Analyzing Trauma-Informed Courtrooms in a Midwestern State of the United States: Comparisons between Rural and Urban Jurisdictions

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Abstract

This study investigates the implementation of trauma-informed practices in various court settings, including juvenile and adult courtrooms, as well as specialized cases in areas such as family courts, domestic reconciliation, protection orders, and child in need of care (CINC) cases, within a single Midwestern state in the United States. The study targeted one rural and one urban judicial district. The authors sought to assess if, and how these practices are utilized to create an environment and workplace that fosters a needs-based, survivor-centered, resilience-building courtroom. Drawing from a holistic perspective on trauma and survivor-centered practices, this study utilized a mixed-methods approach, combining quantitative data analysis and courtroom field observations (in-person and virtual) with key personnel within the legal system, including judges, attorneys, court services, and community corrections officers. Our study revealed significant variations in implementing trauma-informed strategies across different court types and the urban-rural demographic spectrum. Moreover, the research highlights a significant paradox in courtroom proceedings—the tension between the demands for a speedy trial and efficiency and the time required to offer care, empathy, and a trauma-informed approach. This conflict stresses the necessity for a careful balance that upholds justice while considering the traumas experienced by individuals and the requisite care for all parties involved. Our findings serve as a clarion call for the continuous education of legal professionals in both rural and urban jurisdictions on trauma-informed practices. Equally important is the fostering of a cultural transformation towards a trauma-informed courtroom and the creation of teams that prioritize trauma-informed practices, ensuring that all personnel and stakeholders have equal access to training and resources.

Keywords: trauma-informed, court, rural and urban jurisdictions

Introduction

Trauma is the "psychological response to physically or emotionally harmful or threatening events that have lasting adverse effects on an individual's physical, social, emotional, or spiritual well-being" (SAMHSA, 2023, p.2). Studies indicate that approximately 70% of American adults have experienced trauma at least once in their lifetime (Forman-Hoffman et al., 2016); similarly, approximately two-thirds of children have reported at least one traumatic event by their sixteenth birthdays (SAMHSA, 2023). Incarcerated populations and victims of crime report higher rates of trauma exposure, post-traumatic stress disorder (PTSD), and other mental health challenges compared to the general population (Facer-Irwin et al., 2019). 90% of youths in the juvenile justice system are exposed to traumatic events, such as child abuse and parental neglect (Dierkhising et al., 2013). Youths exposed to trauma in their early childhood have an increased risk of engaging in delinquent and criminal behaviors in adolescence and adulthood (Wyrick & Atkinson, 2021). Being a victim of crime, especially violent crime, increases the risk for the development of anxiety, fear, dysfunctional social relationships, substance misuse, loss of productivity, PTSD, diminished quality of life, and suicide, compared to the general population (Hanson et al., 2010).

Based on the research above, there is a clear need to adopt trauma-informed practices in court proceedings and judicial decision-making. "Trauma-informed care is an optimistic approach to how interactions should occur in services, it is an acknowledgment of the traumaimprint, which is to be sensitive to the unknown, to be conscious of the impact that history has had on an individual" (Thirkle et al., 2021, p. 31). Trauma-informed care is a way of being mindful of the impact of trauma, while also raising awareness for services (Thirkle et al., 2021). The scope includes both organizational structure and treatment (Fallot & Harris, 2001) as well as culture (Bateman et al., 2013). The concept and operation of trauma-informed justice has been identified as important in the U.S. judicial proceedings, manifested in such ways as establishing problem-solving courts (e.g., drug courts and veteran's courts). One best practice for specialty courts is to be trauma-informed (All Rise, 2024). Unfortunately, such specialty courts rarely exist in rural areas due to limited resources. Additionally, trauma-informed care and practices are predominately implemented within juvenile justice, child welfare, and pediatric healthcare systems (Ezell et al., 2018), with minimal implementation within the adult criminal legal system. Research shows that practitioners and service providers recognize the importance of traumainformed approaches, but more coordinated efforts between mental health services and criminal legal organizations are needed (Ko et al., 2008). In rural areas, access to community resources is also problematic in terms of availability and accessibility (Ezell et al., 2018). Despite efforts to implement trauma-informed practices in the judicial context, little research has investigated their impact on mainstream courts, especially those in rural spaces. Extant research has focused on the impact of trauma-focused treatment programs or specialty courts such as drug courts or with juvenile justice-involved individuals, showing effects such as reducing recidivism (Stein et al.,

2015). However, the extent to which positive impacts may arise from courtroom-based practices has not yet been extensively studied.

Literature Review

Trauma: Prevalence & justice system involvement

In the past, trauma was thought to be rare. However, as the literature has evolved, it has become evident that trauma is a common experience throughout one's life. Additionally, for most individuals, they experience multiple traumatic experiences (Kessler, 2000). The long-term effects of traumatic experiences can challenge a person's capacity for recovery and pose significant barriers to accessing services, often resulting in an increased risk of recidivism, revictimization, or poly-victimization (Zettler, 2021). In Silverman et al.'s (1996) seminal longitudinal study, it was found that abused children had significant impairments in functioning later in adolescence, including increased levels of depression, behavioral issues, and suicidal attempts as compared to their non-abused peers. In cross-sectional research in the U.S., it has been found that as many as one in four children will experience an act of maltreatment. After this maltreatment, studies find higher rates of substance abuse and involvement in violence (Felitti et al., 1998).

The research is well established that youth involved in the juvenile justice system generally have extensive histories of abuse and neglect, including exposure to traumatic events (Skinner-Osei et al., 2019; Wyrick & Atkinson, 2021). More than two-thirds of system-involved youth are said to have been exposed to multiple traumatic events, including abuse and neglect within their homes, as well as community violence and discrimination (Complex Trauma Treatment Network, 2017). It is also important to recognize the prevalence of trauma exposure among youths in the justice system, with such trauma often commencing at an early age, occurring in various settings, and enduring over an extended period (Dierkhising et al., 2013). The prevalence of justice-involved youths who were diagnosed with mental health disorders ranges from 3% to 50%, averaging around 30% (Ford et al., 2010). Variations in rates result from geographic differences, assessment methods, and assessment timing during the juvenile justice process (Wolpaw & Ford, 2004). Self-reported trauma does not end within the juvenile system. Nearly 37% of incarcerated women report having experienced trauma, such as childhood abuse and sexual abuse prior to their incarceration, compared to only 12-17% of the general adult women's population (Browne et al., 1999). A 2014 study found that 30-60% of incarcerated men had PTSD compared to only 3-6% in the general men's population (Wolff et al., 2014). These studies, and others, have demonstrated much greater reports of traumatic events for those involved in the juvenile and/or criminal legal systems compared to those not involved, and unfortunately, many do not receive necessary services due to their label as "offender" rather than "victim."

