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INCARCERATED YOUNG MEN & BOYS: TRAUMA, MASCULINITY & THE NEED FOR TRAUMA INFORMED GENDER-SENSITIVE CORRECTIONAL CARE

ABSTRACT

In this chapter we bring together three previously unconnected areas of research relating to young men and boys: trauma and prison; trauma and masculinity; and prison masculinities. Within the existing literature there emerges a significant focus on incarcerated young women and trauma, while there is a relative dearth of literature focusing on young men and boys and their trauma experiences prior to, and as a consequence of, incarceration. Furthermore, we consider the ways in which masculinity and trauma interact to reduce the likelihood that young men and boys are able to seek help or benefit from treatment. Consequently, this chapter advocates that there is a pressing need to better understand how prison masculinities interface with trauma-informed care. It is evident that more research is needed with young men and boys about their trauma experiences; the manifestation of their trauma symptoms; and how to better support their recovery. Ultimately, through considering these areas and exploring areas of connection and disconnection, we argue for both trauma-informed and gender-sensitive correctional care for incarcerated young men and boys, whose vulnerabilities have tended to be overlooked.

INTRODUCTION

Custodial establishments across the world are dominated by cisgender men, with males comprising 95% of prisoners in the United Kingdom (Ministry of Justice, 2019, Scottish Prison Service, 2018), and 93% of prisoners in the United States (Bronson

and Carson, 2019). These ostensibly homo-social spaces have particular implications for performances of masculinity within and after prison (Maycock et al., 2018, Sabo et al., 2001). We frame this chapter in a theoretical context within which we consider the multiple and changing masculinities (Connell, 1995) in the countries within which this research is located (Anderson, 2009, McCormack, 2012).

The prison as a place of significant trauma is also becoming increasingly recognised, from the extensive trauma histories of prisoners (Welfare and Hollin, 2015, Akyüz et al., 2007), the potential for re-traumatisation within the prison system (Burrell, 2013), as well as incarceration being the source of new trauma (Honorato et al., 2016). Yet, little is known about the trauma of incarcerated men and even less attention has been paid to the trauma of incarcerated young men and boys (both before incarceration and as a consequence of incarceration). While we agree that women are missing from data relating to many areas of public life (Criado-Perez, 2019), the particular context we consider in this chapter illuminates the ways in which research on trauma has tended to be gendered through a focus on women and girls, with young men relatively overlooked. The literature on trauma among incarcerated women and girls is arguably much more robust (Sloan, 2018). The lack of academic, policy and practice attention on the trauma of incarcerated males may reflect the widely held perception that prison has been designed for men, compounded by society's acknowledgement of the often-great harms caused by male violence, dominance and oppression and the fact that men are often the source of women's trauma (Sloan, 2018).

These challenges to compassion and consideration towards imprisoned males do not diminish the need to focus on the implications for human rights, prison management, rehabilitation and trauma recovery that arise from unaddressed

trauma in incarcerated males, within a context that more fully considers the gendered experiences of male prisoners. As Sloan (2018, p.127) observes “...men’s gendered experiences of prison may need just as much sympathetic attention as women’s if they are to become less violent or harmful upon release from prison.” Furthermore, there are important interactions between trauma, prison masculinities and incarcerated males that warrant further attention in the literature if we are to better understand the manifestation of trauma in males (especially in relation to offending and violence) and advance both recovery and rehabilitation practice.

This chapter emerges from a desire to bring together and reflect on the work of the authors (and others) that occurred individually in three spheres (trauma and prison; trauma and masculinity; prison masculinities), but had rarely been considered together as a whole. One of Nina Vaswani’s key areas of research is the impact of trauma, bereavement and loss in young people in prison and the vulnerability of young men. For the past two decades, Carla Cesaroni has studied the adjustment and experiences of incarcerated adolescent and young adult males. She has recently completed a comparative study of incarcerated young adult males (18 – 24 years old) in Scotland and Canada. Matthew Maycock is the recent co-editor of *New Perspectives on Masculinities* and the first book to use theories of masculinity to analyse contemporary slavery. Matthew has consistently worked on gender issues, with masculinity being a particular focus across a number of studies.

