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A journey towards a trauma informed and responsive Justice system: the perspectives and experiences of senior Justice workers

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ABSTRACT

Objectives: There is a risk of re-traumatisation for survivors of trauma who engage with the Justice system, given their high propensity to encounter situations that trigger traumatic responses. While a growing body of research has explored the experience of trauma informed practice (TIP) from service user perspectives, little research has incorporated the views and experiences of practitioners working in the Justice system in terms of the implementation of TIP in their service setting.

Method: An exploratory, qualitative research design based on semi-structured, in-depth interviews. One to one, online interviews were conducted with senior Justice workers ($n = 22$) who had undertaken theoretically informed TIP training and had responsibility for its implementation. Interviews were audio-recorded, transcribed and analysed using an inductive, reflexive thematic approach.

Results: The themes identified were: (1) Supporting staff and user knowledge and well-being (training, trust, safety, reflection), (2) Recognition in the value of TIP (reflected in the resources, supervision, infrastructure and physical environment), (3) Encouraging flexible, creative and collaborative ways of working (overcoming resistance).

Conclusions: The findings have implications at the service user, provider and organisational level. Emphasis is placed on the importance of overcoming barriers to implementing TIP through adopting a whole systems approach that encourages collaborative working while supporting staff well-being, access to ongoing TIP training, supervision and resources to establish a safe working environment. Implementing a strengths-based, non-pathologising approach to TIP service delivery within the Justice system is essential. Further longitudinal work to explore the mechanisms by which TIP can help reduce re-traumatisation to service users and providers is recommended.

HIGHLIGHTS
- Suicide among US service members/veterans is a leading cause of preventable death, and theories of suicide risk highlight the role of interpersonal problems as key predictors.
- The *Interpersonal Theory of Suicide* was tested in a sample of male US service members/veterans. Higher perceived burdensomeness was associated with greater suicide ideation. Higher thwarted belongingness and suicide ideation were associated with the likelihood of a future suicide attempt.
- Additional theories are needed to more fully account for all of the factors that contribute to suicide risk in this population.

El camino hacia un sistema de justicia sensible e informado en trauma: Perspectivas y experiencias de trabajadores experimentados del sistema judicial

Objetivos: Existe un riesgo de retraumatización en sobrevivientes a trauma que recurren al sistema judicial dada la proclividad a encontrarse con situaciones que gatillen respuestas traumáticas. Mientras que un creciente cuerpo de evidencia ha explorado la experiencia de los cuidados informados en trauma (CIT) desde la perspectiva de los usuarios, ha sido escasa la investigación que incorpora las perspectivas y experiencias de los profesionales que trabajan en el sistema judicial respecto a la implementación de los CIT en sus ambientes de trabajo.

Método: Se realizó una investigación exploratoria de diseño cualitativo basada en entrevistas semiestructuradas a profundidad. Se realizaron entrevistas en línea, uno a uno, con trabajadores del sistema judicial experimentados ($n = 22$) que habían recibido entrenamiento teórico en CIT y que tenían la responsabilidad de implementarlo. Se grabó el audio de las entrevistas para, luego, ser transcritas y analizadas empleando una aproximación temática reflexiva e inductiva.

Resultados: Los temas identificados fueron (1) brindar apoyo al conocimiento y bienestar de trabajadores y usuarios (formación, confianza, seguridad, reflexión), (2) reconocimiento del valor de los CIT (reflejado a través de los recursos, supervisión, infraestructura y entorno físico), (3) exhortar formas de trabajo colaborativas, creativas y flexibles (superando la resistencia).

Conclusiones: Los hallazgos tienen implicancias a nivel de los usuarios, de los proveedores de servicios y de las organizaciones. Se enfatiza la importancia de superar las barreras para la

implementación de los CIT mediante la adopción de un enfoque de sistemas integrales que fomente el trabajo colaborativo, al tiempo que fomenta el bienestar del personal, el acceso a formación continua en los CIT, la supervisión y el acceso a los recursos para establecer un ambiente de trabajo seguro. Es esencial el implementar un enfoque basado en fortalezas y que no patologice a los CIT que se brindan dentro del sistema de justicia. Se recomienda realizar mayor investigación longitudinal para explorar los mecanismos mediante los cuales los CIT ayudan a reducir la retraumatización a los usuarios y a los proveedores de los servicios.