Due to these known statistics, it is important for justice-involved personnel to be knowledgeable of the impact of trauma. Failure to consider a victim's well-being can impact long-term recovery (Campbell et al., 1999) and reduce the likelihood that victims will seek out justice assistance in the future (Bard & Sangrey, 1986). While some of this research is dated, the following sections will add more recent literature in the field, as some justice-involved individuals have begun to implement aspects of trauma-informed practices.

Trauma-informed practices in the criminal legal system

According to Thirkle et al. (2021), trauma-informed care is a culture of understanding. A trauma-informed approach is multi-dimensional, and includes the realization of how widespread trauma is, the signs and symptoms of trauma, pathways to recovery, and intentional efforts to prevent traumatization (Tebes et al., 2019). Additionally, these practices may include an emphasis on empowerment and voice over choice, along with safety planning, trustworthiness, and collaboration, to name a few (SAMHSA, 2014). These approaches should also be centered around exposure to trauma for justice workers as secondary trauma may occur (James, 2020). With a great lag in research on trauma-informed practices within the criminal legal system, this section will focus primarily on the juvenile justice system. While now dated, a 2006 study found that less than 10% of public juvenile justice organizations had implemented trauma-informed practices, including programming to address trauma and/or collaboration with other agencies (Snyder & Sickmund, 2006). Since that time, some localized or state juvenile justice systems have adopted trauma-informed practices as system stakeholders have recognized the prevalence of exposure to traumatic events and the adverse experiences that result for youth (Skinner-Osei et al., 2019; Wyrick & Atkinson, 2021), but Ford and colleagues (2016) note that the implementation of such practices as stagnated. Ezell et al. (2018) conducted a study of juvenile court personnel in a rural area, finding perceptions supportive of both ideological and practical value in trauma-informed practices. Respondents noted support for these practices after being provided training that served as a conduit for decision-making in disposition hearings, and specifically, a movement away from a cookie-cutter approach to one informed by restorative justice practices (Ezell et al., 2018).

Recent literature consistently highlights how trauma-informed approaches within justice systems suggest significant potential in improving outcomes for vulnerable populations, especially victims of sexual violence, juveniles, and justice-involved populations. For instance, Anyikwa (2016) highlighted the critical role of social workers in delivering trauma-informed services to interpersonal-violence (IPV) survivors. Similarly, Branson et al. (2017) emphasized the importance of standardized trauma-informed practices in juvenile justice systems to better address the rehabilitative needs of juveniles. In correctional settings, Covington and Bloom (2000) argued for gender-responsive programming designed to meet the unique needs of victims, an approach further supported by Covington (1999), by advocating for gender-specific treatment programs that address the intersection of victimization, trauma, and substance abuse.

To fully implement trauma-informed practices, the entire system must buy-in to the importance of this framework (Dierkhising & Branson, 2016). Being trauma-informed is an understanding of the impact of trauma and how it can emotionally, behaviorally, and physically affect justice-involved populations including, victims, children, families, staff, and organizations working with these populations. For criminal justice staff, culture may push for a "grow a thick skin" mentality (James, 2020, p. 276). An integral component of being trauma-informed is understanding that these behaviors are not the results of a flawed character or symptoms of mental illness but as strategies or behavioral adaptations developed to cope with past traumas (Center for Substance Abuse Treatment, 2014). The trauma-informed approach for children and youths who have experienced developmental trauma has shown improved behavioral health and an overall decrease in the risk of future delinquency (Purvis et al., 2013). Yet, challenges exist and are unique in rural areas. As Garg and colleagues (2016) have noted, in rural areas, marginalized groups, such as low-income individuals, remain at great disadvantage for traumabased services, even if and when screening and referrals are made. Similarly, in Ezell et al.'s (2018) findings, respondents indicated that limited mental health referrals were apparent in their underserved rural communities.

In addition to the research on the juvenile justice system, additional related literature can be found within studies on the implementation of trauma-informed practices within specialty courts. Drabble et al. (2013) showed that trauma-informed practices significantly benefit family drug treatment courts, making a strong case for overhauling how the judicial system handles cases involving trauma and addiction. Similarly, McKenna and Holtfreter (2021) offered empirical evidence that these practices improve justice outcomes for women and other vulnerable groups, highlighting the pressing need for courts to adopt such approaches. However, it is important to note that rural areas tend to have fewer specialty courts, resulting in limited access to trauma-informed practices for those communities.

The current study

The purpose of the current study was to understand how one state's criminal legal system acknowledges, and responds to, trauma, for all involved parties, including courtroom personnel. The research examines the use of trauma-informed practices within both juvenile and adult courtrooms in both in-person and virtual settings. Drawing from a holistic perspective on trauma and resilience, this study utilizes a triangulation approach, combining quantitative data analysis and courtroom observations (in-person and virtual) with key personnel within the legal system, including judges, attorneys, court services, and community corrections staff. As will be discussed in greater detail below, the study took place in a rurally located Midwestern state, utilizing one rural and one urban Judicial District (JD). The current study utilized the following research questions 1) Rurally located courtroom personnel report less training on trauma-informed practices than their urban counterparts; 2) Rurally located courtroom personnel engage in fewer

trauma-informed practices than their urban counterparts; and 3) Rural courtroom personnel will report more resistance than their urban counterparts in adopting a trauma-informed approach.

Methods

The current analysis represents findings from year one of a two-year-long pilot research project. During year one, the researchers engaged in exploratory research, utilizing both survey administration and courtroom observations, to compare responses across both modalities while evaluating trauma-informed training, practices, and agency implementation across two judicial districts (JD) within a rurally located Midwestern state. We utilized the surveys to gain descriptive statistics we would lack within our field observations. Likewise, we used the field observations to assess whether the implementation of trauma-informed practices was consistent with the survey reports of the same/similar professionals/professions in those locations.

