Creating Trauma-Informed Care in Juvenile Secure Detention

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Justice-involved youth have elevated rates of psychiatric disorder

- Over 76% of youth in secure detention qualified for mental health diagnosis
- 28 - 43% of justice-involved youth have special education disabilities

Prevalence of psychiatric disorder increases with system penetration

Recidivism higher in youth with mental health disorders

- PTSD specifically found to be associated with increased recidivism
Justice-involved youth have “disproportionately high rate of victimization”

- Rates of childhood abuse 80% in delinquent girls
- At least 75% justice-involved youth exposed to victimization

- 42% of justice-involved youth are crossover youth
- Chronic maltreatment is associated with more severe delinquency
Justice-Involved Youth Experience High Rates of Trauma Exposure and PTSD

- 92.5% of juvenile detainees experienced 1 or more traumas

- Reported rates of PTSD range from 4.8 to 52%

- PTSD prevalence 8x higher than community sample of peers

- Rates of complex trauma exposure 3x greater than community samples
Under-identification of Trauma

- Justice-involved youth are not benefitting from advances in trauma screening and intervention\textsuperscript{14}

- Most Juvenile Justice settings use the MAYSI-2
  - Identifies emergent risks
  - Overlooks internalizing symptoms, trauma exposure
  - No ability to link between trauma and other mental health problems\textsuperscript{4}

- Trauma exposure and PTSD under-diagnosed without focused, structured instrumentation\textsuperscript{15}
Mental Health Screening in NYC Juvenile Detention

- In 2011—2,138 youth screened with the MAYSI-2
- Most common diagnoses—ADHD, impulse control disorders, and mood disorders
- 63% reported at least one traumatic event on the MAYSI-2
- PTSD diagnosed by psychiatry in less than 2% of youth
  - Less than 2% of clinical interventions focused on PTSD
Implications of Lack of Identification

- Collusion with silence and self-blame
- Poor understanding of behavior
- Inadequate treatment planning
- Over-utilization of anti-psychotic medication
FY 2012 Diagnoses and Medication

- Mood Disorder: 32%
- Depression: 9%
- Bipolar: 8%
- Psychosis NOS: 2%
- PTSD: 2%
- ADHD/Impulse Control: 36%
- Disruptive Behavior: 9%
- Anxiety/Panic: 2%

- Mood Stabilizer: 4%
- Anti-depressant: 13%
- Alpha-2 Adrenergic Agonist: 6%
- Stimulants: 22%
- Other: 5%
- Anti-Psychotic: 50%

- Other: 5%
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Michael Surko, Jennifer Havens, Isaiah Pickens, Linda Smith, Juanita Hill, Mollie Marr

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Project Goals

**Goal 1:** Train staff about the effects of trauma on youth

**Goal 2:** Establish evidence-based, trauma-informed mental health screening

**Goal 3:** Implement evidence-based skills groups to reduce trauma-related problems among residents

**Goal 4:** Build collaborative partnerships across the child-serving systems associated with juvenile detention to increase trauma responsiveness
Goal 1: Staff Training in Trauma

Think Trauma: A Training Curriculum for Staff in Juvenile Justice and Residential Settings, Monique Marrow, PhD et al (2012)

- Trauma and Delinquency
- Trauma’s Impact on Development
- Coping Strategies
- Vicarious Trauma, organizational stress, self-care
Goal 2: Trauma-Informed Mental Health Screening

- Replaced the MAYSI-2 with
  - UCLA PTSD Reaction Index
  - PHQ-9—depression
  - CRAFFT—problematic substance use

- Identifies trauma exposure, PTSD symptoms, common co-morbidities associated with PTSD

- Clear referral process for psychiatric evaluation
Measures: UCLA PTSD Reaction Index

- **Part 1: List of traumatic events**
  - Includes domestic violence, physical abuse, sexual abuse
  - Question 13 allows child to name additional traumatic events
  - Question 14 asks child to identify what bothers him most
    - Children often identify multiple traumas

For each of the following questions, check **YES** if the scary thing happened to you and check **NO** if it did not happen to you.