By drawing together the literature and exploring the intersections of trauma, prisons and masculinities, and with an emphasis on adolescent boys (12 – 17 years old) and young adult males (18 – 24 years old), this chapter highlights a much overlooked area of study and make the case for dedicated scholarship and gender-sensitive practice in relation to trauma and incarcerated males. Our argument is that

prison masculinities and the prison experience itself compound the trauma (and masculine “performance” associated with it) that incarcerated males experience, making help seeking difficult, potentially re-traumatising, and causing new traumas.

TRAUMA AND PRISON

Incarcerated adolescent boys and young men have experienced high levels of trauma, at a rate not dissimilar to their female counterparts. Between 62% and 98% of incarcerated young men in Australia, the UK and US report at least one lifetime experience of trauma prior to incarceration (Abram et al., 2013; MacMackin, Leisen, Suther, Kingsley, & Riggs, 2002, Moore et al., 2013, Pettus-Davis, 2014). This includes experiencing childhood physical and/or sexual abuse, experiencing serious life threats and/or injuries, witnessing severe injury or death of another and being involved in gang violence (Abram et al., 2013, MacMackin et al., 2002).

Approximately three-quarters of young men in custodial settings, or who have histories of gang involvement, have experienced traumatic losses, separations or bereavements (such as murders, suicides and distressing accidents) (Dierkhising et al., 2019, Vaswani, 2014). It is important to recognise that imprisoned young men and boys tend to come from violent and traumatic environments such that male trauma is far more likely to be experienced in public, compared to incarcerated women and girls, who are more likely to experience violence and trauma in private settings (Chesney-Lind and Paramore, 2001, Greenfeld, 1999, Schwartz, 2013). However, it is difficult to establish reliable estimates of male victims of intimate partner abuse as men tend to be reluctant to report (Leonard, 2003; Barber, 2008).

Arriving in custody with pre-existing vulnerabilities from trauma means that prisoners are also at risk of re-traumatisation (Burrell, 2013), and may have

difficulties in adaptation and coping within the prison environment (Cesaroni and Peterson-Badali, 2005, 2010, 2016, 2019). The environment and regime inherent in carceral spaces, including bright lights, overcrowding, noise, isolation, strip-searching, fear and the actual or perceived threat of violence can trigger trauma symptoms. Awareness of these conditions has resulted in more attention towards 'trauma informed' prison design (Jewkes, 2018, Miller and Najavits, 2012). In addition, incarceration is often a traumatic event in itself and, once in custody, the risk of experiencing and witnessing violence, victimisation, suffering, self-harm and death rises (Daquin et al., 2016, Hales et al., 2003). Young people in their teenage years are especially vulnerable to the distress and trauma of prison, as not only are they in a crucial developmental phase between childhood and adulthood, the youth custodial estate often contains the highest levels of bullying, victimisation, self-harm and suicide (Gooch, 2016, 2019, Shepherd et al., 2018).

Trauma symptomology is unsurprisingly prevalent among prison populations. Post-traumatic Stress Disorder (PTSD) is a diagnostic category characterised by a collection of symptoms including: intrusive thoughts; flashbacks; sleep disturbance; avoidance of stimuli associated with the trauma; psychological and physiological reactions to triggers; negative alterations in cognitions or mood such as dissociation, emotional numbing, fear and detachment; and alterations in arousal and activity, such as hypervigilance, anger and risky behaviour (American Psychiatric Association, 2013). There are added complications for individuals who experience severe and/or chronic abuse, neglect or other trauma during childhood who are at greater risk of suffering long-lasting effects of trauma compared to those who first encounter trauma in adulthood, or children who experience a one-off traumatic event in the context of an otherwise secure childhood. The inability to escape trauma by

virtue of the child's powerlessness and dependency, as well as the disruption that trauma has on the child's developing brain, their subsequent world-view and template for life, love, attachment and relationships (Herman, 1992, Perry and Szalavitz, 2017) arguably leaves a lasting legacy. The additional complexities and symptomology of developmental trauma have been termed Complex PTSD by clinicians in the field (Cloitre et al., 2009), which was included as a new and distinct diagnosis in the 11th edition of the International Statistical Classification of Diseases and Related Health Problems, although has yet to be formally acknowledged in the Diagnostic and Statistical Manual of Mental Disorders (DSM) (Rosenfield et al., 2018).

