

# From Behind the Wall and Beyond: Working With Men in the Criminal Justice System

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## Self-care

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- Trauma-Informed Training
- Balance Vulnerability with Safety

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## Grounding Exercise

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## Gender 101

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- Sex
- Gender
- Gender Identity
- Gender Expression

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## Male Socialization

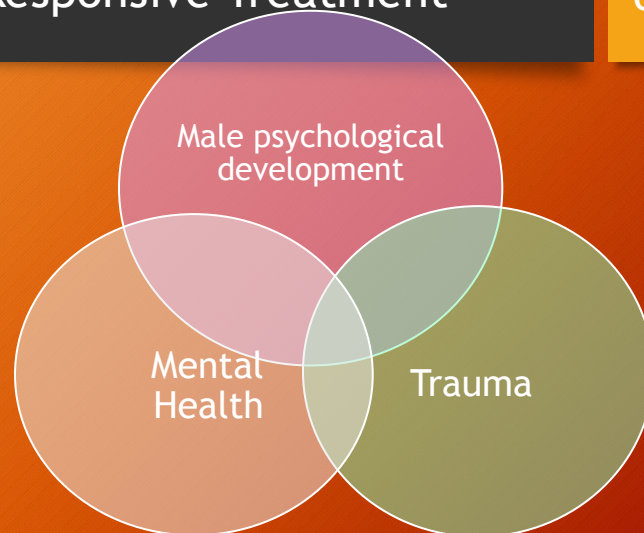
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- The Expectations of “Being a Man”
- The Expectations of Therapy/Recovery

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## Male Responsive Treatment

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## When does society start imposing gender rules? 7

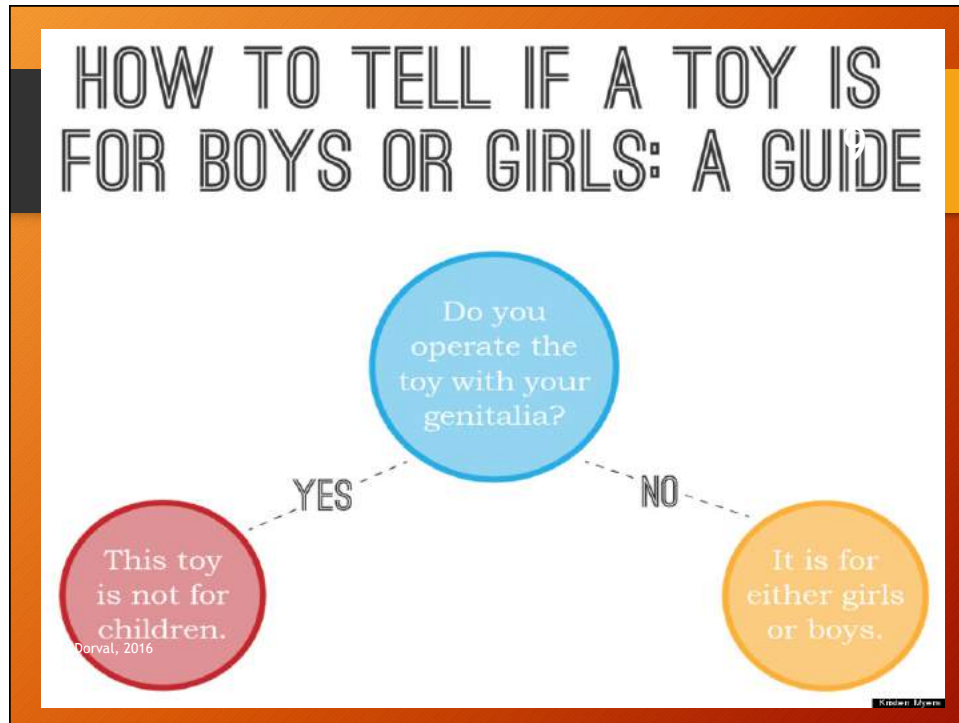
- “The stage is set at an early age for the induction of “boy code” where boys are taught to keep emotions in check, violence is acceptable as a response to emotional unrest, self-esteem is based on power, and all “feminine qualities” must be rejected”~ (Pollack, 1999).