1. A journey towards trauma informed and responsive Justice services

People with experience of the Justice system have been found to have high rates of adverse childhood events (ACEs) and cumulative traumatic exposure across the life span (Baglivio et al., 2020; Fox et al., 2015; Grady et al., 2016; Henderson, 2023; Levenson et al., 2014; Morrison et al., 2024; Reavis, 2013; Tran et al., 2018; Yannon et al., 2024). This exposure to trauma is increasingly recognised as a significant public health challenge because of its association with various long-term adverse outcomes, including chronic health conditions, mental illness, and involvement with the Justice system (Keels, 2024). Research has shown that these traumatic experiences contribute to a range of negative outcomes, including mental health disorders, substance abuse, and difficulties with emotional regulation, all of which are prevalent in justice-involved populations (Hood & Komoski, 2023). Consequently, trauma is not only an individual health issue but also a societal and systemic challenge that Justice settings must address (Hodas, 2006). Despite the recognition of trauma as a public health crisis, it remains frequently overlooked within the Justice system (Kar, 2019). The prevailing culture in these settings tends to focus on punitive measures rather than rehabilitation or recovery, leading to a lack of trauma-responsive practices. This oversight perpetuates harm and can hinder the potential for meaningful reform and reintegration of justice-involved individuals (Weaver et al., 2024).

When trauma survivors enter the Justice system, they face a high risk of re-traumatisation (Covington, 2022; Hood & Komoski, 2023; Pettus, 2023). This re-traumatisation often stems from the use of 'power-over' relationships, which replicate the powerlessness many trauma survivors have experienced in the past (Sweeney, Filson, et al., 2018). Moreover, Justice environments can be particularly triggering for those with a history of trauma due to the frequent presence of aggression, violence, loud noises, restraint, threats, bullying, intimidation, intrusive and insensitive questioning, and generally hostile environments (Baillot et al., 2014; Covington, 2022; Gallagher et al., 2023; Levenson & Willis, 2019). Thus, there is an urgent need for Justice systems to adopt trauma-informed practices (TIP) that can prevent re-traumatisation and support individuals in their recovery from the effects of trauma (Seitanidou et al., 2024).

Prevention and recovery from trauma are highly dependent on addressing the underlying trauma that people with experience of the Justice system have often encountered (Gerber & Gerber, 2019). Without a trauma-informed approach, the Justice system risks perpetuating cycles of trauma that can further entrench individuals in the system, rather than aiding their rehabilitation and reintegration into society (McLachlan, 2024). Additionally, service providers working closely with trauma survivors are exposed to secondary trauma and emotional distress from exposure to others' traumatic experiences (Bell et al., 2003; Lambert, 2018). Given the salient risks of re-traumatisation and secondary trauma (Huey et al., 2023), this study investigated the facilitating factors of implementing trauma-informed practice (TIP) in Justice systems from the perspective of senior Justice practitioners working within the adult Justice system, who bear the responsibility for its implementation.

Senior Justice workers, such as prison managers, probation officers, and high-ranking officials within correctional facilities, play a pivotal role in the administration and oversight of Justice services. These individuals are responsible for developing and implementing policies and practices that directly affect the well-being of both staff and individuals under their care (Auty et al., 2023). They oversee service delivery to a diverse clientele, including individuals convicted of criminal offenses, those on parole or probation, and detainees awaiting trial or sentencing. Many of these clients present with complex needs, including mental health difficulties, substance abuse issues, and/or histories of severe trauma (Pettus, 2023). In the adult Justice system where these workers operate, individuals are often grappling with longstanding trauma histories, compounding the challenges of rehabilitation. Senior Justice workers are, therefore, uniquely positioned to influence the integration of TIP within Justice settings, as they have the authority to introduce system-wide reforms and foster trauma-informed environments (Miller & Najavits, 2012). Their perspectives are critical for understanding the challenges and opportunities associated with the implementation of TIP.

1.1. Trauma-informed practice (TIP)

In recognition of the effects of trauma and its prevalence among people who engage with public services, the concept of TIP emerged in the 1990s (Becker-

Blease, 2017; Ko et al., 2008; Wilson et al., 2015), alongside similar reform movements, such as person-centred care (McAnallen & McGinnis, 2021) and the recovery movement (Davidson, 2016). Within the pioneering work of Harris and Fallot (2001a, 2001b) and Bloom and Farragher (2013), TIP can be defined as 'a system development model that is grounded in and directed by a complete understanding of how trauma exposure affects service users' neurological, biological, psychological, and social development' (Paterson, 2014, as cited in Sweeney, Clement, et al., 2018, p. 127). In the Justice system, TIP is not just a therapeutic approach but an operational framework that informs how the entire system, from individual interactions to institutional policies, is structured to acknowledge and mitigate the effects of trauma. It is associated with the adoption of a strengths-based, non-pathologising approach that focuses on the development of appropriate coping mechanisms and taking measures to avoid causing further distress or re-traumatisation (Sweeney et al., 2016).

There are key assumptions and principles that underlie TIP (Maynard et al., 2019). According to the model of 'Four R's' (Substance Abuse and Mental Health Services Administration [SAMHSA], 2014), TIP involves: realising the impact of trauma; recognising signs of trauma; responding by incorporating knowledge and research on trauma into policies, procedures, and practices; and resisting re-traumatisation (Fallot & Harris, 2006; SAMHSA, 2016). These key assumptions and principles are implemented across the domains of a trauma-informed setting: workforce training and development, trauma-focused services, and organisational change (Hanson & Lang, 2016). In Scotland, where the current research was undertaken, the National Trauma Training Programme builds further on existing evidence above through recognising the central importance of relationships in recovery from trauma and in building resilience (National Trauma Transformation Programme, 2023).