Research from the US and Canada suggests that PTSD occurs in approximately 4% of the general public but reaches up to 48% in prison populations (Briere et al., 2016). Importantly Briere et al. (2016) found that although women had slightly higher rates of PTSD in both the community and prison, the differences were not statistically significant. There is also some evidence that while women tend to become 'safer' in custody, due to their community experiences of violence and victimisation, men are at increased risk of victimisation once incarcerated (Miller and Najavits, 2012). Despite this, trauma is far more likely to be addressed among incarcerated women than men (Miller and Najavits, 2012). A study of 34 adolescent males aged 15-17 convicted of murder or serious violence in the UK (Welfare and Hollin, 2015) found that all of the boys had experienced trauma, 44% presented with symptoms that warranted a full PTSD assessment, yet none of the boys had received any assessment or treatment for their trauma either in custody or in the community. There are important implications for both trauma and justice policy and practice arising from the prevalence of this unrecognised and untreated trauma

among young men in prison, as well as specific factors related to the interplay between trauma and masculinity that this chapter will now turn to.

TRAUMA AND MASCULINITY

Perhaps surprisingly, throughout most of the twentieth century much of the scholarly and clinical attention on trauma was focused on very male-dominated experiences. The recognition of trauma-related nervous disorders emerged from the horrors and fall-out from two global conflicts, with around 80,000 men believed to be suffering from 'shell shock' in WWI and the re-emergence of the disorder as 'combat fatigue' in WWII (Chan, 2014). These conditions were associated with shame and stigma for failing to live up to the masculine ideal of the strong and fearless soldier (Shields, 2016) and sufferers were even deemed "malingerers" and "cowards" (Chan, 2014).

With each major conflict, understanding of the disorder evolved, indeed, the hard-fought inclusion of PTSD in the DSM-III in 1980 stemmed from the distressing experiences and intense lobbying from Vietnam veterans (Herman, 1992). This also meant that conceptualisation and understanding of the disorder originated in male experiences of combat. While Herman (1992) rightly argues that women's more 'ordinary' experiences of violence, victimisation and trauma in homes, streets and communities were largely overlooked until the 1970s, today trauma scholarship is firmly weighted towards women. The literature on trauma and masculinity remains largely confined to work on men in the military, but this narrow focus does not capture the trauma experiences of the majority of people (men or women), nor the complexities of childhood developmental trauma and Complex PTSD.

Yet with gender remaining the biggest predictor of violent behaviour (Perry and Szalavitz, 2017), and an association between trauma and the risk that men can

pose to both themselves and others (Walsh, 2019, Mejia, 2005) there is a pressing need to focus on male trauma. While females tend to report greater exposure to trauma over the life-course, males frequently present with more PTSD symptoms, have lower usage of therapeutic interventions, and respond less well to treatment than females (Shields, 2016, Wade et al., 2016, Morrison, 2012). While trauma therapies may be tailored towards women, aspects of the experience and performance of masculinity are also implicated in this discrepancy. Trauma shapes masculinity as the very nature of trauma calls into question traditional notions about what being a man entails in that “at the core of most traumatic experiences are overwhelming states of fear, helplessness and vulnerability. These states are extremely difficult for anyone to deal with, but they carry an added message and burden for male trauma victims” (Mejia, 2005, p.38). Elder et al. (2017) note that male survivors of military sexual trauma report disrupted assumptions about masculinity such as strength, control, self-worth and the ability to protect oneself and others from harm.

Trauma can also affect the performance of masculinities. Experiencing trauma, along with the entirely human responses to such an experience, often leave men feeling stigmatised, humiliated and ashamed, resulting in exaggerated displays of heteronormative and traditional displays of masculinity in an attempt to reassert power and control (Ellis et al., 2017, Elder et al., 2017). These behaviours can include excessive exercise, overtly enacted heterosexuality, aggression, risk-taking and violence (Elder et al., 2017, Ellis et al., 2017).