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## Consider This... 8

- Studies have shown that a newborn baby covered with a blue blanket will be touched less and spoken to more firmly than a newborn in a pink blanket (Newman, 2008).

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“

In the old war code, warriors were expendable but women and children were to be protected behind the shield. Granted the sanctity of innocence was violated as often as it was respected in warfare. The point is: NO ONE EVEN SUGGESTED THAT MEN'S LIVES HAVE A CLAIM TO THE SANCTITY AFFORDED, in theory, to women and children. It is wrong to kill women and children but men are legitimate candidates for systematic slaughter-cannon fodder.

”

Keen, S., 1991 p.46 Fire in the Belly: On Being a Man

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## It's a Harsh World for Males

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- The majority of children in foster care and group homes are boys (Kipnis, 2009).
- Seventy five percent of suspensions, expulsions, grade failures, and special education referrals go to boys (Kipnis, 2009).
- Seventy nine percent of suicides are males (Centers for Disease control and Prevention, 2010).
- Seventy two percent of homeless are males (US Department of Housing and Urban Development, 2009).
- Ninety three percent of prison inmates are men (US Department of Justice, 2010).
- Ninety nine percent of executed prisoners are men (US Department of Justice, 2010).
- There have been well documented studies on the relationship between early childhood sexual trauma and substance use disorders in men (Ouimette et al, 2000)

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## Why is Trauma Integration important?

Worldwide, it is estimated that two-thirds of the population is exposed to a traumatic events that meet the DSM stressor criteria for PTSD.

According to the National Center for PTSD:

- 61% of men and 51% of women report having experienced at least one traumatic event (lifetime)
- 10% of men and 6% of women report having experienced four or more traumatic events (lifetime)

## Incarcerated Men

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- 97% of incarcerated men in RI Medium Security prison had histories of trauma (Glantz, Harrison, & Cable, 2017)
- Of 8 men interviewed in RI Maximum Security prison, 100% had more than Criterion A experience for PTSD and 6 of 8 met PCL-5 cut off for PTSD symptoms (Dorval, unpublished)

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## Not all men are socialized equally

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- Gangs
- Military
- Prison
- Sports
- Corporate World
- Politics

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## Relational Cultural Theory For Men

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### A New Psychology of Men

- Inspired by feminist scholars
- Challenged traditional male roles and the traditional interpretation of masculine psychological development (Freud, Erikson, etc.)

## Guiding Principles of RCT

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- All beings yearn for connection
- All growth occurs in connection - through and towards relationships
- Relational competence allows for connection

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## Men are Not the Problem

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- How men have been socialized is the problem
- Homophobia, devaluation of women, violence, detached fathering, and emotional illiteracy
- Expectations of Power
- Duality of Privilege
- Denial or minimization of pain

## Characteristics of Healthy Relationship?

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- Intimacy
- Honesty
- Vulnerability
- Compromise
- Trust
- Sharing Emotions

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## Emotional Fluency

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## Breakout: Communication of Feelings

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## Theory of Trauma

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### What is Trauma?



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## Definition of Trauma

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Trauma occurs when an external threat overwhelms a person's **internal and external positive** coping skills.

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**Trauma is not the thing that happened but the effect left within us by our experiences...**

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## The Theory of Trauma

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- Trauma/Stressor Related Disorders are an individual's response to abuse, violence, neglect, maltreatment, grief, or some other overwhelmingly negative experience.
- It is the subsequent set of **maladaptive** behaviors and beliefs that should be addressed in treatment.

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## Process of Trauma

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### Traumatic Event

Overwhelms the physical and psychological coping skills

### Response to Trauma

Fight, Flight or Freeze  
Altered state of consciousness, Body sensations, Numbing,  
Hyper-vigilance, Hyper-arousal, Collapse

### Sensitized Nervous System

Changes in the Brain  
Brain-Body Connection

### Psychological and Physical Distress

Current stressors, Reminders of trauma (triggers)  
Sensations, Images, Behavior, Emotions, Memory

### Emotional and/or Physical Responses

#### Retreat/ Internalized

Isolation  
Dissociation  
Depression  
Anxiety

#### Harmful Behavior to Self

Substance use disorders  
Eating disorders  
Deliberate self-harm  
Suicidal actions