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
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<td>0</td>
</tr>
<tr>
<td>2</td>
<td>1</td>
<td>0</td>
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<td>6</td>
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<td>0</td>
</tr>
<tr>
<td>7</td>
<td>1</td>
<td>0</td>
</tr>
</tbody>
</table>

- Being in a **big earthquake** that badly damaged the building you were in.
- Being in another kind of **disaster**, like a fire, tornado, flood or hurricane.
- Being in a bad **accident**, like a **very serious** car accident.
- Being in a place where **war** was going on around you.
- Being **hit, kicked or punched** very hard at home.
- Seeing a **family member being hit, punched or kicked** very hard at home
- Being **beaten up, shot at or being threatened to be hurt** badly.
Part 2: Symptom Questions

Symptom questions match to DSM-IV-TR criteria

<table>
<thead>
<tr>
<th></th>
<th>Question</th>
<th>None</th>
<th>Little</th>
<th>Some</th>
<th>Much</th>
<th>Most</th>
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</thead>
<tbody>
<tr>
<td>1</td>
<td>I watch out for danger or things that I am afraid of.</td>
<td>0</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>2</td>
<td>When something reminds me of what happened, I get very upset, afraid or</td>
<td>0</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td></td>
<td>sad.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>I have upsetting thoughts, pictures, or sounds of what happened come</td>
<td>0</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td></td>
<td>into my mind when I do not want them to.</td>
<td></td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>4</td>
<td>I feel grouchy, angry or mad.</td>
<td>0</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>5</td>
<td>I have dreams about what happened or other bad dreams.</td>
<td>0</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
</tr>
</tbody>
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### Mental Health Screening Results

<table>
<thead>
<tr>
<th></th>
<th>N</th>
<th>%</th>
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<tbody>
<tr>
<td><strong>Depression</strong> (Total screened=893)</td>
<td></td>
<td></td>
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<tr>
<td>Clinical symptom level</td>
<td>72</td>
<td>8.1</td>
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<tr>
<td>Borderline symptom level</td>
<td>94</td>
<td>10.5</td>
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<tr>
<td><strong>PTSD</strong> (Total screened=892)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Clinical symptom level</td>
<td>112</td>
<td>12.6</td>
</tr>
<tr>
<td>Borderline symptom level</td>
<td>68</td>
<td>7.6</td>
</tr>
<tr>
<td>Reporting <em>at least one</em> traumatic event</td>
<td>779</td>
<td>87.3</td>
</tr>
<tr>
<td><strong>Problematic substance use</strong> (Total screened=983)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Comorbid PTSD</td>
<td>77</td>
<td>68.8</td>
</tr>
</tbody>
</table>
Goal 3: Youth Skills Groups

Skills Training in Affective and Interpersonal Regulation for Adolescents (STAIR-A)
Marylene Cloitre, PhD (2009)

- Identification and Labeling of Feelings
- Coping with Upsetting Feelings
- Skills for Clear Communication

- Adolescents create/refine individualized safety plans
Of 56 staff trained to run groups, 28 are juvenile counselors (JCs)
- Mental Health/JC co-leadership
- Started groups 9/30/2013
- 135 groups completed, 214 residents participating
- Currently, 85% all residents have received STAIR-A
Safety Planning Team

- **Multidisciplinary team**—Mental health, group services, case manager, school social worker, administration, Bellevue psychologists, juvenile counselor

- Focus on residents with acute emotional/behavioral dysregulation

- Trauma history, current triggers, warning signs, calming strategies, environmental supports

- 1-page trauma-informed care plan for use on the hall

- Plan developed in close cooperation with the resident
Goal 4: Collaborative Partnerships

- Advisory Committee
  - Child Welfare Agency
  - Family Court Judges
  - Family Court Mental Health Clinicians
  - NYS Office of Mental Health
  - NYC Dept of Health and Mental Hygiene
  - Probation
  - Parent Advocates
  - Foster care agencies providing non-secure placement and detention
  - Legal Aid
What We Have Learned

- Increased identification of mental health needs
- Staff training around trauma
- Front line staff skills improvement
- Effective positive behavior motivation
- Milieu mental health
References


References