The performance of a traditional, hegemonic masculinity can also shape the experience of, and recovery from, trauma as there are many barriers to help-

seeking, assessment and treatment. In a study of 197 male veterans, emotional restriction was significantly related to PTSD symptom severity (Morrison, 2012). Many people, both male and female, who have experienced trauma find it difficult to articulate their emotional and psychological symptoms, a phenomenon known as alexithymia (Van der Kolk, 2014). Research has found that alexithymia is more prevalent among males, especially for young men involved in the justice system, and is also associated with poor mental health in this population (Snow et al., 2016). Being able to identify and describe problematic emotions is an essential first step in the help-seeking process and trauma recovery (Van der Kolk, 2014), and trouble in doing so puts males at a disadvantage. Attachment to traditional masculine norms, such as strength, control, restrictive emotionality, stoicism and gender-role socialisation can also be a barrier to help-seeking (Addis and Mahalik, 2003), a barrier that is intensified further by the shame and stigma of having experienced trauma. Even once help has been sought, these features of masculinity also affect assessment for PTSD and related disorders, as assessment methods typically rely on the verbal expression of emotional and psychological symptoms (Elder et al., 2017). Treatment interventions often require some form of emotional processing, and confronting these emotions may cause men to feel additional loss of agency and control and result in added distress (Elder et al., 2017, Morrison, 2012). For these reasons, men have higher drop-out rates from treatment and a lack of success with trauma interventions.

PRISON MASCULINITIES

Masculinities are often constructed, maintained, and restructured according to particular social networks and social institutions (Connell, 2002). Arguably, the

behaviour that men engage in or exhibit may depend of the types of masculinities that are available- and safe to adopt- in a given environment or social setting (Lutze and Murphy, 1999, de Viggiani, 2018). Masculinity is a cultural resource that can be drawn upon in a presentation of self, something to be negotiated over a wide range of situations (Carrabine and Longhurst, 1998). Masculinities are multiple, contested, dynamic, and socially located in both time and place (O'Brien, Hart and Hunt, 2005).

Earlier we discussed the intersection of masculinities, trauma and the military and perhaps there is no other institutional site that compares to the military (in terms of masculinities and the masculine performance) as prisons. Indeed Goffman (1961) asserts that both prisons and the military constitute total institutions that transform outsiders to insiders, breaking down the very nature of a person's identity through a type of status degradation ceremony. According to Sabo, Kupers and London (2001) prisons constitute a key institutional site for the expression and reproduction of hegemonic masculinities. In the social context of prison, power is partially exercised through the expression of identity, specifically through signifiers of gender (de Viggiani, 2018). Close social proximity in prison means traditional discourses of masculinity regarding what it means to be a man become acute and magnified, oriented around narrow values associated with heterosexist masculine ideology, compelling individuals to present a tough front even if this means concealing their emotions (de Viggiani, 2018, Curtis, 2014). The performance of hyper-masculinity offers men the possibility of navigating prison life and possibly long-term survival in the prison milieu (Brown and Grant, 2018, Toch, 1998). Even amongst incarcerated men who do not believe in hyper-masculine values, the social policing of masculine codes is sufficiently strong that they must keep their viewpoint secret (Evans and Wallace, 2008). Kimmel (1994, p.122) argues that "masculinity must be proved, and

no sooner proved that is again questioned and must be proved again.” Nowhere is this probably more so than in the prison.

There is an abundance of prison research that has detailed the gendered nature of prison including its aggressive, hierarchal, emotionally detached and violent aspects (Maycock, 2018). According to Sim (1994) institutions for young men are the site of a dominant and uncontrolled culture of masculinity. Despite this prevailing narrative about prison masculinities, a more complex picture emerges within which alternative masculinities have been analysed within prison spaces (Cox, 2018; Laws & Lieber, 2020, Maycock et al., 2018, Morse & Wright, 2019). More recent masculinity research has uncovered the existence of more subtle, nurturing and engaged performances of masculinity in prison (Maycock, 2018). For example, this includes the possibility of caring, and in some senses softer performances of masculinity by young people in prison (Buston, 2018). This is within a wider context in which masculinity studies is exploring the possibilities for more emotionally available inclusive performances of masculinity, where homophobia and the hypermasculinity described above is less formative (Anderson, 2009, McCormack, 2012). Critically, much of the research analysing inclusive masculinity has been undertaken in University and Fraternity settings, within the Global North. While some theoretical work has explored the possibilities of inclusive masculinity in prison settings (Maycock, 2018), little empirical work has been undertaken that explicitly analyses inclusive masculinity in prisons.

