductions in recidivism have been found with sex offenders, violent offenders, and juveniles when the intervention adhered to RNR principles.



So what if I told you that you could have a 5-18% reduction in recidivism by using the RNR model?

But how does this relate to trauma and traumatic victimization? What if the decreases in recidivism could be even larger without using more resources?

Risk

- Procriminal attitudes
- Antisocial associates
- Substance abuse
- Poor use of leisure time
- Problematic marital or family circumstances
- Problematic circumstances at school or work
- Likelihood of external monitoring or support
- Likelihood of longterm incarceration

Needs

Impulsivity

- Substance abuse
- Active symptoms of mental illness
- Feasibility of plans for the future
- Stress
- Personal support
- Negative attitudes
- Compliance with remediation

Responsivity

Risk

- Procriminal attitudes
- Antisocial associates
- Substance abuse
- Poor use of leisure time
- Problematic marital or family circumstances
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- Likelihood of external monitoring or support

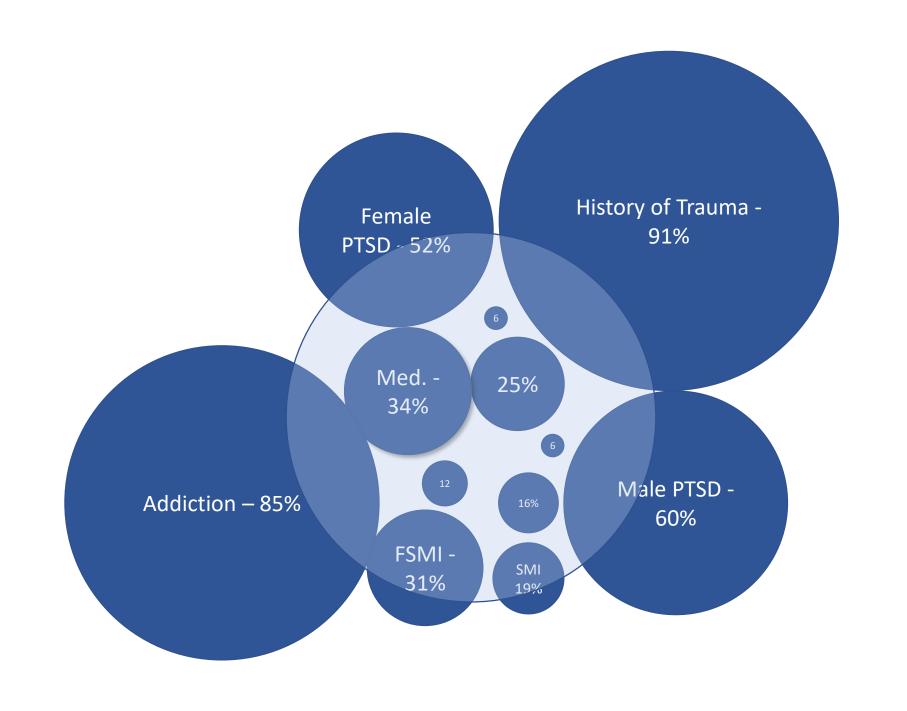
Needs

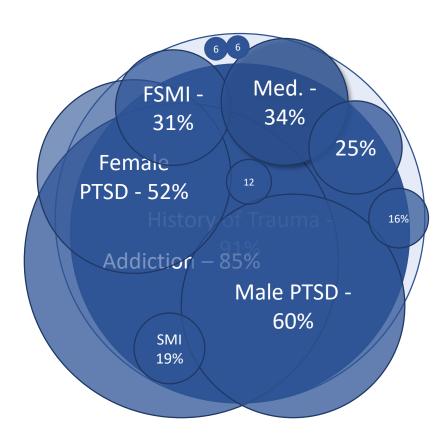
- Impulsivity
- Substance abuse
- Active symptoms of mental illness
- Feasibility of plans for the future
- Stress
- Personal support
- Negative attitudes
- Compliance with remediation

Responsivity

The Nature of the Intervention

A focus on trauma and traumatic victimization





Questions?

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