

# **TRAUMA-INFORMED POLICING**

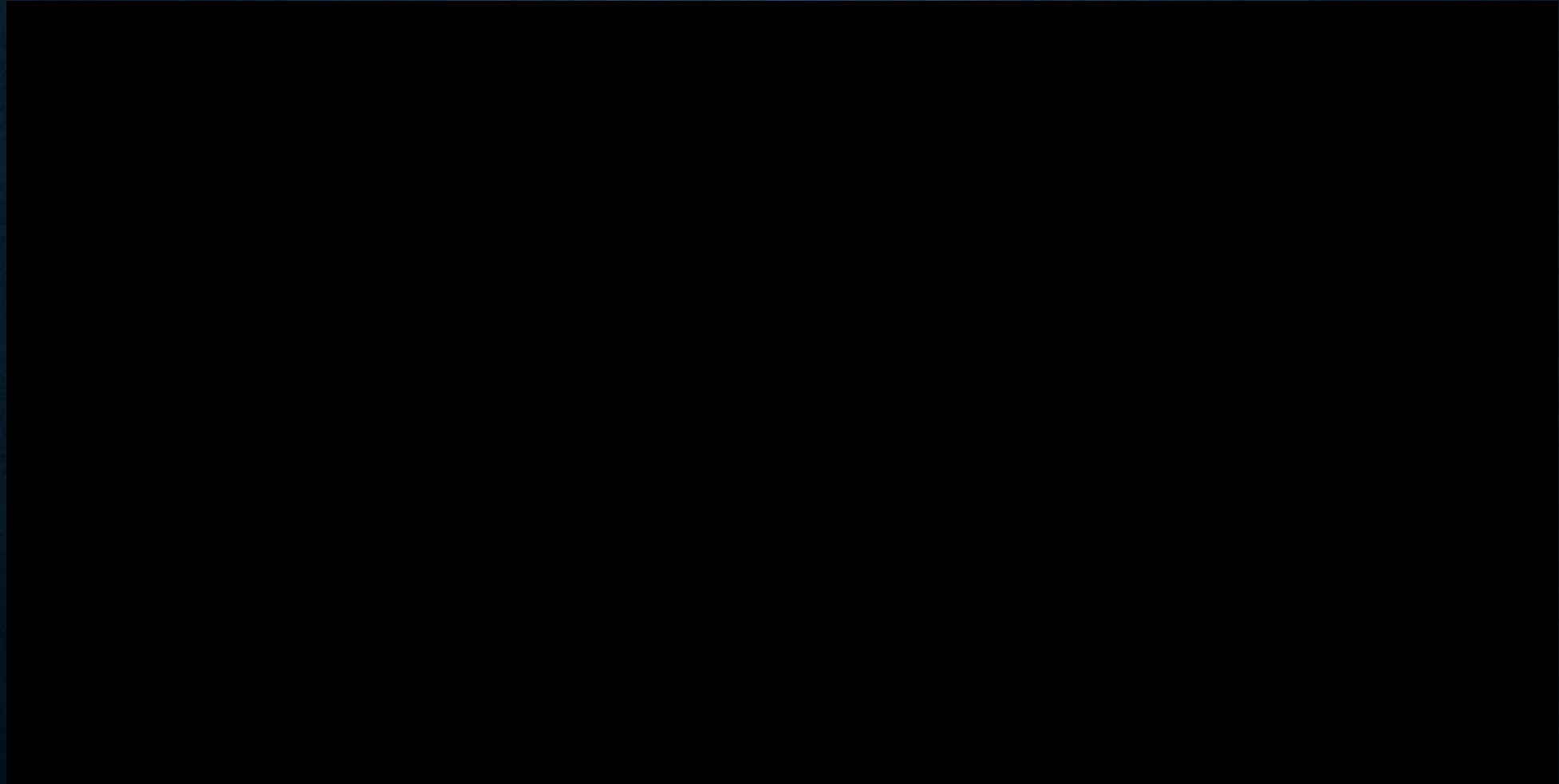
**A Special Set of Tools  
For Law Enforcement**

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# TRAUMA-INFORMED CARE (TIC) PROVIDES A NEW MODEL UNDER WHICH THE BASIC PREMISE FOR ORGANIZING SERVICES IS TRANSFORMED

*from:*

*"What's wrong  
with you?"*

*to:*

*What has happened  
to you?"*

# **“UNIVERSAL PRECAUTION” OF BEHAVIORAL HEALTH**

- Universal Precaution in the medical field: we presume everyone **MAY** have a blood-borne pathogen, and protect ourselves from transmission accordingly.
- Universal Precaution in behavioral health: we presume everyone **MAY** have a trauma history, and treat them and the situation as if that is the case.

## Types of Trauma

A single traumatic event that is limited in time.

**Acute Trauma**

The experience of multiple traumatic events.

