



Best Practices for Trauma-Informed Reentry

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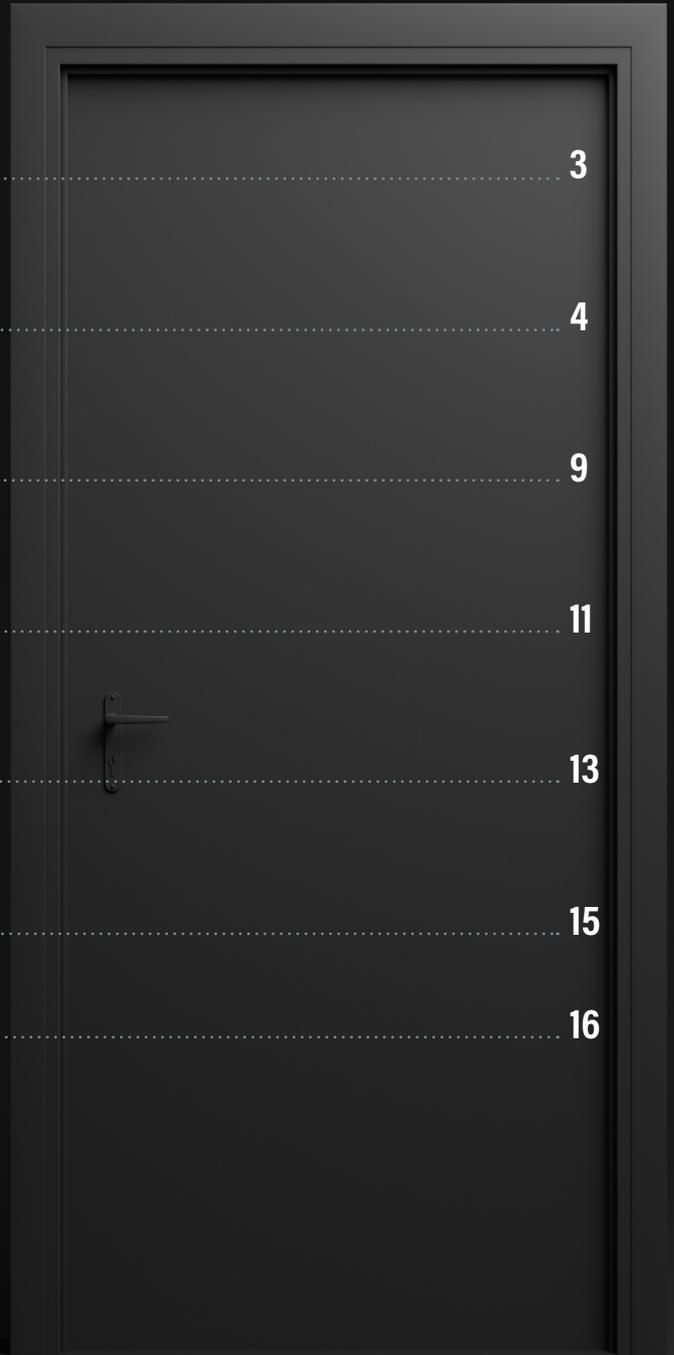