The United States Department of Agriculture's Economic Research Service's Rural-Urban continuum codes are based on persons per square mile and were utilized to identify one non-metro JD and one metro JD (rural and urban will serve as synonyms for non-metro and metro, hereafter). Metro to non-metro classification ranges from 1-9 (1=most metro; 9=most non-metro). The rurally located JD included three counties, with an average classification score of 5.6 while the urban JD included only one county, with a classification score of 2. According to the Continuum Codes, the average classification score for the state is a 7 with 18% of the counties identified as metro and 82% as non-metro (Economic Research Service, 2013).

Participants

Surveys

The first phase of the project included administration of a Qualtrics survey. The researchers requested, and received, contact information (emails) for all court service officers (CSOs) and community corrections workers in both JDs. Outside of CSOs and probation officers (POs), the researchers used already established contacts and internet searches to identify other courtroom personnel. Table 1 provides a breakdown of professions for those who completed the survey, along with other demographic information. Overall, most respondents were employed within community corrections (n = 46.42%), with 4-10 years of experience (n = 29.63%), and currently working in the adult criminal legal system (n = 52%). As was expected, there were more responses from urban employees (62.50%) than rural employees (37.50%). In total, 45 surveys were initiated, and 30 were completed. Surveys were emailed to 266 email addresses, resulting in a survey completion response rate of 11.27%.

¹ Most respondents marked "other" as their profession. Most "other" professions identified themselves as truancy or care coordinators.

Table 1

Descriptive Statistics

	n	⁰ / ₀
Judicial District		
Rural	9	37.50
Urban	15	62.50
Profession		
Defense Attorney	1	3.57
Judge	1	3.57
Community Corrections	13	46.42
Court Services	3	10.72
Social Worker	3	10.72
Other	7	25.00
Time in Position		
3 years or less	7	25.93
4-10 years	8	29.63
11-20 years	7	25.93
21+ years	5	18.52
Type of Court		
Adult	13	52.00
Juvenile	7	28.00
Family	0	0.00
Special	3	12.00
Other	2	8.00

Note: n = 30 (Judicial District: n = 24; Profession: n = 28; Time in Position: n = 27 responses; Type of Court: n = 25)

Courtroom Observations

The second phase of the project included courtroom observations within both JDs. Within the urban jurisdiction, both in-person and Zoom hearings were conducted. The rural jurisdiction did not offer any Zoom hearings. Within the urban JD, the researchers engaged in a total of 18.5 hours of observation, and within the rural JD, the researchers engaged in 5.5 hours of observation. A further breakdown of the types of court and court set-up (in-person vs. virtual) is provided in Table 2. The criminal in-person observations in the urban JD included both a standard criminal docket as well as a resolution docket. The resolution docket was created peri-COVID, as a short-term fix to the overflow of cases. A defendant could be given this option to avoid the traditional criminal court. The resolution docket required a defendant to waive their right to a trial, that day, and move through the accelerated court system. Within both the urban and rural JDs, the juvenile court docket included both juvenile offender cases as well as Child-in-Need-of-Care (child protective services involvement) cases. However, in the rural JD, these

cases were heard within the same docket and with the same judge; whereas, in the urban JD, there were two judges and two dockets.

Table 2

Courtroom Observations

	n	%
Urban JD		
Criminal In-person	4.5	24.32
Juvenile In-person	4.5	24.32
Family Remote	4.5	24.32
PFA/PSA In-person	5.0	27.04
Rural JD		
Criminal In-person	2.0	36.36
Juvenile In-person	3.5	63.63

Note: n = number of observation hours

Materials and procedure

Surveys

Harris and Fallot (2001) reviewed existing instruments on trauma-informed practices and concluded that they could not recommend any particular instrument be utilized; rather, one should take into account the local culture to more accurately measure trauma-informed principles. The current survey was comprised mostly of self-created questions, but many sources were consulted in the creation of the survey. While all references were publicly available, some items were copyrighted, restricting usage of such questions, but others were freely available. The Trauma-informed Care in Youth Serving Settings: Organizational Self-Assessment (Trauma Stress Institute), the Trauma Informed System Change Instruction (Southwest Michigan Children's Trauma Assessment Center), and the Marathon County Trauma Informed Care Analysis Interview Questions (Marathon County, 2020) were consulted in creating the survey, while the Organizational Trauma-informed Practices Measure (O-TIPs) (Manian et al., 2021) was fully adopted into the current survey with only minor modifications (e.g., organization changed to agency). Self-created questions covered demographic information such as questions about length of time in the current role and jurisdiction, as well as identification of lifetime hours of training on trauma-informed practices. Several scaled questions were used to measure perceptions of overall knowledge of trauma-informed practices, for self, colleagues, and the agency, as well as desired future resources (e.g., What percentage of staff in your office or department do you perceive as having a strong understanding of trauma-informed care [0-25%; 26-50%; 51-75%; 76-100%]).

Courtroom observations

The researchers were confident that an observational rubric would help ensure consistent documentation of trauma-informed practices, including all core items identified in the literature. However, the researchers encountered a notable absence of a readily available trauma-informed courtroom observation rubric. To address this gap, the researchers drew upon various sources to develop several self-created observation rubrics that were suitable to the objectives of the research. Three primary sources were utilized in designing the observational rubrics. The first primary sources were based on peer-reviewed journal articles. This literature exploration extended into juvenile and criminal legal systems, ensuring a comprehensive foundation for the rubric's development. The second set of sources included governmental and agency-level research reports and summaries. We extended its scope into literature comprising program assessment reports produced by state and federal court organizations, including the National Council of Juvenile and Family Court Judges and the National Center for State Courts. Lastly, we utilized agency and organizational-level trauma-informed care resources. The researchers identified and reviewed approximately ten agency or organizational-level trauma-informed care strategic plans or toolkits available for public access. This comprehensive review allowed the researchers to incorporate the best practices into the rubric's design.

A modified rubric was employed for the virtual courtroom observations, featuring additional recommendations from research and governmental reports on virtual practices within juvenile and family courts. Utilizing the identified recommended practices, the researchers crafted a scalable tool that allowed for scoring during the courtroom observations. In addition to the rubric, the researchers also incorporated the practice of field notes. These notes served as a complementary method for emphasizing core themes.