Caution must therefore be exercised in failing to recognise the pluralities of masculinities that are exercised and contested in the prison setting (Carrabine and Longhurst, 1998). Indeed our own research points towards this complexity and diversity of the performance of masculinity by young people in custody (Cesaroni

and Alvi, 2010; Cesaroni, Maycock and Vaswani, no date; Maycock et al., 2018).

Displays of toughness, bravado and masculinity, however, may be particularly important to adolescent boys and young adult males who are attempting to establish a masculine identity, feeling pressure to engage in what they perceive as “adolescent appropriate” ways (Steinberg, 1999) and secure a sense of self-identity (McNess, 2008).

TRAUMA, PRISON MASCULINITIES AND INCARCERATED YOUNG MEN

Experiencing trauma does not inevitably lead to offending or violence, and survivors of trauma are far more likely to grow up to be further victimised rather than become the perpetrators of harm to others (Herman, 1992). However, unaddressed trauma in boys and young men can lead to maladaptive coping strategies that help to relieve the symptoms of unresolved trauma, such as anger, aggression, substance misuse, risk-taking and violence (Van der Kolk, 2014). A history of being marginalised or victimised coupled with gender socialisation that stresses stoicism, toughness and physicality can lead to aggressive over-compensation and violence (Ellis et al., 2017, Abrams et al., 2008). Trauma symptoms can increase the potential for violence, in that hyperarousal and hypervigilance may result in misinterpretation of social cues and provoke inappropriate hostile reactions (Walsh, 2019, Martin et al., 2015). These behaviours often cause young males to be rejected and excluded from prosocial activities and support mechanisms (Honorato et al., 2016), thereby increasing the likelihood that trauma will go unresolved. Involvement in violent offending can also lead to an additional layer of offence-related trauma (Welfare and Hollin, 2015) and contact with the justice system and incarceration only adds to trauma experiences.

Once incarcerated, the interplay between youth, trauma, masculinity and prison becomes ever more complicated. We have documented that prison is the site of a multitude of traumas and re-traumatisation, that trauma histories can affect how people present to authority, engage with services and treatment agencies and that hypervigilance and mistrust can lead to even relatively benign interactions being misinterpreted and responded to inappropriately (Martin et al., 2015). These factors often cause people to come into contact with the justice system or cause people to rub up against the regime while in custody, creating additional hardships (Miller and Najavits, 2012, Martin et al., 2015).

We have also noted that masculinity can exacerbate trauma symptoms and reduce help-seeking and responsiveness to available treatments (Chan, 2014, Wade et al., 2016). Prison too, is conventionally seen as a hypermasculine environment (Toch, 1998), in which traditional masculine norms, those associated with power and aggression, are amplified in order to obtain and maintain status (Iwamoto et al., 2012), although a more complex picture of prison masculinities is now acknowledged (Maycock, 2018). Ricciardelli et al., (2015), Gooch (2019) and Sim (1994) have all observed that males in prison are on constant guard and permanently vigilant to potential risk and threats to their masculinity, causing anxiety even among the strongest characters, but it is important to note that the hypervigilance of trauma causes people to do the same. Prison masculinities can therefore create an added trauma burden for those who are already vulnerable through trauma. We also know that trauma can result in an exaggerated masculinity, often helping to perpetuate the distress caused by trauma and creating the potential for new trauma related to offending, violence and incarceration (Ellis et al., 2017, Elder et al., 2017, Honorato et al., 2016).

Power, agency and autonomy are reduced for all prisoners, but are even less available to young people due to their age and status (Cesaroni and Alvi, 2010). But with youth at a crucial stage of transition to adulthood, the need to assert independence and establish identity and status can lead to an extra emphasis on the performance of aspects of certain masculinities such as physical strength, aggressiveness and bullying (Cesaroni and Alvi, 2010, Gooch, 2019, Maycock, 2018), helping to intensify the level of fear (Ricciardelli et al., 2015), victimisation and re-traumatisation in youth institutions. At least one study of adolescent custody facilities suggest that young offender facilities not only modelled and encouraged hegemonic masculinities but suppressed young men's experimentation with alternative masculinities (Abrams et al., 2008), highlighting both the importance of context and the influence of role modelling in the development of a masculine identity.