The implementation of TIP across a range of practice settings is a relatively recent development (Goodman et al., 2016; Robey et al., 2021). It involves training staff to be aware of the impact of trauma, minimising retraumatisation, and adopts a 'do no harm' approach to how institutions may aim to prevent the reenactment of traumatic dynamics among service users and staff working within a system (Hodas, 2006; Levenson, 2020). Within the Justice system, this presents unique challenges, as traditional practices are often punitive and hierarchical, which can conflict with the principles of TIP (Petrillo, 2021). There have been recent calls to implement TIP as a universal model of care across a wide range of health and social care services (Huo et al., 2023) in recognition of the major impacts of trauma exposure in the receipt of care and the potential harm to care recipients and providers that can result from inappropriate care. However, implementing TIP requires a complex organisational change process, including both staff behaviour change, and organisational policy and procedure change to facilitate a trauma-informed working culture (Keesler, 2020).

There have been increasing efforts to implement TIP in various settings, such as healthcare (Brigance et al., 2023; Javakhishvili et al., 2020; Raja et al., 2015), education (Bilbrey et al., 2024; Cafaro et al., 2023; Carello & Butler, 2015; Hamad et al., 2023; Wassink-de Stigter et al., 2022; Wilson-Ching & Berger, 2024), mental health (Browne et al., 2020; Saunders et al., 2023; Wilson et al., 2017; Young et al., 2023), housing (Barry et al., 2024; Brocious et al., 2022), drug and alcohol use (Coffey et al., 2016; Leitch, 2017), social care (Levenson, 2017; Sun et al., 2024), and primary care (Reeves, 2015), as well as within the Justice system (Kimberg & Wheeler, 2019; Miller & Najavits, 2012). This growing body of work highlights the potential for TIP to address the trauma histories of individuals within these systems, but it also reveals the substantial barriers that can arise when attempting to implement such practices in Justice settings. Given the complexity and high-stakes nature of these environments, further research is needed to explore how TIP can be effectively integrated into Justice services.

1.2. The debate on trauma integration

The integration of TIP into the Justice system has sparked a broader debate within the field. Proponents argue that TIP is essential for fostering environments that promote healing and reduce recidivism, especially given the high levels of trauma within justice-involved populations (Levenson, 2020). By adopting a trauma-informed approach, Justice systems can shift away from punitive, adversarial models and create spaces that facilitate rehabilitation and personal growth. However, critics of TIP integration highlight the inherent difficulties of aligning trauma-responsive practices with the traditional goals of the Justice system, which often emphasise control, punishment, and risk management (Petrillo, 2021). Some argue that the Justice system's hierarchical and often coercive structure conflicts with the principles of TIP, such as fostering safety, empowerment, and collaboration (Hodas, 2006). Others express concern that the focus on trauma might dilute the core functions of the Justice system, particularly in managing public safety and accountability (McLachlan, 2024). This tension represents a fundamental challenge in integrating TIP into Justice settings, and it remains an area requiring further exploration and debate. Moreover, within adult Justice settings, there is ongoing discussion regarding the balance between addressing trauma and maintaining the essential security and operational

priorities that underpin the Justice system (McAnallen & McGinnis, 2021).

2. The present study

The focus of the present study is on the views and experiences of senior Justice workers, key decision-makers who are responsible for translating TIP principles into practice. By identifying the facilitating factors and barriers they encounter, this research contributes to a deeper understanding of how TIP can be operationalised within Justice settings and informs strategies for fostering a more trauma-responsive system.

While there has been an increasing focus on TIP implementation in juvenile justice settings (Zelechoski et al., 2024), less attention has been given to its application within the adult Justice system, despite the fact that the majority of justice-involved individuals are adults (Scottish Government Safer Communities Directorate, 2022). Given this gap, there is a pressing need for research exploring how TIP can be effectively implemented in the adult Justice system. The primary aim of this study was to explore senior Justice workers' views and experiences of implementing TIP in the adult Justice system. A secondary aim was to understand the factors that help facilitate, or hinder, the implementation of TIP. To achieve these aims, we conducted an in-depth qualitative study to investigate the experience of senior workers in Justice services with responsibility for implementing TIP (e.g. Bloom & Farragher, 2013; Harris & Fallot, 2001b; Mahon, 2022) in one Health and Social Care Partnership (HSCP) in Scotland. TIP is highlighted at a national level by the integration of theoretically informed TIP to the Knowledge and Skills Framework for the Scottish Workforce; TIP is also part of the Scottish Government's commitment to develop a National Trauma Training Strategy (NHS Education for Scotland, 2021), which is reflected in the National Strategy for Community Justice (Scottish Government, 2022). It is, therefore, of both theoretical and practical importance to study the facilitators of TIP implementation from Justice service workers' perspectives. The research questions explored were as follows:

(1) What are senior Justice workers' experiences of implementing TIP in their service setting?
(2) What factors act as facilitator to the successful implementation of TIP?
(3) What factors hinder or act as barriers to the implementation of TIP?