Results

Survey Findings

First, it is important to note that most participants identified themselves as individuals who had multiple hours of trauma-informed training, but did not feel they had sufficient training (at times), and as employees who actively and intentionally sought to incorporate such practices. Specifically, 90.48% (47.7% rural vs. 52.3% urban, breakdown) of respondents reported having training with 52.63% (25% rural vs. 75% urban) indicating having more than ten hours. While participants felt they were familiar with trauma-informed practices, nearly half (47.62%) felt less than 50% of their agency knew of trauma-informed practices. Interestingly, this was not a common response from rural employees, as 88.88% of those reporting this low number worked in the urban JD. That said, it seems those willing to complete the voluntary survey likely have/had more buy-in towards implementing trauma-informed practices than individuals uninterested in providing their responses. While this is merely an inference, we found this to be accurate within a later stage of our project including interviews. Unfortunately, due to small

sample sizes, few statistically significant differences were observed when comparing responses for rural and urban employees. Therefore, results primarily speak only to differences between the groups, rather than statistically significant differences.

While most participants indicated having training on "trauma-informed practices" and "trauma-informed practices in the workplace," participants indicated some aspects of trauma-informed implementation were lacking more than others. When asked, "Which, if any, of the following do you believe would benefit your workplace (mark all that apply)," the most common response was lack of training on the importance of self-care in working within their given roles (31.25% rural vs. 68.75% urban). Another area noted as lacking was education on how experiences of toxic stress can affect staff, with 38% identifying this as an issue (36.84% rural

Table 3

Trauma-informed Practices in Your Organization

	M	SD
Urban JD		
Our hiring protocols indicate our organization's priority of trauma-informed practices.	2.25	.72
Urban JD		
Performance reviews assess staff member's increased understanding of trauma-informed practices.	2.25	.83
Urban JD		
My organization has a core team (or trauma-informed practices implementation team).	2.25	.92
Rural JD My agency has written easy-to-read documentation for consumers that explain core services, key rules and policies,	2.14	.64
and process for concerns/complaints.		
Rural JD		
There is a designated "safe space" (permanent or temporary) for staff to practice self-care.	2.43	.73
Rural JD		
My organization has a core team (or trauma-informed practices implementation team).	2.43	.73

vs. 63.16% urban). Lastly, Table 3 reflects responses to the question, "*Please respond to the following questions regarding trauma-informed practices in your <u>organization</u>," as many items received responses of disagree and strongly disagree. This table compares the top three areas of disagreement for rural and urban jurisdictions. Both locations identified the lack of a core*

trauma-informed team(s) as being present. However, the rural JD identified top issues as they related to victims and system-involved persons, including the lack of a safe space and written, easy-to-read documentation on services. The urban JD did not focus on those receiving services, but rather, focused on staff. They identified a lack of hiring protocols and performance reviews that held staff accountable.

We used the survey data to gain a baseline understanding of how rural and urban workers feel they engage in trauma-informed practices in their locations, prior to observing these practices firsthand. We also used responses such as number of hours of training, in comparison with the number of trauma-informed statements/actions we observed. As will be noted further in the findings, we found inconsistencies with the survey responses and field observations as surveys seemed to indicate a fair amount of training and knowledge on trauma-informed practices but our observations identified few, across all professional positions.

Observational Findings

Following the administration of the survey, the second phase of this project included courtroom observational data collection. In-person juvenile and adult rubrics included the following components: 1) courtroom communication; 2) courtroom procedures; and 3) courtroom environment—with each component including sub-sections. As previously noted, a total of 18.5 hours of urban observation was conducted in addition to 5.5 hours of rural observations. Courtroom observations also include two key pieces of data for comparison across rural and urban locations: 1) the self-created courtroom observation rubric scoring (see design details in *Materials and procedures*); and 2) field notes.

Rubric. The adult in-person rubric allowed for a score of up to 32 points while the juvenile rubric had a score of up to 30 points. The higher the score the more implementation of trauma-informed practices were observed within the courtroom. Table 4 provides detailed information on comparisons for the rural and urban JDs across both juvenile and adult dockets. Since there were no virtual dockets observed in the rural JD, the urban data has not been included in the analysis for lack of comparative purposes. Additionally, the researchers observed the in-person Protection from Abuse and Protection from Stalking docket but have elected to omit these observations from the current paper due to the nature of this being a specialty court.

Overall, the courtroom observation rubrics indicated higher adherence to trauma-informed practices within the rural JD, including both adult and juvenile dockets, compared to the urban JD. The largest difference exists within the juvenile in-person observations (rural M = 22; urban M = 3.5). That said, the juvenile in-person docket in the rural JD included CINC cases while they were heard on a different docket in the urban JD. The comparison of the urban CINC in-person docket with the rural combined juvenile in-person docket, was similar (rural M = 22; urban CINC M = 26.5).

Table 4

Courtroom Observation Rubric Scoring

	Researcher 1	Researcher 2	M
Urban JD			
Resolution In-person	4	5	4.5
Criminal In-person	6	6	6
Juvenile In-person	3	4	3.5
CINC In-person	25	28	26.5
Rural JD			
Criminal In-person	8	9	8.5
Juvenile In-person	23	21	22

Note: The adult rubric included up-to 32 points. The juvenile rubric included up-to 30 points.

Field Notes: Juvenile/CINC In-person, Rural. In using field notes, we refer back to the three sub-sections: 1) courtroom communication; 2) courtroom procedures; and 3) courtroom environment. Observations on the courtroom environment will be reserved, last. As previously noted, the highest scored rubric was the rural in-person juvenile courtroom. For the courtroom communication, the rural judge regularly showed genuine concern regarding both physical and mental health for the youth, while intentionally checking in with guardians and community workers. For example, the judge said to one youth, "When I read your reports, I think you're depressed. Is that true?" The youth replied with, "Very much so." The judge then continued the conversation by asking about the youth's treatment and to provide their opinion on whether the services were helping. The judge provided regular compliments to the youth on their appearances, "Your hair is gorgeous" and sobriety, "I wanted to compliment you for being four months sober." The judge extended their praise and attention to the guardians as well, ensuring their inclusion in the hearings. In one case, the judge congratulated the parents for their in-home unification with their child. The judge also acknowledged the emotions of this parent by saying, "I'm sure it's tough for you. You have one kid doing well and one who's not." The judge appeared knowledgeable about the history of each case as they praised one father for completing treatment and maintaining sobriety while then recognizing the mother for moving out from an abusive relationship.