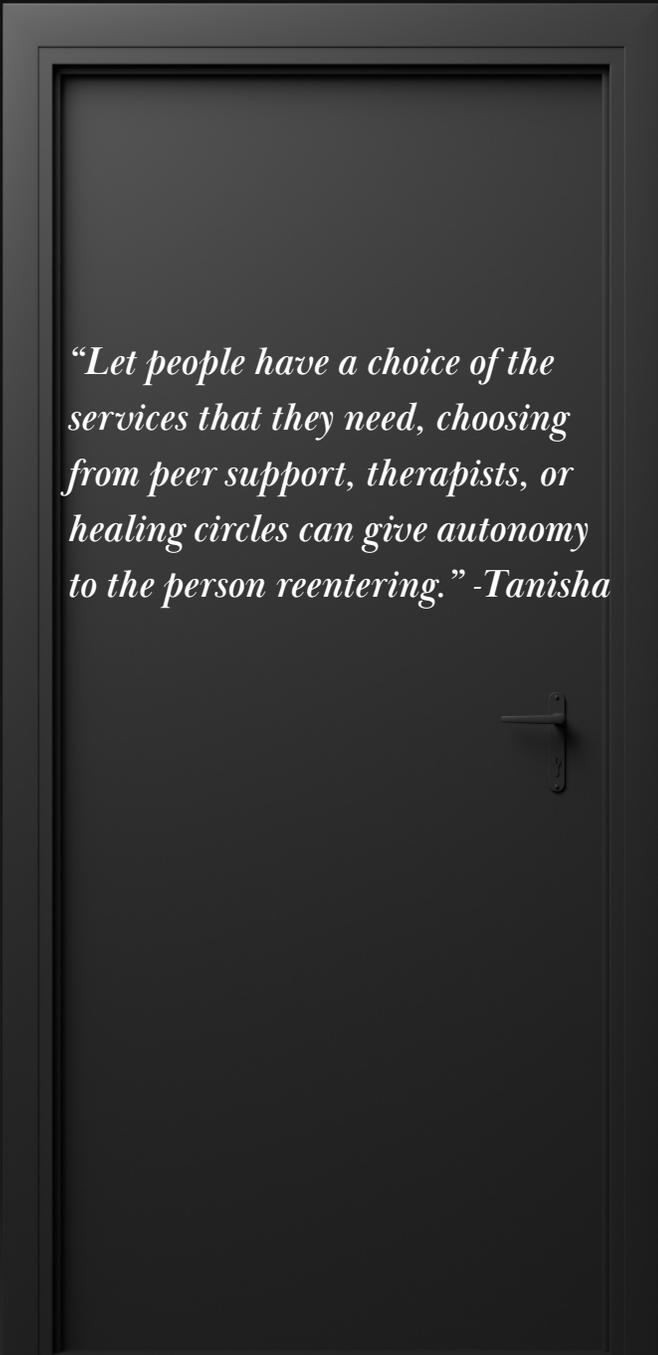
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“Let people have a choice of the services that they need, choosing from peer support, therapists, or healing circles can give autonomy to the person reentering.” -Tanisha

Reentering the community after incarceration is a complicated, lengthy process that can be made more difficult by system failures and a lack of available support and services. To complicate this already confusing and overwhelming system, many people reentering their communities have long histories of victimization and trauma and are often living in survival mode. These survivors have specific needs when reentering their communities after incarceration, but these are rarely taken into consideration when organizations are developing reentry programs. The National Center for Victims of Crime convened a group of experts with lived experience with victimization and incarceration to discuss how to make the reentry process more trauma-informed and what steps organizations should take to center the needs of survivors in reentry services. We want to extend a special thank you to Tanisha Murden, Rylinda Rhodes, and Jason Whitmer for their participation, which was essential to this report and the recommendations it provides. You'll see their first names in pull quotes throughout this report. The five takeaways below are intended as a starting point for organizations that are working in this space. It's our hope that they will help create more equitable, trauma-informed processes for all people reentering their communities.

Key Takeaway 1:

Every person is different and has different needs related to their past trauma.

[Trauma](#) results from exposure to an incident or series of events that are emotionally disturbing or life-threatening with lasting adverse effects on a person's functioning and mental, physical, social, emotional, financial, and/or spiritual well-being. Experiences that may be traumatic include physical, sexual, and emotional abuse; childhood neglect; living with a family member with mental health or substance use disorders; sudden, unexplained separation from a loved one; poverty; racism, discrimination, and oppression; and violence in the community, war, or terrorism.

