Trauma Informed Practices for Justice Involved Individuals

The purpose of trauma-informed practices in corrections is to create a safe, supportive, and effective environment that recognizes and is responsive to the impact of trauma on justice-involved individuals. By understanding how trauma shapes behavior, decision-making, and engagement, corrections professionals can respond in ways that promote positive change and accountability while reducing harm. Trauma-informed practices enhance trust, improve compliance, and strengthen rehabilitation by prioritizing compassion, safety, and empowerment. Ultimately, this approach supports healthier outcomes for individuals, families, and communities while advancing the core mission of community supervision.

1. **Foundational Principles**
    - **Safety –** Create physical, emotional, and psychological safety in every interaction. Corrections professionals should use predictable routines, respectful communication, and environments that reduce stress and fear.
    - **Trustworthiness and Transparency** – Clearly and thoroughly explain decisions, expectations, and processes. Transparency helps individuals understand what's happening and reduces anxiety often triggered by uncertainty or authority.
    - **Collaboration** – Promote shared decision-making whenever appropriate. Provide space for regular feedback sessions and loops to gather concerns and input. Recognize that positive outcomes are more likely when individuals feel involved and their opinions valued rather than ignored.
    - **Empowerment and Choice** – Support autonomy by offering choices and encouraging self-advocacy. Highlight strengths instead of deficits to foster engagement and build self-efficacy.
    - **Understanding Trauma's Impact on Behavior** – Recognize that trauma affects cognition, emotional regulation, and responses to stress. Address challenging behaviors with curiosity, not judgment, to better understand their origins.
    - **Cultural Humility and Responsiveness** – Acknowledge the role of culture, identity, and systemic trauma. Approach individuals with respect, openness, and awareness of how historical and environmental factors influence their lived experience.
    - **Resilience and Recovery Focus** – Emphasize growth and healing. Reinforce progress, support coping skills, and promote access to resources that strengthen long-term well-being.
    - **Minimizing Re-Traumatization** – Avoid practices that may replicate past trauma, such as overly harsh communication, unpredictable consequences, or dismissing emotional responses.

- **Professional Health** – Recognize secondary trauma and stress experienced by correctional staff. Promote supportive supervision, self-care, and organizational wellness so staff can consistently provide compassionate service.

2. Assessment and Screening

- Improve assessment practices to gain a better understanding of trauma impacts for individual clients.
    - Use of Motivational Interviewing skills when conducting assessments, intake interviews, Pre-Sentence Investigation interviews.
    - When conducting commonly used probation assessments, demonstrate awareness of trauma factors when screening individuals for caseload placements and development of case plans.
- Areas/factors to focus on when completing assessments and screening include, but are not limited to, the following:
    - Adult/childhood trauma history, relational entrapment (co-dependency/abusive partnerships) parental stress, mental health (depression/anxiety), substance abuse, and housing instability.
    - Strengths/Assets (self-efficacy, educational achievements, and health family support networks) that can be deliberately woven into the case plan to mitigate identified risk factors.
    - Internal drivers that can provide staff with a clearer roadmap for dynamic risks.

3. Supervision Strategies

- Create collaborative case planning which prioritizes goal setting around the client's personal motivations, strengths, and individual responsivity factors.
- Prioritize positive reinforcement and behavior-modification incentives. Encourage staff to recognize the impact of more punitive sanctions.
- Allow for predictable and less intrusive contacts. Staff should attempt to accommodate school or work schedules, childcare availability, important family obligations, and transportation challenges or barriers whenever possible.
- Recognize that a technical supervision violation may be a symptom of a crisis (lack of childcare, domestic escalation) rather than willful defiance. Responses to non-compliance should be proportionate and intended to positively influence behavior, considering individual client needs and responsivity factors.
- Ensure agency policies and practices support consistent messaging about how sanctions and incentives are utilized and their desired outcomes. Predictability reduces fear-based responses rooted in trauma.

- Client contacts are rooted in empathy while still setting boundaries. Whenever possible, clients are afforded autonomy in decision making.
- When possible, include and collaborate with community-based service providers when determining incentives and sanctions. With the approval of the client, share case plan goals.

4. Strength Based and Community Support Systems and Programming

Ensure programs and interventions focus on strengths and address substance use, trauma, and economic stability concurrently rather than treating them as isolated, fragmented conditions.

- Individuals should receive interventions and be referred to programs responsive to their individual needs and characteristics.
- Programs should be Evidence-Based, Trauma-Informed, Gender-Responsive, and Culturally Competent.
- Mental Health and Substance Use treatment should be integrated with trauma care.
- Develop and maintain holistic, wraparound services in a trauma-informed framework creating a coordinated support system that addresses the full range of a client's needs. This approach recognizes trauma impacts multiple areas of life and clients benefit from integrated collaborative care.
- Develop and maintain community/county department partnerships in regard to housing, healthcare, child services, social services, transportation, and vocation training alongside court ordered conditions.