#### Harmful Behavior to Others/Externalized

Aggression  
Violence  
Rages  
Threats

Source: Covington, S., *Beyond Trauma: A Healing Journey for Women* 2014, rev. 2016

## The Theory of Trauma

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- Overt/Event Trauma
- Covert/Persistent Trauma
- Complex PTSD
- Attachment Trauma
- Iatrogenic Trauma

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## The Theory of Trauma

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- A gender-informed framework
- A fundamental belief that trauma is pervasive in men's lives and there are gender differences in:
  - How men experience trauma
  - How men respond to trauma
  - How men exhibit the symptoms of trauma-based disorders
  - How men heal from trauma

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## Core Principles of Trauma-Informed Care

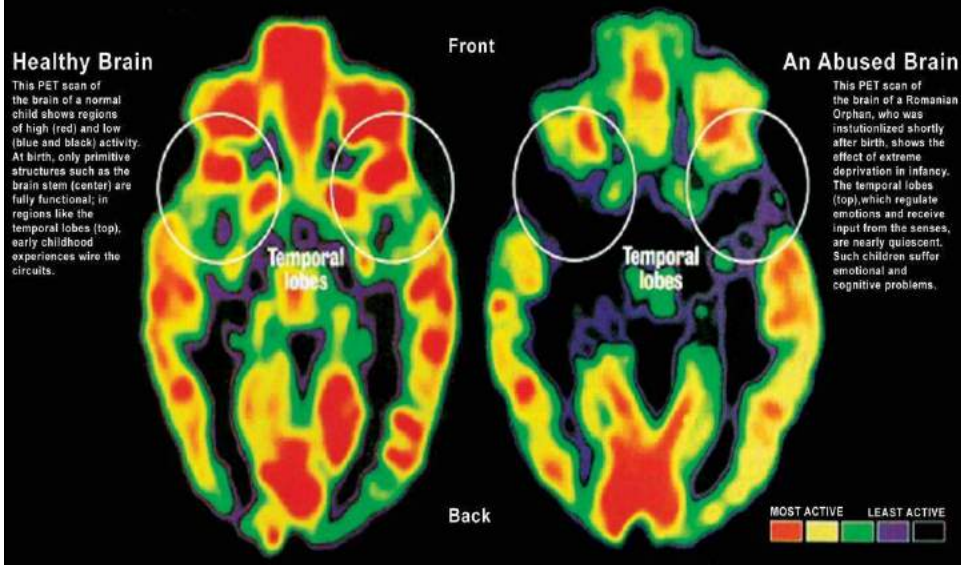
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- *Safety:*
- *Trustworthiness*
- *Collaboration/mutuality*
- *Empowerment*
- *Voice and choice (Fallot & Harris, 2012)*
- *Mutual Responsibility*
- *Compassion (Fallot & Griffin 2014)*

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## Trauma and the Brain

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## Neurobiology of Trauma

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- Research into the neurobiological aspects of trauma has found that trauma disrupts neural networks inhibiting traumatic experiences from being processed into a way that can be understood consciously (Lee, Zaharlick Akers, 2009).
- As a result these traumatic memories stay in lower regions of the brain inaccessible to the frontal lobe. (van der Kolk, 1994).
  - Frontal Lobe (neocortex) = The rational, understanding, and thinking part of the brain that is utilized by CBT, Relapse Prevention and 12 step Facilitation

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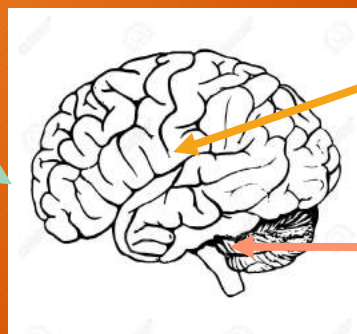
## Triune Brain (MacLean, 1990)

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Neocortex:  
Executive  
functioning  
(thinking, reason,  
speech, insight,  
interoceptive-  
awareness, &  
meaning)

**Structures:**

- Medial PFC
- Dorsal PFC
- Ventro Medial PFC
- Anterior Cingulate Cortex
- Posterior cingulate cortex
- Temporo-parietal junction
- Insula