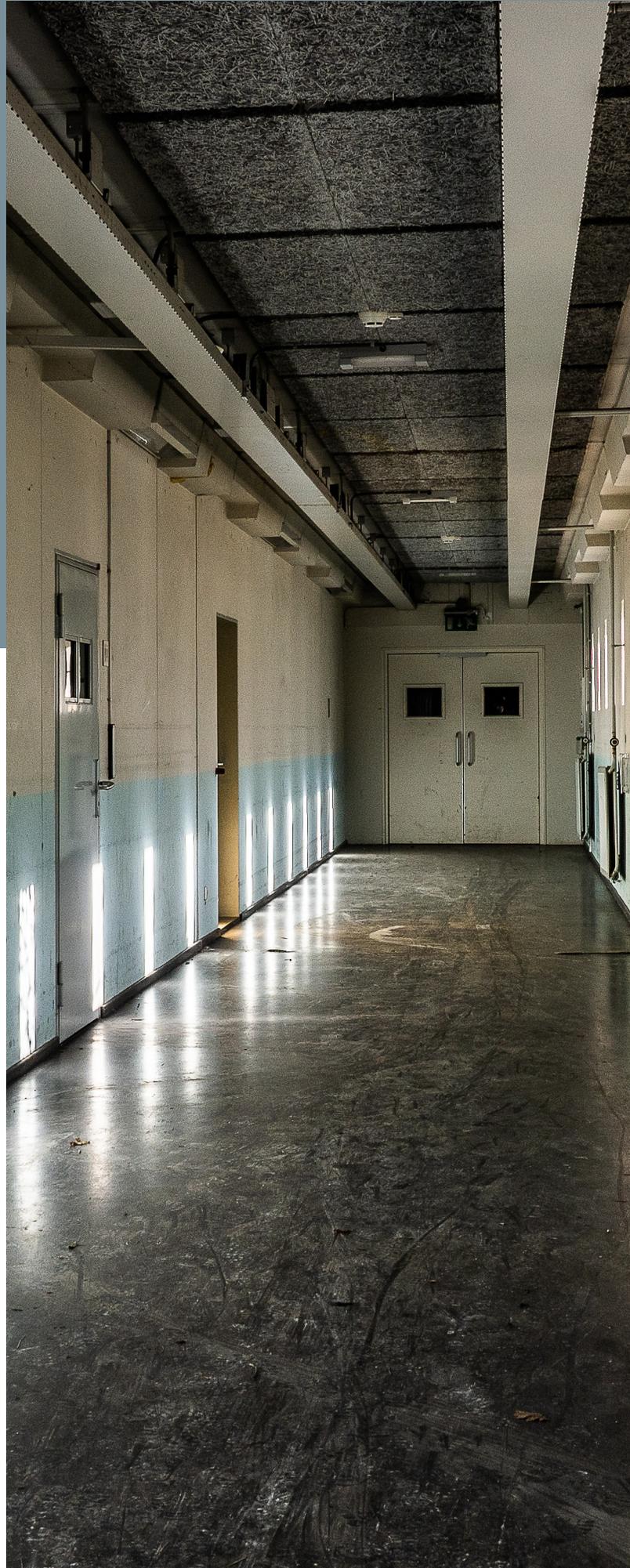
[According to the Centers for Disease Control and Prevention](#), around 60% of adults have at least one traumatic childhood experience, compared to 97% of people who are incarcerated. People who are incarcerated have an average of at least five traumatic childhood experiences. [Ninety percent of adolescents and 99% of adults](#) who are incarcerated report histories of potentially traumatic events. Compared with the general population, both children and adults who are incarcerated are more likely to report multiple traumatic events, childhood exposure to trauma, and potentially traumatic events involving interpersonal violence. Up to 50% of children and adults who are incarcerated have experienced four or more childhood traumatic events compared with approximately 12% of



the general population. Marginalized groups that are overrepresented in the carceral system (e.g., Black, American Indian, LGBTQIA+ populations) also bear the weight of exposure to trauma associated with being part of a historically stigmatized, oppressed, and victimized group of people who are still experiencing the effects of discrimination. Trauma exposure, particularly during childhood, increases the risk of contact with the legal system in adolescence and adulthood. Childhood trauma is associated with arrest, recidivism, incarceration, and multiple incarcerations.

“My last day was just as fearful as my first day entering prison. As a mother, I am expected to be ‘mom’ immediately. No one instructs you on how to balance practical tasks and the emotions that come with everything and the over-stimulation after long stints of incarceration.” - Rylinda

[The carceral environment](#) is inherently traumatizing by removing people from society and eliminating meaning and purpose from their lives. Adding to this stress, appalling conditions common in jails and prisons — like overcrowding, solitary confinement, and routine exposure to violence — are also traumatizing. Researchers have theorized that the trauma people experience while incarcerated can lead to post-incarceration syndrome, a syndrome similar to post-traumatic stress disorder (PTSD). Even after serving their sentences, many formerly incarcerated people continue to suffer mental effects from their time in jails or prisons, including institutionalized personality traits (like distrusting others, difficulty maintaining relationships, and problems making decisions), social-sensory disorientation (issues with spatial reasoning and difficulty with social interactions), and social and temporal alienation (the feeling of not belonging in social settings). People who are incarcerated experience high rates of potentially traumatic events, which is strongly correlated with rates of PTSD upon release.

