



## **Knowledge Exchange Network (March 2022): Trauma-Informed Principles, Practice and Supervision**

This session explored how trauma informed principles can help policing practice, specifically for young people and exploitation. The session also looked at the importance of trauma informed supervision for police officers and impact of day-to-day trauma.

### **Dr Kristine Hickle, Senior Lecturer in Social Work, University of Sussex**

There are tangible benefits to trauma-informed policing, including a better understanding of the challenging behaviours of traumatised young people, learning new responsive approaches that increase safety and trust, gaining an awareness of trauma that can promote resilience for organisations as well as the individual.

Trauma is a universal human experience, and often related to an event or events that overwhelm an individuals ability and capacity to cope (Herman, 1992). An event takes place, and individual experiences that, and an effect is felt after the traumatic event.

Developmental trauma and late adolescence are often related to children being exposed to multiple traumatic events. Their best efforts to keep themselves safe often translate to behaviours that are challenging and disruptive to them and others.

For instance, a young person's way of managing and processing a threat may be seen through avoidance of meetings, lack of trust in authorities or carrying a weapon. Their emotional regulation may present itself through substance misuse and not being to talk about or explain their experiences. If their reward processing, executive function, emotional regulation and threat processing cognitive functions are impacted, this leads to adverse outcomes for them.

Trauma responses in young people is characterized by:

## Together, we can put an end to the revolving door.

- ‘Refusing behaviour’ (avoidance) – when a young person doesn’t show up to appointments, ‘refuses’ to meet or talk to professionals, refuses school, or appears unwilling to engage in meetings where they are asked to attend and share their views
- Numbing, ‘checking out’ (dissociation) – when sharing an account of something really difficult and traumatic that happened, the young person might appear disinterested, removed, or ‘checked out’ while talking. They might talk in a flat, monotone voice or seem as if they are talking about something that happened to someone else entirely
- ‘On edge’ (hypervigilance) – this is observable in a young person’s body language. They might be fidgety, full of energy, have difficulty sitting still, settling down and being calm, or even be a bit aggressive. They might have pressured speech or talk loud and fast. They might also act paranoid or suspicious of you or others
- Inability to plan for the future (foreshortened future) – you might notice this among young people who just cannot seem to make any plans for their future or do not seem to care at all about future consequences of their present behaviour. They may seem very irresponsible and unprepared, particularly as they approach adulthood
- Self-harm and self-destructive or high-risk behaviours – this could include physical self-harm such as cutting, burning, or piercing, or engaging in other dangerous, risky or self-destructive activities involving substance misuse or hypersexualised behaviours
- Traumatic bonding – this refers to an emotional attachment between an abuser and victim characterised by an imbalance of power. The relationship will include a confusing mix of both positive and negative interactions that can result in a victim internalising the abuser’s perspective and blaming themselves for any abuse (Casassa, Knight, & Mengo, 2021). *To note this is perhaps more likely to occur when young people are groomed into exploitative relationships but is not present in all forms of exploitation*

Trauma informed practice in policing involves changing a mindset. Instead of thinking ‘what’s wrong with you, why are you doing this’, think ‘what has happened to you, how have you managed to survive, what’s right with you?’. Language is really important when discussing and being present around trauma, e.g. describing someone as ‘aggressive’.

The 6 principles of trauma informed practice are Safety, Trustworthiness, Transparency, Peer support, Collaboration and mutuality, Empowerment of voice and choice, and cultural historical and gender issues (Hickle, 2020). *‘An abnormal reaction to abnormal situation is normal behaviour’ – Victor Frankl*

The four Rs of trauma-informed practice are:

- Realisation about trauma
- Recognise signs
- Response to needs
- Re-traumatisation is avoided

To avoid traumatisation, it is essential to have choice, control and collaboration – which all relate to human connection. This might be offered with something as simple as asking if someone would like a break, a glass of water.

By responding with flexibly, a young person learns that you are willing to work collaboratively with them and respect their body’s cues when they are feeling unsafe or unable to engage.

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By responding persistently, a young person learns that you are not scared, intimidated, or frustrated with them because you understand that they are having a hard time regulating their emotions and feeling safe.

By responding predictably their bodies will start to learn that they do not need to be prepared for unpredictable, unsafe experiences with you because you will not surprise them; you will be the same person each time they see you.

Flexibility, persistence and predictability – don't need to take verbal abuse, but when returning you come back as the same person – promotes safety

Trauma-informed policing practice examples:

- DCI Counter Terrorism Unit: giving choice and control on when to meet, for how long, and normalising experiences of victimisation through sharing stories and scenarios
- DI Child Abuse and Exploitation Team: allowed victim to choose communication methods and followed up to share what actions had been taken

For more information please see Dr Kristine Hickle's resource site [https://padlet.com/k\\_hickle/Tipractice](https://padlet.com/k_hickle/Tipractice) or contact [K.Hickle@sussex.ac.uk](mailto:K.Hickle@sussex.ac.uk)

## DI Brendan Murray, Lead for Trauma Informed Practice at Thames Valley

This attention and work started off by trying to assess how trauma-informed is Thames Valley Police. A framework for all officers was needed to better understand what traumas were – whether that related to ACEs, PTSD, and/or abuse. It appeared clear that policing needed to be better informed to recognise, respond but also relate to these traumas, and what it means to be in a revolving door of harm and crime. Policing practice also needed to be improved through partnerships and people's outcomes after their interaction with policing.