Limbic System: (5 F's)  
Fight, Flight, Freeze  
Feed, & Fornicate

**Structures:**

- Amygdala- smoke detector
- Thalamus- sensory input
- Hippocampus- memory formation; sort to long term

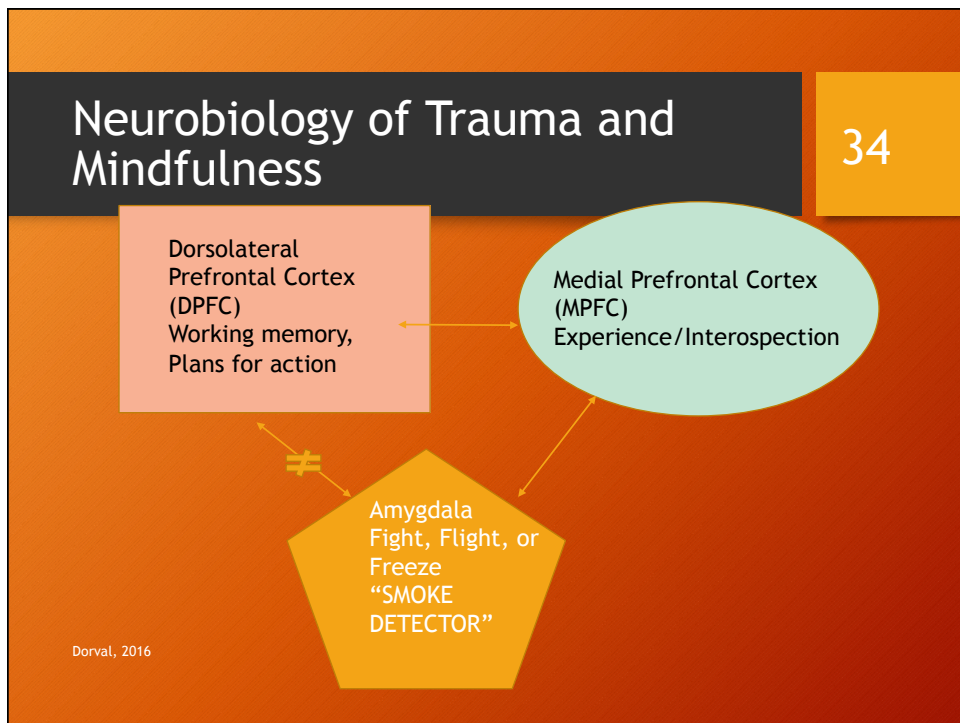
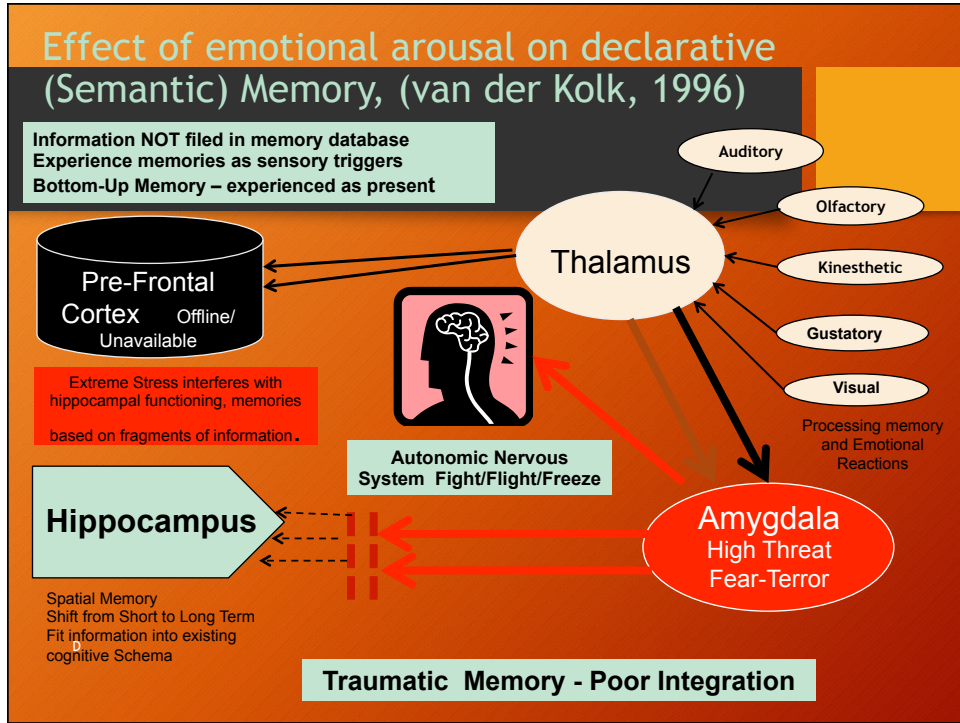
R Complex Brain  
(Reptile Brain):  
Instinctual survival  
behaviors