The judge also held courtroom players accountable. In one hearing, the judge inquired about a lack of paperwork for social services, as a community worker previously noted these would be completed. The judge demanded an answer from the worker and noted that it was not appropriate for the worker to personally decide against the completion of the paperwork as it served as a barrier for the youth living on their own. The judge told this same youth, "This is a glowing report for you. You're doing so well. I look forward to you doing big things and not so big things, like just living a happy life." However, at times, the judge also used complex jargon (e.g., fabricated manner; trajectory; frequent flyer), which likely served as a barrier to understanding for the youth and their families.

The second sub-section highlights courtroom procedures. Here, the researchers observed trauma-informed decision-making and collaboration, and coordination. During one rural CINC case, the child indicated they wanted to return home. The judge noted it was not the youth's fault that this could not occur, as the adults needed to "get it together." In another hearing, two parents were petitioning the court to allow their teenager to return home as they had maintained sobriety. In this moment, the judge listened to the attorney's request that the youth be allowed to determine what was in their best interest. The judge noted this was "uncommon", but they would allow the youth to make visitation determinations as the therapist's report indicated that being home "triggered" the youth. The judge furthered this point by saying the parents were doing well, but not well enough for the best interest of the child to be reunified within the home, noting, "My number one priority is her."

While the judge communicated with all parties and worked to collaborate with others, strict courtroom behavior was also required. One youth responded to the judge's question with, "Yeah." The judge waited as the youth said this three more times before realizing they needed to say, "Yes, ma'am." During one hearing, the court report indicated the youth was not doing well. The judge replied, "He won't give all of us the middle finger about school, run around drugging with his girlfriend...He poses a danger to himself, is what's in the report." This reference was to imply the youth could be further moved into the court system, which seemed to be taken as a personal disregard towards the judge's court orders for the youth.

Field Notes: Juvenile/CINC In-person, Urban. As previously noted, the implementation of trauma-informed practices was quite different when comparing the juvenile and CINC dockets. We will speak to observations from both, beginning again with courtroom communication. The CINC judge placed youth at the center of the decision-making process. The judge made comments such as, "I don't want to send the kid mixed messages" when discussing family visitation, followed by, "I'm not trying to retraumatize her." The judge included the youth within their case planning. One youth was asked if they had anything to say and while they indicated they did not, the judge observed their non-verbal behavior and said, "It seems you're upset about something. Did you have any questions for me?" The CINC judge also communicated well with others in the room. When a court appointed special advocate (CASA) stood up in the back of the courtroom to speak, the judge encouraged the CASA to stand "Wherever is most comfortable for you." In another case, the judge praised parents for coparenting. Additionally, when one mother was doing well the judge congratulated her by saying, "Ma'am, you've done a whole lot of hard work. Good job. Keep it up."

In regard to courtroom procedures, the researchers observed one Guardian Ad Litem (GAL) working closely with the judge: "Has trauma of the adoption been fully addressed in therapy?" While the judge and GAL worked together on this issue, in a separate case, the GAL asked the judge to court order that a 17-year-old youth take their medication. The judge noted, "What's in her best interest and what she wants may not be the same thing, but she's old enough

I'm not going to require she take medication." The CINC judge regularly engaged the youth in the conversation and seemed compassionate about their care. In one hearing, the community worker noted the misuse of emergency placements for the youth and the judge replied with, "This is not acceptable." The youth then whispered under their breath when the community worker suggested ongoing therapy. The judge acknowledged this behavior and said, "What did you whisper just now? I don't want to be your enemy. What do you think would be helpful?"

In comparison to the CINC and juvenile docket, trauma-informed communication was quite different. The docket began with a youth in juvenile detention. The judge noted the youth had possession of marijuana charge from two years prior that they did not take care of. The judge said, "I can't believe you didn't miss court and go, 'Oh, I missed court.'" The judge followed up by ordering bond and supervision and saying, "We won't be doing this again. We'll lock you up for longer." Unlike the CINC docket in encouraged communication with the youth and their family, the juvenile docket discouraged interactions like this. One youth was brought into court in handcuffs, including around his wrists, ankles, and waist, and wearing an outfit from juvenile detention. The youth's mother was sobbing in court and as the youth left the room, they said, "I love you. Mom! I love you." No courtroom personnel offered even a split second for the family to speak to one another as the mother loudly cried.

When youth did not understand court jargon, the judge told them to speak with their attorney. From an intersectional lens, this judge did allow a youth to be called by their preferred name in court but indicated that formal court paperwork would have to remain with their legal name. While this judge was sensitive to the appropriate name of the youth, the judge failed to consider financial hardship for this youth and their mother. The youth was said to already be paying back restitution in the amount of \$450 a month and was told they would now pay an additional \$322. The courtroom players failed to see how a youth in high school would struggle to pay back \$772 per month and how this would impose stress upon the mother as well. The judge then lectured the youth on their history of thefts and how they had harmed big businesses. The day ended with the judge and an attorney making fun of the last youth for their attire, after they left the room. The judge said, "You're in court. Dress decent." The attorney laughed and said their pajama pants had already been swapped with the friend who attended court with them—a youth, attending court with no adult. The judge asked where the youth's worker was, and when told there was no worker present to represent the youth, the judge said, "Great. No worker is here. Wonderful!" But court proceeded nonetheless.

Field Notes: Adult In-person, Rural. Observations within the rural JD were quite different within the criminal docket. Within the first sub-section on courtroom communication, the judge read many legal scripts with some consideration for the defendants' educational backgrounds. Some defendants were asked to confirm their educational levels, such as eighth grade, and the judge attempted to paraphrase legal documents. However, many times, the documents were still too technical, which could lead to confusion, frustration, and a sense of

powerlessness. For those who have already been marginalized, this could serve as a retraumatizing situation. During one hearing, the judge said, "The next time you come into the court, you need to wear long pants" as this individual was wearing khaki shorts. The defendant apologized and said they had just come from work. Again, the assumption by the judge was an intentional disregard for courtroom expectations and a lack of regard for any potential struggles (e.g., financial, employment, transportation) endured by the defendant.

