



Research at a glance

Trauma-informed care for offenders who engage in chronic self-injurious behaviour: A rapid evidence assessment

While correctional institutions should strive to create safe environments and provide effective interventions for offenders with trauma histories, there is limited research examining the most effective ways to achieve these goals.

Why we did this study

Trauma - physically or emotionally harmful or threatening experiences that have long-term effects on functioning and well-being – is common among offenders, especially those who engage in self-injurious behaviour. In recognition of this, there have been calls for trauma-informed care in correctional settings. Most recently, the Office of the Correctional Investigator requested CSC to “examine international research and best practices to identify appropriate and effective trauma-informed treatment and services for offenders engaged in chronic self-injurious behaviour, and that a comprehensive intervention strategy be developed based on this review.”

What we did

We undertook a rapid evidence assessment to synthesize the principles of trauma-informed care, and the evidence base that supports their use for inmates who engage in chronic self-injurious behaviour. The review sought to address two questions in relation to several broad categories of trauma-informed care. First, we synthesized the principles of trauma-responsive systems and the evidence that supports them. Second, we summarized research on the effectiveness of trauma-specific interventions.

What we found

No studies have examined the positive impacts of trauma-informed care for offenders who engage in self-injurious behaviour. Therefore, we expanded our search to include reduction of mental health symptoms given the relationship between mental health and self-injurious behaviour. While there is a lack of research regarding trauma-responsive systems, available literature suggests a general consensus about the importance of awareness of trauma and the need to create safe environments that minimize triggers that can lead to re-experiencing traumatic events. Studies regarding trauma-specific

interventions, which have been conducted primarily with women, show that these interventions may lead to reductions in mental health symptoms compared to typical non-trauma focused interventions. Trauma-specific interventions and other high-intensity interventions that were not specifically trauma-specific (e.g. therapeutic communities) were equally effective at reducing symptoms. Unfortunately, most studies excluded offenders with current or recent self-injurious thoughts or behaviours. Thus there is only indirect evidence regarding best practices for individuals with trauma histories who engage in self-injurious behaviour.

What it means

Trauma is prevalent among offenders who self-injure, and staff should be aware of the impacts of trauma on inmate behaviour. Staff should work to create safe environments that minimize the risk of triggering thoughts related to traumatic experiences. Treatment should aim to provide coping skills to manage current stressors and help regulate emotions, and should address multiple needs through integrated, multi-target interventions. Further work is needed to identify current good practices and gaps in the provision of mental health services to offenders with trauma histories.

For more information

Martin, M. S., Viau-Deschênes, C., & Yogarajah, T. (2017). *Trauma-informed care for offenders who engage in chronic self-injurious behaviour: A rapid evidence assessment*. Ottawa, ON: Correctional Service of Canada. R-388

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