5. Staff Development

- Carefully screen and recruit staff members who demonstrate high levels of empathy, strong interpersonal communication skills, an ability to incorporate accountability with compassion, and are skilled in working with complex behavioral dynamics.
- Direct supervision staff, leadership, and support personnel to complete comprehensive training:
    - Trauma-Informed Practices
    - Motivational Interviewing
    - Responsivity
    - Empathetic accountability
    - Transparent boundary-setting
    - Peer Coaching
    - Intimate Partner Violence (IPV)
    - Vicarious trauma

- Require annual refresher training on the above.
- When practical, partner with neighboring agencies to co-host training and/or share training opportunities.
- Create a shared online source for trauma resources and recorded training.
- Develop cross-agency relationships to exchange ideas and successful practices.
- Incorporate resource navigation into supervisor check-ins or staff meetings.
- Recognize staff who manage high-intensity or emotionally demanding cases may experience cumulative stress or secondary trauma. Creating structured relief or changing work tasks or case rotation options helps maintain staff well-being and sustain effective, compassionate service delivery.

6. Staff Wellbeing and Vicarious Trauma

Relational, trauma-informed supervision asks staff to absorb more of a client's distress than a purely compliance-monitoring approach requires. Without intentional support, this exposure erodes the model itself. Staff may drift back toward detached, authority-heavy supervision not by choice but as a self-protective response to unaddressed cumulative stress.

- Acknowledge and normalize vicarious trauma/secondary traumatic stress as an expected occupational exposure, not a personal shortcoming, and train staff to recognize its signs in themselves (cynicism, emotional numbing, dread before contacts).
- Establish regular case consultation/debrief conversations, where staff can process difficult cases or situations.
- Actively encourage use of employee assistance programs or clinical consultation resources.
- Train supervisors to recognize signs of vicarious trauma in their staff and offer support.
- Consider implementation of Peer Support Teams to supplement traditional employee assistance or clinical support services.

6. Environment & Operations

- Physical space (waiting rooms, offices) should be designed with safety and privacy in mind (visibility, child-friendly waiting areas).
- Develop office environments focused on reducing stress and triggers by using calming colors, comfortable textures, thoughtful lighting, and minimized noise. Small environmental changes such as natural light, soothing visuals, and organized, welcoming spaces can help individuals feel safer and more regulated in correctional settings.

7. Evaluation and Quality Improvement

- Supervisors regularly engage in case consultation and audit case plans to ensure staff are correctly applying and maintaining a trauma-informed, relational lens.
- Collect and assess agency data in the areas of revocation rates, type and response to technical violations, new offenses, use of incentives, case planning, targeted interventions, less restrictive alternatives to incarceration, and program completion rates.
- If able, move beyond recidivism-only metrics and track outcomes that reflect client progress and achievement of change goals, criminogenic needs: housing stability, family reunification, program participation, and employment.
- Monitor staff retention and conduct exit interviews to determine if an issue with resources related to vicarious/secondary trauma exists. Examples may include lack of debriefs, peer support issues, access to mental health providers, workload.

8. Policy and Organizational Practices

- Review agency policies, standard operating procedures, and mission statements to ensure they support trauma-informed practices.
- Educate and advocate for cross-agency and community collaboration of trauma-informed practices and policies, to better align efforts and improve support across all systems.
- Review hiring practices to reduce barriers and encourage diverse applicant pools.
- Include diverse interview panel members whenever possible.
- Incorporate cultural responsiveness expectations into job descriptions and interview questions.

References

Bradley, A. & Petrillo, M. (2022). *Working with trauma in adult probation* HM Inspectorate of Probation.

https://hmiprobation.justiceinspectorates.gov.uk/document/working-with-trauma-in-adult-probation/

McAnallen, A. & McGinnis E. (2024). *Trauma-informed practice and the criminal justice system: a systematic narrative review* Irish Probation Journal.

https://www.probation.ie/en/PB/Pages/WP24000044

Levenson S., Prescott D., & Willis G. (2021). *Trauma-informed treatment practices in criminal justice settings* Handbook of Issues in Criminal Justice Reform in the United States

https://doi.org/10.1007/978-3-030-77565-0_24

Branson C. (2023). *Trauma-informed practice for reentry providers* Corrections and Community Engagement Technical Assistance Center

https://www.researchgate.net/publication/382391837_Trauma-Informed_Practice_for_Reentry_Providers

Altheimer I. & Tobey A. (2024). *Trauma-informed care: effectiveness on recidivism* Rochester Institute of Technology-College of Liberal Arts: Center for Public Safety Initiatives

Trauma-informed approaches and programs (2026). SAMHSA

https://www.samhsa.gov/mental-health/trauma-violence/trauma-informed-approaches-programs

Briggs R., Epstein K., Menschner C. (2017, October 30). *Implementing trauma-informed care into organizational culture and practice* Center for Health Care Strategies

Lee R. (2022) *Trauma-informed approaches across the sequential intercept model* The Council of State Governments Justice Center

https://csgjusticecenter.org/publications/trauma-informed-approaches-across-the-sequential-intercept-model/

National Center on Substance Abuse and Child Welfare (2024). *Collaborative trauma-informed care tool*

https://ncsacw.acf.gov/topics/trauma-informed-care/trauma-toolkit-series/

National standards for community supervision (2024). America Probation and Parole Association

https://www.appa-net.org/eweb/dynamicpage.aspx?webcode=national-standards