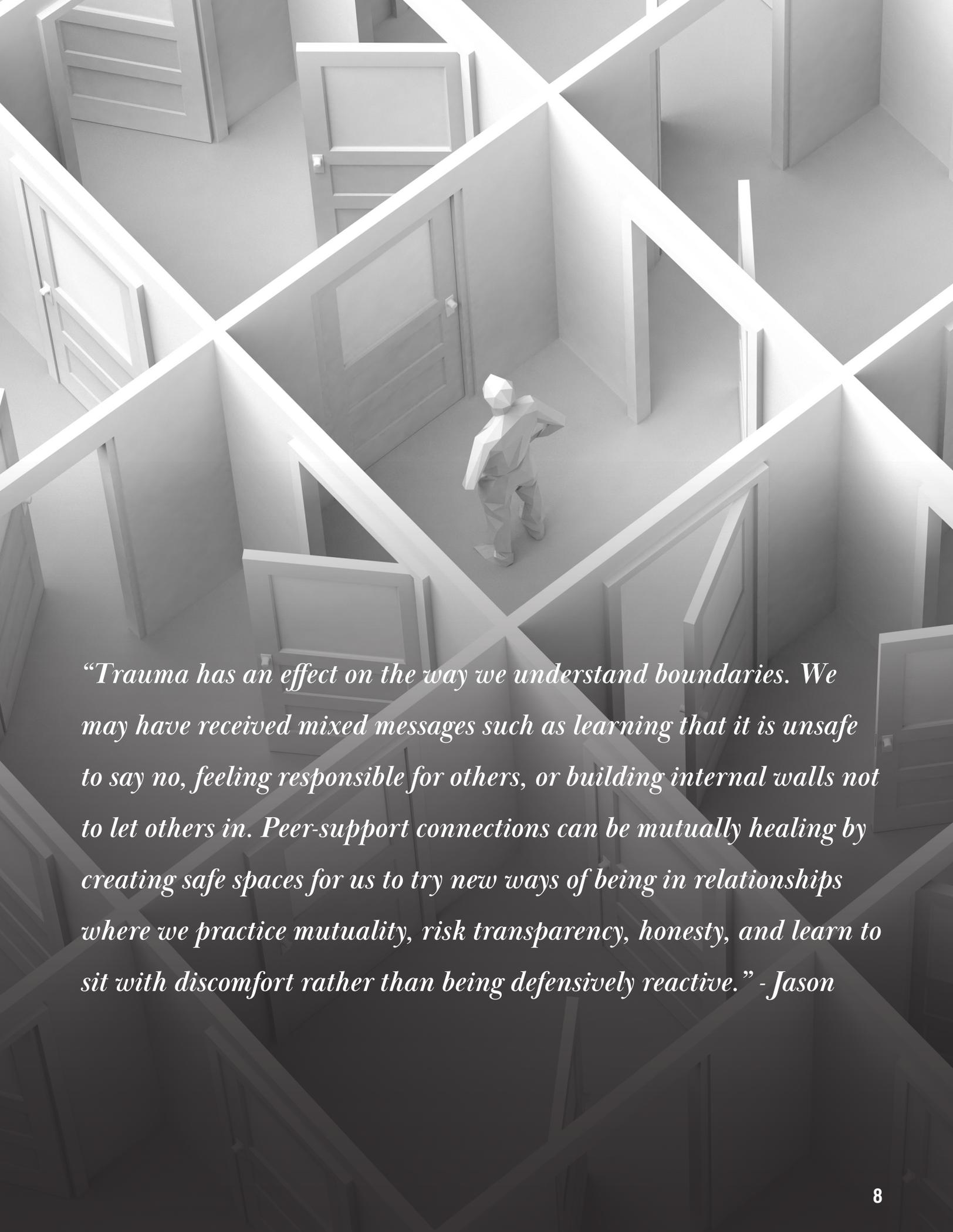




“It’s like Star Trek – the tech leap. You are literally coming out in a different time and have to relearn everything.” - Jason