**Structures:**

- Brain Stem
- Cerebellum

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## Males are biologically influenced to minimize or deny traumatic life experiences

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Individual perceived threat. Activates Hypothalamus.

Hypothalamus sends chemical message to Pituitary Gland (ie., Corticotrophin-Releasing Hormone CRH)

New chemical message sent to Adrenal Glands via bloodstream. Adrenocorticotrophic Hormone (ACTH)

Cortisol released and attaches to receptor sites.

Oxytocin released in order to bring the system back to homeostasis. End fight/flight response.

Functions include:

- Stress response, increase blood sugar for quick burst of energy.
- Suppress the immune System
- Aid with, protein & carbohydrate metabolism

- Cortisol is a stress hormone that is released when the individual experiences threat/stress and the HPA Axis is stimulated. It is a steroidal hormone – Glucocorticoid!
- Cortisol and Oxytocin are vital in maintaining biological homeostasis in response to chronic stress.
- Lower Cortisol levels following traumatic event is associated with increased risk for PTSD.

Gender differences:

- Men experience stable/higher cortisol levels following experience of trauma memories.
  - May stimulate avoidance & increased fight/flight in men, which may mediate PTSD development.
- Women's cortisol levels stay the same following experiences of trauma memories (Lower than men = higher risk of PTSD)
  - May be associated with differences in how testosterone & estrogen interact with Oxytocin, which is also released during stress response.

Tolin & Foa, 2008; Verma, Balhara, & Gupta, 2011

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## Men's Response to Trauma

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- Traditional male social development is filled with emotional trauma.
- Minimization or denial of pain
- “Victim” = Not a Man

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## CBT as an Evidenced Based Treatment for Trauma

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- Not very effective as the predominant approach
- Pre-frontal cortex not easily accessible
- Trauma resides in the body as much as in the mind
- How many men in system have TBI?

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## Psychiatric Diagnoses

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- What diagnosis for men would most likely mimic/mask the symptoms of complex PTSD?

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Anger as a secondary emotion

Hurt  
Sadness  
Fear  
Insecurity

MALE SOCIALIZATION

Anger  
Rage  
Violence

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## Intervention Implementation

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- Histories of abuse and trauma should be expected, not considered the exception.
- Many treatment “failures” likely have unaddressed trauma.
- Talk to men about the trauma that men experience and the abuse that they perpetrate.

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## Men's Response to Trauma

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## Barriers to Men Seeking Help

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- Admitting to a problem
- Lack of emotional fluency
- Difficulty in asking for help
- Difficulty depending on others
- Perception of treatment/therapy as “feminine”
- Fear of being perceived as “weak”
- Fear of intimacy
- Fear of vulnerability
- Sexualization of females
- Homophobia

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## Key Area's of Focus Working With Incarcerated Men

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1. Impact of male socialization on recovery
2. Relational needs of men
3. Abuse and trauma (experienced and perpetrated)

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## Strength-Based Treatment

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- Focus on assets rather than deficiencies
- Increasing each client's sense of self-worth and competence
- Reinforcing evidence of personal growth
- Normalizing the difficulty of change

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## Cycle of Trauma and Abuse

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## Ending Men's Violence

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We will not end the cycle of boys' childhood trauma and men's violence until we treat men with compassion as well as mutual responsibility.

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## Contact Information

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