In short, it is clear that trauma can exaggerate hegemonic masculinity; prison can exaggerate hegemonic masculinity, and youth can exaggerate hegemonic masculinity, and aspects of masculinity can increase the likelihood of trauma, exacerbate trauma symptoms, and reduce opportunities for receiving help as well as the reduce the effectiveness of any trauma treatment. Thus when trauma, masculinity, youth and prison coincide there are very real ramifications for both prison management, care, rehabilitation and trauma recovery (see Figure 1).

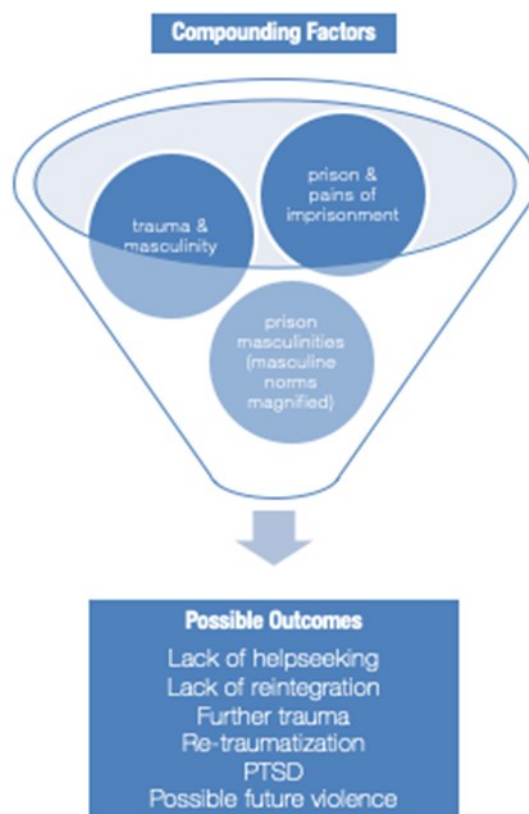


Figure 1: Complicating factors and outcomes arising from the interaction of trauma, masculinity, youth and prison

TRAUMA-INFORMED CARE AND MASCULINITY

Based on these factors, we argue that prison needs to be not only trauma-informed but gender-sensitive in a way that resonates with the needs of diverse gender identities and performances, evident in the wider communities within which prisons are located. Miller and Najavits (2012) and Griffin et al. (2012) offer approaches to trauma-informed practice that, in theory at least, should be feasible even within the complex prison environment. As a minimum, trauma-informed approaches within correctional settings should ensure that institutions do no further harm to already traumatised individuals (Miller and Najavits, 2012). Overarching principles include a focus on trauma-specific screening, assessment and clinical provision, but also emphasise a whole establishment approach, with the role of frontline prison staff and

the wider prison environment (structure, safety, predictability etc) an essential component of treatment (Griffin et al., 2012). The requirements underpinning a trauma-informed approach include: staff training (including on stress management and self-care), valuing relationships, and evidence-based interventions (Griffin et al., 2012, Miller and Najavits, 2012). Additionally, it is important to consider the extent to which working in prison can result in trauma for prison staff (Cassidy et al., 2019, Ruck et al., 2013).

That said, there remain few trauma-informed, or gender-sensitive interventions for men in custody (Pettus-Davis, 2014), and even fewer for young men with complex developmental trauma (Welfare and Hollin, 2015) or that consider trauma-informed practice across the whole institution (Vaswani and Paul, 2019). More recently, attempts have been made by practitioners to adopt a whole-prison approach to trauma, loss and bereavement with emerging evidence of effectiveness and impact, but also an acknowledgement that the confines of custody impinge upon successful implementation and delivery (Pitt and Thomson, 2018). It appears that even the most well-intentioned policies and approaches encounter considerable challenges in the translation to practice, with the realities of implementing trauma-informed care in prison particularly complex on the frontline (Vaswani and Paul, 2019).