3. Method

A pragmatist methodology was adopted (Barker & Pistrang, 2021) whereby an interpretivist and ideographic understanding of socially constructed reality was employed, with an emphasis on interrogating the value and meaning of the research data (Morgan, 2014). This pragmatist approach focused on the practical implications of the research, prioritising flexibility and adaptation in the design and execution of the study. It enabled a detailed exploration of the multiple and dynamic experiences of participants implementing TIP in Justice services. By centring on practicality and inquiry, the approach sought to generate holistic understandings rather than aiming for consensus or universal truth (Narey, 2017; Wahyuni, 2012). The pragmatist lens allowed for both theoretical insights and real-world applications, aligning with the needs of the Justice system, where policy implementation can vary significantly across settings and individuals.

3.1. Interview schedule

The interview schedule was developed to address the specific aims of the current study and was informed by the pragmatist approach, prioritising questions that could yield practical insights into the implementation of TIP (Ko et al., 2008; Levenson, 2020; Lovell et al., 2022; Purtle, 2020). The schedule was also shaped by prior research on trauma-informed practices and the real-world challenges faced by justice practitioners (Levenson, 2020; Willmot & Jones, 2022). It focused on participants' perspectives and experiences of implementing TIP in the Justice system. It consisted of seven topic areas: (1) Working context; (2) Trauma-informed practice and training undertaken; (3) Workplace support; (4) Facilitators and barriers to implementation; (5) Well-being; (6) COVID-19 pandemic impact; (7) Quality indicators and change. These topics were chosen based on previous literature and discussions within the research team about the most relevant factors influencing the adoption of TIP in the Justice system. We used broad, open-ended, and non-judgmental questions to allow interviewees to respond in their own terms (DeJonckheere & Vaughn, 2019).

3.2. Procedure

Ethical approval was granted by University of Strathclyde Ethics Committee. The research was carried out in accordance with the British Psychological Society's ethical code of conduct (BPS, 2021) for research involving humans. Recruitment was conducted between February and June 2022. Purposive sampling of participants was employed whereby the data collection process was monitored according to pragmatic grounds (Morgan, 2007; Robinson, 2014). The study was advertised through a HSCP intranet server following consultation with senior leadership

who were in support of the conduct of the research prior to the study commencing. The purposive sampling criteria included senior Justice workers who were actively involved in policy implementation and decision-making within adult Justice services. This included those responsible for implementing TIP within their institutions. Participants were required to have at least three years of experience in a senior role within the Justice system and to have completed evidence-based training related to TIPs.

Participants who met the inclusion criteria were contacted via email, which directed them to an online Participant Information Sheet via the Qualtric platform with details about the study and the researchers' contact details. Potential participants could complete an 'expression of interest' survey, providing basic demographic details and signing the consent form online using Qualtrics. Then, the potential participant was contacted by the lead researcher to arrange a convenient time for the interview to take place. Interviews were conducted online using Microsoft Teams™. Interviews were held between 36 to 108 min (average interview time of 49 min and 33 s). This range allowed for in-depth discussions tailored to each participant's unique experiences and insights into TIP implementation. Following interview completion, each participant received an email and a debriefing form from the lead researcher. A £20 online gift voucher was also sent to each participant as a thank you for their participation. The interviews were transcribed in full verbatim with all identifying information removed from the transcripts prior to analysis. Given the exploratory nature of the study, transcription prioritised the verbal content but also included selective notation of non-verbal cues, such as pauses or emphasis, where relevant to the broader analysis of participants' experiences (Kowal & O'Connell, 2014). Having conducted 20 interviews, the research team engaged in reflexive meetings in order to agree on the final themes. It was decided that two additional interviews were conducted to substantiate and provide further evidence for emerging themes. These interviews served to refine and deepen the thematic analysis, ensuring that the final themes were both comprehensive and nuanced, while also contributing to a richer understanding of trauma-informed and responsive justice in practice (Braun & Clarke, 2019).

3.3. Analysis

To explore Justice workers' experiences of TIP and understand the factors that facilitated or hindered its implementation, Braun and Clarke's reflexive thematic analysis was employed (Braun et al., 2014; Braun et al., 2023; Braun & Clarke, 2012; Byrne, 2022). This method is an accessible and theoretically flexible approach to qualitative data analysis (Campbell et al., 2021), enabling the identification, analysis, and reporting of key themes. Reflexive thematic analysis acknowledges the active role of the researcher in knowledge production (Braun & Clarke, 2019), as codes represent the researcher's interpretation of patterns of meaning across the dataset (Wæraas, 2022).