**Chronic Trauma**

**Vicarious Trauma**

**Complex Trauma**

Both exposure to chronic trauma, and the impact such exposure has on an individual.

**System Induced Trauma**

The traumatic removal from home, admission to a detention or residential facility or multiple placements within a short time.

# ACUTE TRAUMA: EXAMPLES

- Usually a single event
- An accident
- A loved one's death
- A natural disaster
- Physical or sexual assault

# CHRONIC TRAUMA: EXAMPLES

- Usually occurring repeatedly over time
- Ongoing physical or sexual abuse
- Ongoing neglect
- Combat
- Multiple traumas over time (even if unrelated), especially if they are not processed or addressed

# COMPLEX TRAUMA: EXAMPLES

- Uprooting (especially repeatedly)
- homelessness
- Human trafficking
- Being a refugee
- More than one type of ongoing abuse/neglect



# SYSTEM-INDUCED TRAUMA: EXAMPLES

- Child removal from home to foster care
- Multiple foster care placements
- Sibling separation
- Having to testify in court against family
- Extreme poverty

How do people learn to deal with  
difficult emotions or difficult  
situations in life?



# **TRAUMA**

*When trauma occurs early in life, children do not develop the capacity to regulate their experience...to calm themselves down when they're upset, to sooth themselves, to interact in appropriate ways with other people, to learn from their behavior.*

Margaret Blaustein, 2004

Director of Training,

The Trauma Center at JRI,

Brookline, MA

# SIGNS OF TRAUMA

- nausea, flashbacks, trembling, memory gaps, fear, and anger. These can lead to behaviors that police may misinterpret as not cooperating, appearing adversarial, or behaving in an aggressive manner.
- Hypervigilance or constant state of arousal. This may appear as the person being hostile, particularly when they are feeling threatened.
- Disengaging, “tuning out,” They may feel numb and show no outward signs of distress, which police can interpret as suggesting that there is little or no trauma because the person is not acting out.

- When encountering someone who appears to be experiencing symptoms of trauma, law enforcement must first address the victim's safety and security needs by ensuring his or her physical concerns are acknowledged and addressed.

(Vera.org: building trust through trauma-informed policing)

# **EVEN A MOMENT OR TWO MAKES ALL THE DIFFERENCE**

officers should allow-if possible- the traumatized person to vent about his or her feelings, and should reflect back those feelings. Listen attentively with a non-judgmental demeanor. Approach victims by asking, “What has happened to you?” instead of “What is wrong with you?”

(Vera.org: building trust through trauma-informed policing)

# **MINIMIZE UNCERTAINTY: EXPLAIN WHAT IS HAPPENING**

Finally, enable prediction and preparation by explaining to the victim what happens next in processing of the case and his or her role in that process.

(Vera.org: building trust through trauma-informed policing)

# HOW DOES TRAUMA-INFORMED PRACTICE HELP MAKE POLICE WORK EASIER?

- You are more likely to get cooperation from citizen
- You are less likely to escalate the citizen
- You are less likely to add trauma to someone who may already have experienced it, leading to better future outcomes with the same citizen



# VICARIOUS (SECONDARY) TRAUMA

“the effects of vicarious traumatization on an individual resemble those of traumatic experiences. They include significant disruptions in one’s affect tolerance, psychological needs, beliefs about self and others, interpersonal relationships, and sensory memory, including imagery.”

“For police officers, the effects can have far-reaching implications. When measured caution gives way to paranoia, the sense of self and purpose is undermined, interpersonal relationships suffer, and the perceptual framework through which we view and interpret the world is damaged, the resulting psychological and physical harm is considerable.”

# MANY THINGS CAN LEAD TO VICARIOUS TRAUMA

- Witnessing crimes, violence, accidents
- Receiving emotions of someone who was just traumatized
- Responding to particularly vulnerable victims (children, elderly, etc)
- Witnessing another LE experience trauma (i.e., shooting)
- General threats to safety of LE

So what can be done about it?

# SELF-CARE

{insert groan and/or laughter here}

Okay, but it WORKS.

\*prevents burnout

\*can mitigate secondary trauma

\*can alleviate symptoms of secondary trauma

# WHAT IS YOUR SELF-CARE?

- Anything that calms your nervous system, and feeds your energy can be self-care.
- Some examples of common practices:
  - Physical exercise
  - Mindfulness
  - Time with family
  - Hobbies
  - Faith communities

## TO SUMMARIZE:

- Trauma-Informed Policing can make an officer's job much easier
- Assuming there MAY be trauma present can prevent triggering or re-traumatizing a victim
- Simple tools help to gain cooperation and prevent escalation
- Trauma affects everyone, even law enforcement (in fact, LE can be more susceptible, due to high exposure to trauma)
- Self-care is vital

**QUESTIONS?**