Vaswani and Paul (2019) argue that genuinely trauma-informed care in prison is unattainable because custodial settings are fundamentally at odds with trauma-informed practice in terms of their purpose, values, environment and organisational culture. A recurring theme throughout this chapter is the powerlessness, fear, loss of agency, disconnection and hopelessness that is at the heart of trauma experiences (Herman, 1992), but these are also key features of young men's experience of prison

regardless of their trauma histories, with young men in prison describing the loss of hope for the future; loss of safety and stability; loss of relationships and loss of power and agency (Vaswani, 2015). This has major implications for trauma recovery as almost all models emphasise the establishment of safety, regaining control and agency, identifying and processing the emotions associated with trauma in some way (directly or indirectly) and reconnecting with trusting and healing relationships as essential elements of the recovery process (Perry and Szalavitz, 2017, Van der Kolk, 2014, Herman, 1992), and all of which are compromised in prison.

For example, Judith Herman's book *Trauma and Recovery* (1992), outlines the main phases of recovery as: establishing safety and stabilisation (essentially restoring power, control and healing relationships); remembrance and mourning (processing and reconstructing the traumatic memory so that it can be assimilated into the survivor's ongoing life narrative); and lastly reconnection and integration (with an emphasis on reintegrating back into ordinary life), although the stages do not necessarily progress in a true linear fashion. But on reflecting upon the challenges posed by the interactions between prison and masculinity, trauma and masculinity, and trauma and prison, it becomes apparent that this is a process that cannot unfold for incarcerated young men without overcoming significant barriers.

Safety and Stabilisation: While Miller and Najavits (2012) argue that the prison regime can provide the structure, stability and predictability needed to provide a safe space for trauma recovery, they also acknowledge that males often become less 'safe' upon incarceration. Furthermore, the pains of imprisonment have long been documented (Sykes, 1958) and more recent research on the experiences of young men and boys in prison describe a climate of fear, mistrust, bullying and

disempowerment that persists today (Cesaroni and Alvi, 2010; Cox, 2011; Gooch, 2016, Vaswani, 2015).

The aggression many youth display in custody and prison may actually be a reflection of impaired coping (Coid et al. 2003, Kolivoski and Shook 2016, Leigey and Hodge 2013, MacKenzie 1987). Young people differ in important ways from older adults that render them more vulnerable. Younger people are less able to cope with the stress of imprisonment and experience much higher levels of anxiety as a result of having been deprived of their families and social networks (Bala and Anand, 2012, Schulman and Cauffman, 2011). MacKenzie (1987) provides a number of theories regarding youth and prison adjustment. She argues that a young person's violence in prison is an impulsive reaction to stress and may be a sign of immature coping ability. This may also manifest not only in striking out at others but in self-harm; for example, unlike older prisoners—whose risk of self-harm or suicide risk is often related to psychiatric illnesses—young peoples' self-harm or suicide vulnerability can also be connected to their ability to cope with the custody environment itself (Liebling 1999).

Thus loss of power, control and safety are key features of prison life, yet Herman (1992 p.159) advises that "...the guiding principle of recovery is to restore power and control to the survivor." Herman also acknowledges that, as trauma destroys relationships, "recovery can take place only in the context of relationships; it cannot occur in isolation" (p.133) and that the capacity for developing (or redeveloping) a sense of safety, trust, intimacy and autonomy are within these healing relationships. This is why social support is often found to be the critical success factor in recovery (Van der Kolk, 2014, Perry and Szalavitz, 2017, Pettus-Davis, 2014). However, males with trauma histories are less likely to have access to

quality social support (Pettus-Davis, 2014) and prison disconnects people from the social support networks they do have and places them in an environment where even positive relationships with staff and others are tinged with mistrust.