The first phase of the analysis involved becoming deeply familiar with the data by reading and re-reading the interview transcripts. This allowed for a holistic understanding of participants' experiences with TIP in the Justice system and set the foundation for the analysis. Following this, initial coding was conducted, focusing on significant features related to the implementation of TIP. This process was inductive, meaning the codes were derived directly from the data rather than being guided by theoretical frameworks (Braun & Clarke, 2012; Clarke & Braun, 2017). The coding was managed using NVivo Version 11 (QSR, 2021) to organise and structure the data (Elliott-Mainwaing, 2021).

Once initial codes were generated, the next phase involved grouping these codes into preliminary themes that addressed the research questions. This phase required identifying broader patterns in the data and categorising related codes together. The themes were centred around participants' experiences with TIP and reflected the inductive, data-driven approach taken in the analysis.

After the preliminary themes were created, the research team critically examined these through reflexive meetings (MacIntyre et al., 2018). This process involved reviewing whether the themes worked in the context of the entire dataset and ensuring that each theme was coherent and distinct from the others. The themes were revised and refined where necessary, guided by reflective questions such as, 'What is the meaning of this theme?' and 'Do the data sufficiently support this theme?' (Trainor & Bundon, 2021).

Once the themes were reviewed and refined, all relevant data were extracted and used to further develop each theme. The process of defining and naming the master themes commenced, with the lead researcher working in collaboration with the wider research team to ensure that each theme captured implicit meanings within the data and represented participants' experiences accurately (Braun & Clarke, 2019).

To conclude the analysis, the themes were cross-checked with the research team through further collaborative discussions to develop a more nuanced understanding of the data (Nowell et al., 2017). A thematic map was created to visually organise the themes, sub-themes, and representative extracts from the interview transcripts (Campbell et al., 2021). Each

master theme was defined and described in a narrative format, ensuring that the essence of the data was captured.

Throughout the entire process, reflexivity was maintained by the research team, who kept reflective journals to document their thoughts and interpretations (Braun & Clarke, 2019). This approach acknowledged the importance of researcher subjectivity, recognising it as equally important as the data itself in the development of themes (Braun & Clarke, 2012; MacIntyre et al., 2018). The outcome of this analysis was the development of three master themes that addressed the study's aims and were present across all 22 interviews. To ensure rigour, transparency, and quality of reporting, the study followed the Qualitative Checklist Criteria, the Consolidated Criteria for Reporting Qualitative Research guidelines (COREQ; Tong et al., 2007), and APA Style Journal Article Reporting Standards (JARS-Qual; Levitt et al., 2018). Trustworthiness was ensured through strategies such as maintaining an audit trail to document the research process (Tomaszewski et al., 2020), being aware of the social context (Kitto et al., 2008), engaging in reflexive journaling (Ahmed, 2024), and conducting participant debriefings during the final stages of analysis (Haq et al., 2023).

4. Results

4.1. Participant characteristics

The study achieved a robust participation rate of 84.61%, with 22 out of 26 eligible senior Justice workers interviewed. This strong response rate aligns well with the qualitative, exploratory approach, offering valuable insights into the perspectives of those directly involved in implementing Trauma-Informed Practice (TIP) within the adult Justice system in one Health and Social Care Partnership (HSCP). The response rate calculation reflects the proportion of participants who accepted the invitation to participate out of the total eligible candidates, ensuring that those recruited could provide comprehensive insights into TIP implementation. This approach also captured a wide range of experiences and perspectives, enhancing the study's ability to reflect the varied realities of TIP in adult Justice settings.

As is recommended for interview research that has an ideographic aim (Malterud et al., 2016), this sample size was sufficient for individual participants to have a locatable voice within the study, allowing for an intensive thematic analysis of each case to be conducted. The participants' ages ranged between 33 and 62 years ($M = 46.00$, SD = 7.75). Thirteen of the participants identified as female and nine as male. The majority of participants (90.90%) identified as being

Table 1. Participant characteristics.

Participant	Job title	Gender	Age	Training completed
Michael	Team Leader	Male	50	Safety & Stabilisation
Emma	Team Leader	Female	52	Safety & Stabilisation
Samuel	Service Manager	Male	43	Safety & Stabilisation, STILT
Stewart	Team Leader	Male	61	Safety & Stabilisation, STILT
Ben	Team Leader	Male	51	Safety & Stabilisation
John	Team Leader	Male	54	Safety & Stabilisation
Alison	Team Leader	Female	37	Safety & Stabilisation
Clare	Service Manager	Female	43	Safety & Stabilisation
Donna	Service Manager	Female	48	Safety & Stabilisation
Gregg	Team Leader	Male	39	Safety & Stabilisation
Sara	Team Leader	Female	36	Safety & Stabilisation
Jennifer	Team Leader	Female	40	STILT
Lauren	Team Leader	Female	44	Safety & Stabilisation
Lynn	Team Leader	Female	42	Safety & Stabilisation
Elaine	Service Manager	Female	50	STILT
Elizabeth	Team Leader	Female	62	Safety & Stabilisation
Craig	Team Leader	Male	48	Safety & Stabilisation
Steven	Social Worker	Male	47	Safety & Stabilisation
Laura	Team Leader	Female	33	Safety & Stabilisation
Margaret	Social Worker	Female	47	Safety & Stabilisation
Paul	Social Worker	Male	43	Safety & Stabilisation
Mary	Team Leader	Female	41	Safety & Stabilisation

Table 2. Themes.