At times, the judge further explained jargon-ridden terms from, "That's the prerogative of the court" to, "I could do that is what I mean." Additionally, all defendants were asked if they had a "condition" that would prevent them from understanding the proceedings. It is unclear how someone could accurately respond to this question if they do in fact have a condition that would prevent them from understanding. Yet, in another hearing, the judge ensured the defendant understood the risk assessment being used. In addition to securing a confirmation that the defendant understood, the staff went a step further to ask, "And do you know how the court uses this?" The judge then praised the defendant for speaking up and encouraged them to ask questions. The staff provided their own observations regarding the client's mental well-being by asking, "I understand this is an emotional experience for you. Is this a fair statement?"

Again, the second sub-section highlights courtroom procedures. To begin the docket that day, a defendant was paraded into the room in an orange jumpsuit and handcuffs as they came from a local jail. They remained present for only about two minutes, just enough time to schedule a plea hearing. In such instances, it would be a better approach to utilize remote options. This method is not only cheaper, but also more trauma-informed, as appearing in public in jail attire is stigmatizing, humiliating, and demeaning. In other examples of communication and coordination, one defendant did not appear on time. The judge said if they did not appear by the end of the morning, the judge would issue a bench warrant for their arrest. The defense attorney clarified that the defendant was required to obtain a "secure ride." The defense attorney demonstrated care and compassion for their client as the defendant was required to leave their placement with secure transportation; yet, the court did not take this into consideration when considering arrest. A similar issue of transportation was observed within another hearing. One defendant was ordered to report to court services immediately following the current hearing, which was 15 minutes away. The judge did not ask about employment, transportation, childcare, and so forth, but the court ordered this to occur immediately. At one point, a defendant was said to be deemed indigent. While the judge asked the defense to provide a cost estimate of fees incurred (\$450) to help reduce that amount (\$200), there remained a lack of awareness for the defendant's financial hardship, especially since this individual was sentenced to 18 months in prison and indicated they would lose their new job. Another defense attorney admitted to the court that they were "playing phone tag" with their client and had not communicated with them prior to the hearing. As such, the defendant and attorney lacked a collaborative relationship and the attorney lacked any insight to provide effective counsel.

Field Notes: Adult In-person, Urban. This section will discuss both the resolution docket and the criminal docket with courtroom communication. The resolution docket was created to address the 500+ backlogged cases due to COVID. An outside law firm was contracted to provide public defense. At the time of our observations, 200 cases had been resolved with 95% being pleaded from felony to misdemeanor cases. Defendants met with their attorneys for the first time just prior to the hearing. Defendants seemed uncertain of the proceedings as well as anxious. One individual was asked if they wanted coffee and they said, "No, my stomach is already in knots." No one addressed this person's discomfort. One contracted defender showed us the many forms that lined the tables. This attorney said, "We made these forms as a CYA (Cover Your Own Ass) due to ethics." The attorneys then did about 90% of the talking while defendants just sat and listened. When one attorney met with a client receiving their third Driving Under the Influence (DUI) charge, the attorney told them, "You can't screw up. "If you fail a UA (Urine Analysis), you're in a lot of trouble." The individual began crying and no one offered them a tissue. The attorney continued to note only negative outcomes such as, "I need to hear you say sorry, I need you to say you have a drinking problem." The attorney then referenced doing a jail sanction and said, "Don't do a weekend. It's a fricking circus there on the weekends." The client then cried again, shook their head, took a deep breath, then signed the agreement. At this time, the attorney continued to ignore their needs and referenced the state's prison saying, "TCF is a nasty place. You need to show up to court. Don't make excuses. You know, 'my dog ate my homework' kind of thing."

During official proceedings, the judge regularly used words such as "arraignment" and most defendants seemed unaware of the meaning. Legal jargon was also used in the criminal court. As one example, the judge informed a defendant that he was "An A on your PSI (Presentence Investigation)." The defendant was not asked if they understood this assessment or the meaning of "A."

When referencing courtroom proceedings, defendants were rapidly called by name. In one case, an identified court assistant pronounced the defendant's name incorrectly. The defendant corrected this, and the assistant laughed and did not apologize. In another case, the defendant had a theft charge from their prior employer. This person was not given a chance to speak, then ordered to complete a substance use evaluation, which had nothing to do with their case. Defendants could not actively participate in the proceedings as they were unsure who played each role. Prior to one hearing, a defendant spoke to their attorney (not knowing who this person was), and said they knew this person was not their attorney and the attorney replied with, "Yes, I'm a girl, but I'm also an attorney." The sarcasm was unfortunate and telling that defendants had little idea who served in each role. Overall, there was no flexibility in cases as they felt much more like a conveyor belt approach to "justice."

Within the criminal docket, there appeared to be minimal understanding of the impact of trauma on memory. Within the conversation of vehicular homicide, another victim was said to

have sought medical care days following the crash. The defense attorney questioned whether this was an actual injury since immediate medical care was declined at the scene—demonstrating a lack of understanding on how individuals may respond in a stressful situation. Yet, during this same trial, the deceased woman's family provided a victim-impact statement regarding her death. Prior to giving the oral statement, the county attorney spoke with the victim's father and encouraged him to stand in the crowd so he could be amongst his loved ones. Yet, even with intentional effort to keep the father with his family, the set-up of the courtroom allowed for a constant flow of outside individuals coming and going during the reading of the statement, causing loud noises and disruption.

Courtroom Environment. The third and final sub-section of each rubric included the courtroom environment (e.g., physical set-up). The same courtroom was utilized in the rural JD for both juvenile and adult dockets. The courthouse had historic charm and traditional courtroom decorum. The hearing room was large, and those navigating the courtroom sat at the front of the oversized space. Within the urban JD, the juvenile court hearings were held at a separate location from the adult cases. Youth and their families could park in a provided parking lot close to the building, and they sat in waiting rooms and watched as television screens flashed their initials, room number, and time. If an attorney needed to speak to them, they had private spaces for counsel. At the adult courthouse location, parking was difficult to access, and charges were incurred. The resolution docket was located in a semi-converted cafeteria whereas the criminal docket occurred in a traditional courtroom. Within the cafeteria, an echo made it difficult to hear clearly and all the furniture and structure seemed to be an after-thought (e.g., a crooked clock on the wall that was not working).