[When people leave jail](#), they face many challenges in meeting their basic survival and material needs, including securing food, housing, transportation, employment, and sometimes medical care. They are also figuring out how to reunite with their family and rebuild relationships that may have changed during incarceration. These challenges often overshadow their emotional and psychological needs and create barriers to healing from trauma. When people who have been incarcerated have unaddressed trauma, they may experience a range of serious negative outcomes. For example, if they are struggling with anxiety or depression and cannot get out of bed in time for an appointment

with a parole officer or they are self-medicating their symptoms with substances, their actions may constitute a technical violation of their parole conditions, resulting in them being sent back to jail. If they are sometimes triggered by large gatherings and their job requires them to be surrounded by people, they may quit or behave in ways that lead to their termination. This in turn could sabotage their reentry success and put them at greater risk for recidivism. Scenarios like these underscore the need for trauma-informed reentry services that allow people to make mistakes and be imperfect.



“Trauma has an effect on the way we understand boundaries. We may have received mixed messages such as learning that it is unsafe to say no, feeling responsible for others, or building internal walls not to let others in. Peer-support connections can be mutually healing by creating safe spaces for us to try new ways of being in relationships where we practice mutuality, risk transparency, honesty, and learn to sit with discomfort rather than being defensively reactive.” - Jason

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Key Takeaway 2: **Centering families and children with wraparound support**

[Family connections](#) are critical to successful reentry as they offer crucial emotional and psychological support, help people who are incarcerated gain practical support, and mitigate the harm parental incarceration has on children.

[Support and attachment](#) to the family facilitates community reintegration and reduces recidivism. Families are the greatest source of financial resources, housing, and emotional support prior to release and provide the greatest tangible and emotional support after release. An increased number of visits — and receiving visits close to an incarcerated person's release date — delays the onset of and reduces recidivism. Families affected by incarceration face many challenges, including separation, economic stress, stigmatization, changes in relationships roles/structure, and altered social networks. These challenges have been associated with negative outcomes for children. Parental incarceration is recognized as an adverse childhood experience and can significantly increase the likelihood of long-term negative outcomes for children.



“If you’re a parent, you are required to jump back in fully. No one thinks about that. I have to be mom, aunt, employee, and have no mental health support. My children are traumatized as well.” - Rylinda



[Although positive family support](#) is linked to a more successful reentry, providing support can place a substantial emotional, social, and fiscal toll on families.

[Family-inclusive case management](#) engages family members, close friends, mentors, faith leaders, and others who play a significant role in a formerly incarcerated person's life in the planning process in the transition from prison or jail to the community. This provides formalized opportunities to maintain connections with family members and friends. This type of case management ideally starts when a person is incarcerated and continues after release.

Peer support can assist with family reunification by peers sharing their own lived experience navigating this process. Peers can be sounding boards and a source of support to both the formerly incarcerated person and the family. They can provide hope by being examples of recovery and provide a safe place for everyone involved to be honest about fears and concerns.

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Key Takeaway 3:

Create low-barrier access to services and consider having many types of service located in the same place.

[It is undeniably challenging for people](#) leaving incarceration to stabilize their lives on the outside, particularly with the seeming inevitability of running afoul of some rules, even if they are not reoffending. While many communities have the resources to assemble better-coordinated service for people who are reentering, those resources are not always connected in a way that provides efficient support. In some cases, organizations may be more focused on outcomes rather than building relationships. While this can be necessary due to funding requirements, such organizations must emphasize building trust to avoid retraumatization.

[Reentry Centers](#) have the potential to help people returning from incarceration with their myriad needs, such as establishing housing or shelter, finding employment, arranging transportation, treating substance-use disorders and mental health conditions, and accessing medical care.

These services can be offered by people who have lived experience successfully reintegrating. They understand the everyday challenges faced during reentry, which is especially important in situations when the community a person is reentering has changed since their incarceration began. Some community members may not be supportive of a formerly incarcerated person's effort to move beyond their past mistakes, so access to a peer who understands the internal and external challenges of reentry can be a crucial element of support. A supportive peer both helps the person who is reentering see that they are not alone and serves as an example that success is possible.