Trauma informed practice matters because it can improve victim outcomes, but also offenders opportunities and outcomes, as well as staff wellbeing.

In the first instance, an examination of existing practices took place to highlight and exhibit best practice throughout their business areas. A proposal was made to ensure that every member of staff and officer receives basic input on trauma and in particular identifying 'adverse childhood experiences'. A bespoke plan would then ensure that each business area agrees a trauma informed practice plan that will be tailored to their needs and will work alongside other business areas for consistency. Five key focuses of trauma informed practice are – crime investigation, response and problem solving, partnerships, criminal justice and staff wellbeing

It is important for trauma informed practice to be sympathetic and simple:

- Context – Why is the person in contact with TVP? Is the scenario about managing staff, is a victim of crime seeking our support or are we investigating crime among younger people? Each scenario indicates common themes of TVP activity but none

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is exclusive. The way we approach each is different but everyone affords an opportunity to provide the best possible outcome in its own circumstances.

- Outcomes – With every contact made with or by TVP outcomes will generally be either positive or negative depending on the service provided and context of the scenario. Dealing with a young person for example, who has committed an assault within a school may have several different outcomes at its conclusion. Positive outcomes might include restorative justice, therapeutic work to tackle underlying issues or an opportunity to avoid school exclusion. A TI response asks us to consider and prioritise positive outcomes from the outset, contextually and with a plan to deliver them.
- Collaboration – Successful TIP not only encourages collaboration, it thrives on it. It is unlikely that TVP can eradicate the effect of adverse childhood experiences or mitigate them in isolation, but we can help people to overcome them by working with others. Collaborative opportunities will be available in every case, in varying scales. For some it might be making an appropriate referral to a support network or a diversionary scheme, while others might benefit from specialist interventions including mental or medical health therapies. There will, however, be no limit to the potential of collaboration to improve outcomes as we look to improve working practices and support wider initiatives delivering improved outcomes.

***The Trauma Informed Practice Special Interest Group has been set up by DI Brendan Murray, for more information please contact [brendan.murray@thamesvalley.police.uk](mailto:brendan.murray@thamesvalley.police.uk)***

## Dr Richard Grove, on trauma-informed reflective supervision for police officers

The pilot in Camden came in a context of higher numbers of police officers forces being off sick, with the number of officers taking sick days for poor mental health doubling in the last six years. As a consequence, many were unable to meet demands of the job.

Why was reflective supervision the suggested:

- Shift in policing demand
- Complexity dealing with vulnerability as opposed to serious acquisitive crime
- Trauma/aces informed policing – public health approach in Wales
- The value of supervision – reflective practice, ‘self’ in policing, staff wellbeing

Although officers knew where to go, it wasn’t easy to access support and there were a lot of perverse or unintended consequences thereof. An OHU referral wasn’t thought of as an option unless you were off sick.

A group discussion with 16-25 years old offered a space to rebuild trust and access mental health support. They agreed that officers needed to have discussions amongst themselves and raised concerns with how police officers who experience trauma are supported.

Presenting the concept, meant recognising the unique stresses that the service is under and demystifying the process, which included adapting language and making the concept of supervision accessible.

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This pilot and supervision model was co-produced as everyone had something to offer. Promoting a shared ownership of the training provided us with the opportunity to navigate around the idea of “us” and “them” – not doing something ‘to’ or ‘for you, but ‘with’ you. Whether or not it is a success, responsibility is shared.

The 20-weeks pilot consisted of two groups of 10 officer meeting alternate weeks. The trauma training was followed immediately by reflective practice session. This led to reductions in stress, burnout and compassion satisfaction.

Feedback from officers included:

- “I definitely think more about what the people I am dealing with have going on in their lives”
- “I’ve noticed that I’ve been approaching them [young people] with more respect and it’s led to less problems between us”
- “I know if I met him [young person] in a different time of life we would probably be mates”
- “I have started thinking about my relationship more – my wife and I are talking more”
- “I really think this group has helped me. I haven’t spoken to my sister for two years but I am now. I really think coming here helped me to do this”

What’s next? There is MET-wide interested in this pilot, as well as from Lancashire and West Midlands VRUs. Currently discussing an extension to the pilot in Camden, and intention to enhance outcomes for those participating.

*The report of the police supervision pilot can be found [here](#), and for more information contact [dr.richard.grove@gmail.com](mailto:dr.richard.grove@gmail.com)*