In all spaces and locations, individuals would have to go through metal detectors with uniformed officers. There appeared to be no quiet locations, safe spaces, or assistance with childcare. Unless already notified, translators did not appear in the courtroom. All locations were extremely cold in temperature with uncomfortable seating options. However, those in positions of power (e.g., judges and attorneys) usually had cushioned seats; while this may seem minor, it did suggest a lack of trauma awareness for one's physical environment. Yet, as was seen in the surveys, most respondents felt they were trauma-informed and actively engaging in such practices.

Many times, conversations with attorneys and defendants and victims were had within an ear's length of those sitting in the audience. With the resolution docket, private and confidential conversations were held in walkways and open tables with strangers around—again, an inconsistent finding with what was shared within the survey administration phase. Individuals were in such proximity that even during the vehicular homicide case, the defendant was brought in directly next to the victim's family. Surviving victims were asked to enter the front of the courtroom directly in front of cameras (media) and those in the crowd. Overall, the courtroom structures were not created with trauma-informed needs in mind.

Our triangulation of survey findings and courtroom observations suggest many discrepancies. Overall, survey respondents reported multiple hours of formal training on the topic of trauma-informed practices. Additionally, in rural areas, participants felt both they and other system professionals were also knowledgeable and competent in such practices. However, our observations demonstrate that minimal efforts are made to alter the physical environment; that system players are not consistently, nor at times, ever, demonstrating trauma-informed approaches. It seems that criminal legal system staff have either overestimated their efforts with engaging in trauma-informed practice, or perhaps, while they understand the concept, they are less knowledge regarding implementation.

Discussion

This pilot project sought to better understand the training and implementation of trauma-informed practices in one rural and one urban judicial district in a predominately rural state in the Midwest. While the study included two years of data collection utilizing a variety of methodologies, the current findings focused on survey responses and courtroom observations for juvenile, CINC, and adult courtrooms. Equipped with the knowledge that many rural locations have less access to resources, including for juvenile system staff, we began the project believing that the urban JD would report greater access to, and completion of, trauma-informed training. Likewise, we began the project assuming we would see greater implementation of trauma-informed practices within the courtroom observations.

Our study revealed significant variations in implementing trauma-informed strategies across different court types and the urban-rural demographic spectrum. Moreover, the research highlights a significant paradox in courtroom proceedings—the tension between the demands for a speedy trial and efficiency and the time required to offer care, empathy, and a trauma-informed approach. This conflict stresses the necessity for a careful balance that upholds justice while considering the traumas experienced by individuals and the requisite care for all parties involved. Our findings point to several areas of opportunity for both the resource-rich (urban JD) and resource deserts (rural JD). However, our hypotheses were not supported by our findings. We found that rural staff reported equivalent access to, and completion of, trauma-informed training. We also found that the rural jurisdiction demonstrated practices more closely aligned with trauma-informed approaches when compared to their urban counterpart. Given the limited availability of services and resources, widespread poverty, limited educational opportunities, high rates of substance dependency, and concurrent public health challenges in rural areas, courtroom personnel have recognized a pressing need to embrace a trauma-informed and survivor-centered approach within the courtroom environment.

Three specific findings warrant further discussion and consideration: 1) survey participants in both JDs reported hours of training on trauma-informed practices, but less attention to awareness and implementation of self-care practices; 2) survey respondents in both

JDs acknowledged the lack of a trauma-informed team; and 3) rural justice workers are concerned with a lack of safe places for their clients along with no written policy to guide trauma-informed practices while the urban JD focused more the importance of trauma-informed care implementation for new hires and throughout the merit process. We encourage others to further pursue these three findings in future studies.

Limitations

As with all studies, this study is not without limitations. First, this is a pilot project that included only two judicial districts. It is possible to have selected a rural JD with an even lower overall population, but we selected our location based on pre-established relationships and geographic location within the state. The selected urban JD is also the largest JD in the state; perhaps selecting another urban location, but not *the* largest, could have impacted responses and observations. Second, the overall response rate on the survey was at an acceptable level, but still too low to do a comparison across the rural and urban responses. We must also be aware of the potential impact our physical presence had during courtroom observations—justice workers may have altered their behavior knowing two researchers were there observing. Lastly, we relied primarily on a self-created survey instrument and courtroom observation rubric due to a lack of preexisting options. Further scholars could work to validate the survey and rubric to ensure accuracy in measuring the desired trauma-informed information.

Implications

Implications for Practice. As scholars before us have noted, full system adoption of trauma-informed practices is necessary to truly recognize, and respond, to trauma for system-involved youths and adults and justice workers. These practices should include trauma screening and assessment, followed by trauma-focused interventions, and workforce training, to support a strength, rather than risk-based focus (National Center for Child Traumatic Stress, 2016). This approach moves an agency from trauma-sensitive (putting some operations into trauma-informed frameworks) to trauma-responsive (encouragement to implement an entire system of trauma-informed care).

As noted, previous literature and the current findings note many barriers to the implementation of trauma-informed practices within the juvenile and criminal legal systems. In all geographic locations, but especially rural areas, limited access to mental health and other social services resources is glaring. Some have proposed funding for internet-based solutions, but technical feasibility, user ability, and costs, may still put services at bay for underserved communities (Ezell et al., 2018). Additionally, successful implementation requires local and state-level governmental support, along with understanding and support by court personnel (Moreland & Ressler, 2021; Ezell et al., 2018). Yet, there are existing guidelines, provided protocols, and programs that agencies who offer consulting will tailor to their location. For example, rural JD felt they most needed a safe space for clients. Additionally, both JDs

referenced a need for improved trauma-informed practices specific to self-care. As prior research has shown, lawyers suffer disproportionately from trauma and mental health vulnerabilities that reduce their effectiveness (Krieger & Sheldon, 2015). Failure of the judicial system to recognize compassion fatigue within the courtroom players, can lead to a snowballing effect of negative outcomes. Consultants could help provide research to present to local stakeholders on the value of such initiatives.