“You are just one step away from being in a jail cell instead of someone partnering with you to help you ... This is why our recidivism is so high.” - Rylinda

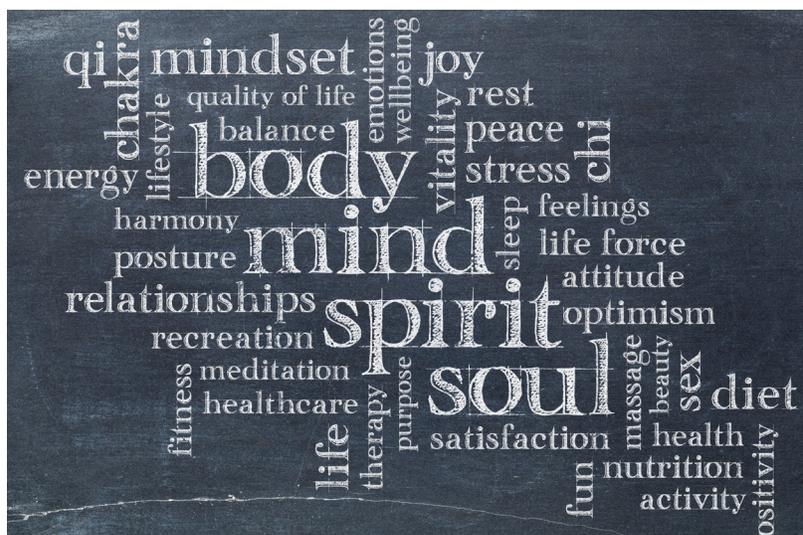
Key Takeaway 4:

Infuse knowledge of trauma and how it manifests into every step of reentry

[People who are incarcerated](#) have often undergone significant trauma, but they also demonstrate a tremendous amount of resilience. Parole officers, case managers, and other providers in the reentry field can help clients by using case planning and service referrals built on the factors that promote healing from traumatic stress and resilience against potentially traumatic events in the future. Those referrals and case-planning tactics could include social support (peers, family, coworkers), stable employment or school connections, coping skills, and spirituality.

Referrals to trauma-specific treatments can help clients learn strategies for coping with PTSD, post-incarceration syndrome, and other trauma-related conditions. Reentry providers can help clients cultivate social support with mentors, peers, and other community sources. They can also assist clients identify opportunities for employment, vocational training, or continuing education. Further, reentry providers can assist clients in finding or reconnecting with a local faith community.

Reentry providers must receive training to increase their knowledge and skill in working with clients affected by trauma. This should include training on the impact of trauma on clients, the impact of vicarious trauma on themselves and their peers, principles of trauma-informed care, and specific trauma-informed skills, such as de-escalation. Moreover, providers should receive ongoing coaching or supervision to promote staff mastery of new trauma-informed skills. Service providers should not underestimate the importance and impact of positive reinforcement on people who are reentering. When someone hears that they are succeeding in their goals, it can also help with the trust-building process.





“Not a lot of therapists understand reentry and understand how to deal with us. Everybody is not the same.” -Tanisha

“Restorative justice should be huge in this system, but that’s a hard concept for people to grasp.” - Jason

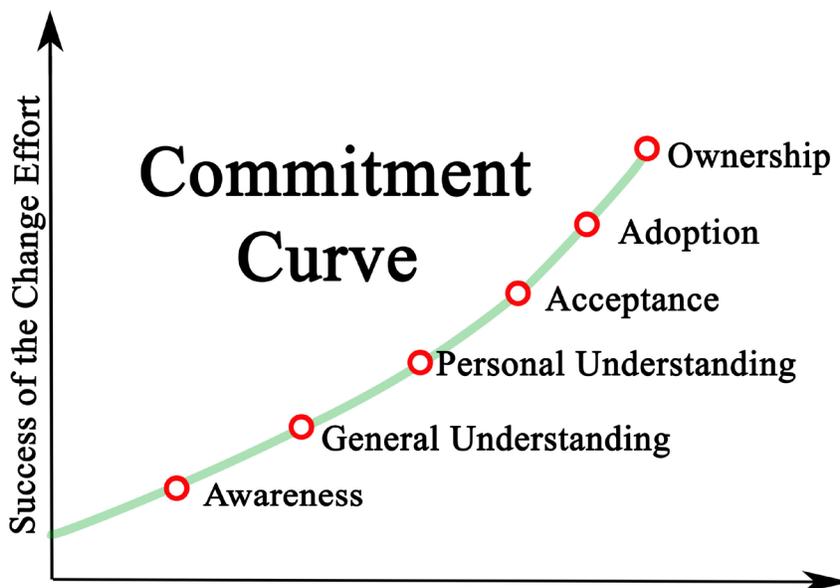
Key Takeaway 5:

Implement healing practices (restorative justice, healing circles, etc.) into all reentry plans.

[The purpose of restorative reentry](#) processes is to aid people in a successful transition home by repairing harm to the extent possible. This aids people returning from incarceration to rebuild support, ultimately reducing recidivism and trauma.

[Restorative justice can use a trauma-informed approach](#) by recognizing the impact of trauma on both the victim and the person who perpetrated the crime and addressing those effects in the process of restoring harm and repairing relationships. By focusing on the traumatic impact, preventive strategies can be formulated. A trauma-informed restorative justice process involves understanding the prevalence of trauma, recognizing signs and symptoms, responding with empathy and support, and taking steps to avoid retraumatization.

For the victim, a trauma-informed restorative justice process would involve creating a safe space and supportive environment to share their experiences, feelings, and needs. It would also involve providing appropriate support and resources for them to heal from the trauma. For the person who perpetrated the crime, a trauma-informed restorative justice process would involve understanding the role of trauma in their actions and addressing those underlying issues as part of their rehabilitation. A trauma-informed restorative justice process necessitates training and educating all parties involved, including facilitators, about trauma and its effects to create a more empathetic and effective process.





Promising Programs

[Leaving Jail: A Trauma-Informed Reentry Program for Women](#)

This innovative reentry program is designed to address the unique needs of women who are incarcerated through trauma-informed, gender-responsive, and culturally competent programming. Leaving Jail bridges the gap between pre- and post-release to foster successful reentry back into the community and reduce recidivism.

[Greenlight Family Reintegration Program](#)

This program allows people who are incarcerated to engage in activities with their families because of the crucial role the family is likely to play in the reentry experience. The program focuses on both exploring ways family members can support the person returning home and on helping the family anticipate and, if possible, resolve family issues.

[Benedict Center's Women's Reentry Program](#)

This is a voluntary program designed to support women while incarcerated at the Milwaukee County Community Reintegration Center and their transition back into the community. Women begin their healing journey with specially designed curricula to address trauma, substance use, and interpersonal violence. They increase their skills and self-efficacy through groups, individual sessions, and strength-based case management. Topics include cognitive behavioral therapy, trauma coping, nurturing parenting, life skills, support for women in sex work or sex trafficking, employment, violence prevention, trauma-informed yoga, and mindfulness practice.

[Safer Return](#)

Safer Return is a community-based comprehensive reentry program implemented in the Garfield Park community of Chicago. Safe Return is intended to increase public safety and the successful reintegration of people returning from incarceration to the community using a three-pronged approach: addressing key individual and family needs, introducing system reforms, and improving the local conditions that present barriers to success.

[Support4Families](#)

The Support4Families program consists of six phases of intervention and support for family members and loved ones of people who are incarcerated. Families attend the first six weeks of programming before their loved one returns from prison; the remaining sessions occur during the early weeks after their loved one comes home. The goal of Support4Families is to help families reduce stress as a means to enhance the stability and sustainability of families upon a loved one's reentry, to intervene in reentry-related problems before problems intensify or escalate, and to recognize when and how to connect themselves and their loved ones to formal and informal support resources.

[Reentry Centers](#)

Resource Reentry Center, Bernalillo County, New Mexico

Rapid Resource Center, Franklin County, Ohio

As mentioned at the beginning of this report, we recognize that implementing these best practices may be a lengthy process. However, we think that this process is well worth the effort. We believe the recognition of trauma history and experiences of victimization within the reentry community is integral and that the introduction of these trauma-informed principles will create more sustainable and successful programs.