Remembrance and Mourning: This stage involves processing the trauma in one way or another, but has frequently been achieved through attaching words and meanings to emotions and reconstructing a story of trauma, as well as mourning the losses associated with trauma (Herman, 1992). This is a challenging process for any traumatised individual, but is further complicated by certain displays and characteristics of traditional masculinity (i.e., stoicism, emotional restriction, alexithymia) which are intensified within the prison environment due to the need to put on a front, and to obtain and/or maintain status (Walsh, 2019, Vaswani, 2014, Cesaroni and Alvi, 2010). In addition, the constraints of the prison environment limit the ability to provide safe and private therapeutic spaces for treatment interventions (Pitt and Thomson, 2018, Vaswani and Paul, 2019).

Reconnection and Reintegration: In the final phase of recovery, the focus is on the creation of a new sense of self and moving forward and reconnecting with ordinary life and activities. In much the same way as healing relationships are crucial for the two earlier stages of recovery, much of this development and growth needs to take place within the context of new and/or re-established relationships, a challenge for incarcerated individuals. This new self is also drawn from the aspects of the self that the individual valued from before the trauma, as well from the experience of trauma itself, and from the recovery period. As Herman (1992) writes, “integrating all of these elements, [s]he creates a new self, both ideally and in actuality” (p.202). Yet the loss of a ‘future possible self’ (Markus and Nurius, 1986) is a real and pervasive loss for young men in prison, caused by a sense of

overwhelming hopelessness as well as perceived and actual barriers to development and growth (Jewkes, 2011, Vaswani, 2015) imposed by the justice system. Thus the potential for rehabilitation, reintegration and trauma recovery are sharply inhibited.

Although a truly trauma-informed practice or milieu may not be possible within the custodial context, it remains that more can and should be done to alleviate the trauma symptoms of men in prison (Vaswani and Paul, 2019), not least with prison care and management, human rights and public protection goals in mind. There are also implications for gender-sensitive trauma treatment and trauma-informed practice with males both within and outside of the prison. Understanding the obstacles that postures and attitudes associated with masculinity places on the presentation and assessment of trauma (Elder et al., 2017); and on an individual's ability to respond to trauma (Fox and Pease, 2012, Wade et al., 2016) is essential. Exploring masculinity, and the legacy of gender role socialisation, is likely to be beneficial as part of trauma treatment for men (Mejia, 2005, Iwamoto et al., 2012, Fox and Pease, 2012), as well as in the juvenile justice system more broadly (Abrams et al., 2008; Abrams & Anderson-Nathe, 2013). Custodial institutions can make greater progress towards trauma-informed practice by focusing more strongly on organisational culture change; and support mechanisms for staff (such as training, supervision and self-care) as well as the wider physical environment and provision of appropriate therapeutic spaces (Vaswani and Paul, 2019).

DISCUSSION

Sloan (2018) argues that there are many reasons we fail to explicitly consider men's trauma in prison research, including their avoidance of vulnerabilities. Most of the work which has been done on incarcerated males, trauma and masculinity have

been small scale, qualitative studies. Though this exploratory research is important, more research needs to be conducted which speaks directly to men about their trauma, the prison setting and how they see masculinities in prison as potential conflicts with help-seeking. Moving forward it will be imperative that clinicians be sensitised to their own personal concept of masculinity which may shape their approach to treatment and intervention (Chan, 2014).

The importance of hope should not be neglected. While trauma, and prison, are so typically characterised by hopelessness, the potential for post-traumatic growth following recovery from trauma, or release from prison should not be discounted. Just as trauma, or a period of incarceration, can disrupt a person's world view in a negative way, so to can it lead to new perspectives, insights or wisdom (Dierkhising et al., 2019, Fox and Pease, 2012). Recovery from trauma, particularly that which explores masculinity as part of treatment, may also involve a redefining of traditional ideas about what it means to be a man. For young men in particular, there is still the opportunity for masculine biographies to be rewritten, and young men provided new mechanisms for expressions of vulnerability and masculinity (Abrams et al., 2008).

There is hope too, in the fact that alternative masculinities, co-operation and compassion already exist among incarcerated men (Buston, 2018, Laws & Lieber, 2020), and can likely be emphasised and celebrated in order to open the window to recovery. As part of this a new understanding of masculinity in terms of a subtler strength that incorporates the agency behind emotional expression, therapeutic endurance, acceptance and help-seeking can be developed (Fox and Pease, 2012). This can only have positive outcomes for recovery, rehabilitation, reintegration and desistance.

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