Implications for Policies. In our research findings, we identified significant disparities in the understanding, practice, and implementation of trauma-informed care across various sectors within the court system. These discrepancies became apparent when comparing the perspectives and approaches of probation officers and community corrections personnel with those of judges, defense attorneys, and prosecutors. Additionally, differences were observed among adult, juvenile, family, and protection order-related courts. It is evident that there exists unequal access to education on the principles of trauma-informed care and the effective methods for its application among these personnel. This disparity in knowledge and practice can result in confusion and conflicts during courtroom proceedings. As a solution, we recommend the standardization of training in trauma-informed practices. Furthermore, we advocate for proactive discussions and communication among courtroom personnel to establish a shared and comprehensive understanding of trauma-informed care. We firmly advocate that training and dialogues centered on trauma-informed care should not be optional but rather mandated and continuous. This ongoing education and practical application are fundamental to ensure that all members of the criminal justice personnel remain acutely aware of why trauma-informed care is indispensable. As we advocate for the establishment of a trauma-informed team comprising court personnel, stakeholders, and public health professionals, it is imperative to underscore the importance of maintaining this heightened awareness and commitment to excellence in execution.

For jurisdictions to gain a better understanding of what others are doing, they could consult initiatives that have been effective. Thirkle et al. (2021) noted that a trauma-informed framework should be both dynamic and flexible and reevaluated regularly. For example, the National Council of Juvenile and Family Court Judges (NCJFCJ) developed a protocol for juvenile and family courts and allied systems, focusing on court trauma consultation (Marsh et al., 2015). Resources also exist for creating a trauma-informed framework (Pickens et al., 2019) as well as sources for prosecuting attorneys working in the juvenile justice system (Baetz et al., 2021). Interested jurisdictions could also review successful initiatives such as the Texas Model (Texas Juvenile Justice Department), STEP UP Texas (Starry), Project JUTIS in Colorado (Colorado State University), and the TIC Project in North Carolina (Center for Child & Family Health).

Both JDs noted the lack of a trauma-informed care team. Jurisdictions nationwide could consider a teams-based approach. This approach involves creating a team of advocates assigned

to any role within the court case. This could include the judge, evaluators (e.g., screening or psychological), attorneys, child protective services, and mental health and substance use providers. Investing time, money and energy upfront, can help build collaboration between all parties and ensure individualized hearings and case planning. Tailored plans can also be guided by the use of a trauma screening and assessment process—as this was lacking in both JDs in the current study.

Issues for implementation are not a short list—barriers are plentiful. Firstly, individuals must have some buy-in. Some question whether courtroom workers would be able and willing to move away from the adversarial model under the spirit of "it's always been done this way." Practitioners and future scholars should also consider the nature of training and whether it is voluntary or mandatory. Additionally, when training is offered remotely, participants may not actively engage. If training were to be mandatory, funding could be a barrier. If all courtroom workers were engaged in a full menu of trauma-informed practices, in rural areas, they would still lack providers. Systemwide implementation could not only improve overall well-being for system-involved persons, but also reduce traumatic stress, safety concerns, and recidivism (Marsh et al., 2015; Skinner-Osei et al., 2019). There are additional benefits on the organizational level by decreasing staff burnout and increasing the staffs' sense of safety (Hashweh et al., 2023; Sheppard et al., 2022). Additionally, it is "easy" to provide agencies with trauma-informed knowledge, but in rural areas, studies consistently find actual implementation is difficult due to limited referral options (Ezell et al., 2013).

Conclusion

Trauma and trauma-informed care/practice have long been established concepts in various fields, including child development, early childhood education, social work, psychology, and the juvenile justice system. While progress has been made in introducing trauma-informed approaches within the criminal legal system, challenges persist, particularly among practitioners and legislators who grapple with the complex duality of individuals as both victims and offenders. The ongoing debate within this context revolves around whether the emphasis should primarily be on holding individuals accountable for their actions or whether they should be viewed through the lens of individuals who have experienced trauma, with their criminal behaviors potentially seen as coping mechanisms in response to the trauma and abuse (Terry & Williams, 2021). This debate raises critical questions about striking the right balance between accountability and rehabilitation for those involved in the justice system. It is essential to underscore that being trauma-informed is not a passing trend or a concept driven by trendy ideas. It should not be dismissed as a fleeting and superficial notion that may quickly fall out of favor. Instead, it should be recognized as a catalyst for the criminal legal system to engage in a comprehensive reevaluation of systemic issues and to address the persistent and concerning issue of high recidivism rates (Stein et al., 2015). This concern extends beyond adult populations and encompasses the destructive cycle of incarceration that deeply affects families and communities.

While we acknowledge the growing awareness and recognition of trauma-informed practices in various courts and jurisdictions and appreciate the resources available for professionals to enhance their skills in trauma-informed care, it is essential to emphasize that the punitive and short-sighted approach within the criminal legal system has proven to be ineffective and even counterproductive. Being trauma-informed is a crucial approach rooted in evidence-based practices that deeply consider the lived experiences of individuals who have endured victimization and, often at times, have been involved in offending behavior (Thirkle et al., 2021). It transcends isolated perspectives by addressing issues holistically, acknowledging both ongoing challenges and the intergenerational impact of trauma. Embracing a trauma-informed approach holds immense promise for the criminal legal system, as it enables practitioners to effectively confront the short and long-term issues confronting justice-involved individuals. The overarching objectives are to substantially reduce recidivism rates and to champion the principles of reconciliation and restorative justice (Ezell et al., 2018).

Finally, we stress that being trauma-informed should permeate every facet of the work environment. It should not be a sporadic endeavor activated solely when interacting with clients or individuals. Instead, trauma-informed practices should be seamlessly integrated into the organizational culture (Bateman et al., 2013; Fallot & Harris, 2001). It is incumbent upon everyone, from supervisors to newly onboarded staff, to possess a deep understanding of the repercussions of vicarious trauma and secondary trauma. Promoting a workplace where individuals feel empowered to seek assistance, when needed, should be actively encouraged and normalized. This approach fosters a work environment that is not merely efficient but one that is nurturing and empathetic as well. As the age-old saying goes, "practice makes perfect," and just as you cannot merely talk the talk without walking the walk, a trauma-informed approach cannot be sustained and embraced unless it becomes deeply ingrained within the cultural norms of work and the overarching philosophy of the criminal justice system.

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