Theme	Description of the theme
Supporting the knowledge and well-being of service users and staff as central to TIP (trauma training, trust and safety)	Acknowledgement of trauma within justice settings. Prioritising the well-being of staff and service users. Awareness of re-traumatisation and secondary trauma.
Recognising the value of TIP (Reflected in infrastructure, supervision, resources, and the physical environment)	Empowerment and validation. Infrastructure and support systems. Leadership and supervision. Whole-systems approach. Physical environment.
Flexible, creative, and collaborative ways of working (overcoming resistance)	Collaborative working and relationship building. Addressing resistance from staff, service users and the court.

white, and of British ethnic origin with the remaining participants identifying as being from ethnic minorities. The majority of participants were Team Leaders and the majority stated that they practiced both on-site and remotely during the COVID-19 pandemic (see Table 1). Participants' years of experience ranged between 12 and 32 years (mean = 18.41, SD = 7.95). All participants were senior Justice workers who had undertaken evidence-based trauma enhanced training and/or the Scottish Trauma Informed Leadership Training (STILT).

The themes (see Table 2) developed were: (1) Supporting staff and user knowledge and well-being as central to TIP (trauma training, trust and safety); (2) Recognition in the value of TIP (reflected in infrastructure, supervision, resources, and the physical environment) and (3) Encouraging flexible, creative and collaborative ways of working (overcoming resistance).

4.2. *Theme 1:* supporting service user and staff knowledge and well-being as central to TIP (trauma training, trust and safety)

All participants discussed how gaining an awareness and understanding of trauma, its impact and treatment, built individual and organisational capacity and provided a foundational knowledge, enabling TIP implementation at a systems level within the Justice system. Participants recognised that trauma events, experiences, and the effects of trauma were highly prevalent among the service users due to issues such as 'early childhood adverse experiences' (Sara), 'having a hard start to life' (Mary), 'trauma in the system' (Craig), 're-traumatisation in services' (Emma) and 'triggers for trauma through imprisonment' (Margaret) in the Justice system. Jennifer highlighted how gaining knowledge about TIP had helped her building positive relationships with service users:

> I don't know if there's many people that I've worked with, um, whether that be colleagues or clients, that haven't experienced some level of trauma. (…) I think having a knowledge of that (…) benefits the relationship building when someone comes in and they're very much like 'You don't understand!" and they're sweating, and they're panicking and I'm able to kinda talk them through it (…), what we know about working in a trauma informed way and understand trauma and they're kind of like, yeah, that's, that's exactly how I feel (…) this helps foster positive relationships. (Jennifer)

Steven made reference to how having access to TIP training helped build upon his experiential knowledge of working with trauma and informed his engagement with service users in intervention planning:

> I've got an understanding of how, from the (enhance trauma) training and experience, I suppose, of how trauma then impacts on behaviour, thinking styles and that's probably something I've always been aware of, but it's more readily there now so for the clients to be able to like understand that if we're talking about a traumatic event and how that makes them think, how that makes them feel, how that makes them behave that I've got ways of actually saying like 'well this is what we can put in place' (…) it builds the trust and engagement with interventions too. (Steven)

Having knowledge about trauma through TIP training was perceived to help senior Justice workers in managing some of the risks as well as having techniques to safely work with trauma, as Emma commented:

> It [enhanced trauma training] reduced my anxiety about how we managed the risk. Um, it kind of lowered my expectations but in a good way, so instead of us trying to get people towards services or into programmes or to do big things in their life like stop drinking or whatever, it allowed us just to do basic grounding techniques, mindfulness, you know; what is it you can see with trauma, what is it you can

smell, you know, like basic safety (…) establishing safety was the first thing for us. (Emma)

Continuity in TIP training for not only senior Justice workers but 'for all staff' (Donna) to help support its implementation in the Justice system was viewed as essential for 'best practices' (Paul) as well as providing a means of supporting both service users' and staff well-being. Gregg emphasised how the power dynamics within the Justice system were often triggering traumatic experiences among service users and that having ongoing access to TIP training helped build knowledge, skills and improve well-being:

> The prison processes [are a] traumatic experience (…) so, you come into quite a lot of powered authority and I think you've got to be very conscious of that (pauses) you've got to be very conscious that it could be triggering for somebody (…) for staff as well as prisoners (…) the training has helped me understand this, it's helped me understand what's happening and how it impacts on me too and how to look after my own well-being. (Gregg)

The importance of prioritising both staff and service user well-being was viewed as an essential component in implementing TIP in the Justice system. Participants recognised how significant 'peer to peer support' (Paul) can be in helping to maintain wellbeing; Steven recounted how his colleagues helped him in working through his own personal trauma experiences:

> Colleagues are brilliant. (…) it's our colleagues that we turn to for support and guidance. We've all been through quite traumatic experiences and things, and it's your colleagues that pull you through. (Steven)

Most participants made reference to the impact of burnout and/or secondary trauma in their working environment and the impact this had on staff well-being as well as decision making processes. Working within, what Mary described as a 'burnt-out system' was a common concern among participants. This further exacerbated the risks to staff mental health and the risks of secondary trauma. Elaine discussed her experience of flashbacks associated with secondary trauma in her workplace:

> You can't unhear or unsee the flashback … you can't unhear what they've (service user) said to you … we need support in dealing with this (…) we need to be able to keep ourselves and our clients safe from further trauma (…) this impacts on the way we do things and the decisions we make day to day. (Elaine)

Participants described how they used a range of techniques to safely work with trauma, both to support service users and protect their own well-being. They made reference to using 'grounding techniques' (Sara), 'mindfulness practices' (Alison), 'support from colleagues' (John) and 'reflective supervision' (Mary) as some of the techniques that helped them

work safely and effectively engage in TIP while minimising the risk of burnout and emotional distress.

4.3. Theme 2: recognition of the value in TIP (reflected in infrastructure, supervision, resources, and the physical environment)

Participants recognised the benefits of implementing TIP in the Justice system and how this approach helped 'validate' (Lynn) and 'empower' (Alison) both service users and staffs' experiences of living and/or working with trauma. Participants were motivated by the value of adopting TIP and its potential to help 'enhance working relationships' (Ben), 'improve engagement' (Craig) and '*reduces tensions*' (Margaret) among staff and service users. Stewart described how embracing a TIP approach in the Justice system could improve outcomes for service users:

> If we're genuinely serious about trauma informed practice, I think it (…) it would significantly reduce the burden on social services who a lot of the time are reacting to crisis in interventions, which are based on emergency. I think it would have better outcomes for the client group and for the society at large. (Stewart)

Yet, participants also stressed that there needed to be an infrastructure to support the implementation of TIP. The importance of providing social, emotional and/or therapeutic support to both staff and service users (when needed) was evident throughout participants' accounts. Staff support in dealing with trauma was viewed as being central to helping service users in working through their own traumas, as captured in Margaret's account:

> It can be quite triggering for staff who have their own trauma. Um, and I suppose I need to be really mindful of that, um, and within supervision and just kind of a day-to-day working life, that I make sure that I have an awareness of that and that I'm able to support my staff with their own trauma, because if they don't have support with their trauma, they're not going to be able to work with clients in terms of their trauma. (Margaret)

Evident throughout participants' accounts was the sense that leadership within services needed to 'listen' (Emma), 'recognise' (Ben) and 'support it and resource it' (Emma) to embed TIP in the Justice system. Alison discussed the high incidence of traumatic losses and ruptured relationships within the Justice system and the need for increased access to support with bereavement and/or suicide:

> We do need more resources in terms of counselling services, particularly bereavement and suicide (…) Our leaders need to recognise this especially in prisons. That's one that comes up for us a lot and I know the waiting lists are really huge. Um, we also probably need a lot more services that work with our specific client group who are quite challenging,

particularly sex offenders, domestic violence (…) lots of relationships that breakdown. (Alison)

Some participants discussed how they had sought to adopt TIP while setting up Justice services, emphasising the importance of a well-developed infrastructure to support its implementation with 'buy in' (Laura) across the workforce, including management, leadership and among 'inter-agency collaborations' (Craig). To effectively create and maintain TIP, participants made reference to the structure of the work within the Justice system and how supporting TIP involved incorporating 'trauma-informed thinking into working roles and functions' (Lauren), along with trauma informed 'system monitoring' (Lynn) and 'management approaches' (Craig). Systems in Justice services needed to provide structures to help Justice workers apply the principles of TIP, as Emma emphasised:

> When I set up the (Organisation) it was all about having a more trauma informed model. Within the Justice system. I hope it isn't just lip service and we actually embed it properly in our policies and resource it (…) it needs to underpin all that we do. (Emma)

Accessing specialist TIP supervision was a key component in supporting staff in gaining 'confidence' (Donna), 'increased knowledge' (John), 'competence' (Lynn) and 'comfort' (Lynn) in implementing and 'building an ethos' (Elizabeth) based on the principles of TIP in the Justice system, as captured by Laura:

> How are we supporting our staff (…) and providing supervision. Because I think safety, collaboration, choice, empowerment and trust has to be there … that's the model we're working with … a trauma lens, we need to be doing that to ourselves, do we not? (Laura)

Some participants placed particular attention on the need for 'reflective practice' (Elaine) to increase 'self-awareness' (Craig), recognise 'blind-spots' (Samuel) and 'practice safely' (Stewart) in adopting TIP in their day to day working practices. Steven described the benefits of joint working with a psychologist in gaining support and supervision in implementing TIPs:

> I have worked very closely with psychologists. It was great. It was new. It was something different. So every time we interviewed somebody we would debrief and we would go through that at supervision. … I felt supported and like someone understood what it was like to work with trauma in our services. (Steven)

All participants made reference to how supporting a TIP approach needed to be reflected in the physical environment to build 'therapeutic and safe' (Mary) spaces and foster 'trusting' (Laura) relationships between staff and service users. This was a significant

challenge in the Justice system as the environment was more often described as being 'cold' (Paul), 'hostile' (Craig), 'drafty' (Donna), 'unsafe' (Steven), 'horrific' (Clare), 'sterile' (Alison), 'a disaster'' (Margaret) 'run down' (Mary) and 'decrepit' (Emma). Sara remarked on how the physical environment could be viewed as a negative reflection of the value-base within Justice services:

> It's pretty awful, it is, it doesn't, it doesn't say much about how we value our clients or workforce really. It's [physical environment] falling apart. (Sara)

Similarly, Clare made reference to how the physical environment had an immediate adverse impact on those entering the service for the first time:

> If you have experienced trauma and you're coming to our service within the first 5 minutes, probably a fairly negative tone is set actually. (Clare)

Participants reported that adopting TIP involved creating 'trauma informed environments' (Jennifer) that promote a 'sense of safety' (Emma), 'well-being' (Elaine) and 'healing' (Gregg). Participants commented on how the physical environment affects both staff and service users' sense of identity, self-worth, values, power dynamics, and dignity. A lack of TIP within physical spaces leads to 'retraumatising' (Sara) service users who have already experienced cumulative traumas throughout their lives. As Jennifer reported:

> They're just bare, they're minimal … and this might be the same office that they've (service user) had their kids removed (pauses) that they've had their last contact with their kids (…) That's when things can just kick off (…) it causes more trauma. Our office environment, um, is not trauma-informed. Definitely the rooms; we need to have windows that can open and rooms that are sound-proof. (Jennifer)

Participants emphasised that implementing TIP in the Justice system involved recognising the signs and symptoms of trauma among service users, their families, staff, and others involved with the Justice system. Adopting a 'whole system approach' (Michael) that fully integrates knowledge and training about trauma, its effects and treatment into policies, procedures, practices and the physical environment to help prevent re-traumatisation was recognised. The need for a trauma informed workforce was described by Samuel:

> You know the kind of entire workforce informed or educated on trauma or trauma informed practice. So, you know, if somebody comes into our service, whoever they get, from the first minute to the last has that kind of, at least a base level of understanding of, you know, like the impact that some of these trauma experiences would have upon their kind of interactions with us. (Samuel)

Successful implementation of TIP requires a sense of incorporating them in all aspects of working practices within and across the Justice system, as captured in Michael's account:

> I suppose it means that you're building in trauma informed practice from the ground up, it's, it's not something that's a kinda, um, it's not an afterthought, it's not something that you think 'well, OK, we've put this in place. Now, let's consider whether it's trauma-informed'. It's built into our thinking from the, you know, from the starting point. (Michael)

4.4. Theme 3: flexible, creative and collaborative ways of working (overcoming resistance)

The need to explore opportunities for 'flexible' (Laura), 'adaptable' (Elizabeth) and 'collaborative' (Emma) ways of working and encourage 'creative solutions' (Alison) to overcome the challenges of TIP implementation within the Justice system was evident in participants' narratives.

> We need to be creative and flexible in how we work if we want this to work … it's very important that we are doing it for them (service users) or bringing them on that journey because it's that kinda empowerment and saying to them, you know, this is YOUR life. What do you want to achieve within your life. (Alison)

While some participants reported that adopting TIP was 'how we've always worked' (Steven), for others it entailed a significant change and challenge in the working culture, as Donna remarked:

> Becoming trauma-informed involves a shift in culture, our practice and ways of doing things (…) it challenges us. (Donna)

This shift was seen as 'daunting' (Paul) for some staff and other agencies (e.g. addictions services, mental health services, courts) they worked with who were often struggling with multiple demands, long waiting lists, funding cutbacks, post-COVID changes, and challenges in working practices. Consequently, participants often described how 'overcoming barriers' (Samuel) to implementing TIPs was a necessity, as captured by Elaine:

> I suppose resistance from staff. Ehm, and senior management, Organisational resistance. (Elaine)

Collaborative working and building relationships between staff and service users could help overcome the resistance to change. Alison made the point that adopting TIP could help foster respect with service users:

> I think working in this way, um, certainly would be a challenge but it would allow us to develop better working relationships with our clients and for them

to know that we respect them, we respect everything that's going on for them and that we want to work with them to address some of that. And I think clients, certainly, um, certainly work better when they're aware of that. (Alison)

Finally, to overcome the resistance to change, Laura discussed how the courts would consider evidence of improved well-being and reductions in re-offending behaviour as clear support for implementing TIP:

They [the court] probably would come around to it (TIP) eventually, but it might take some time, you know … . it's … I suppose people have been on orders, division orders and all that and it's an alternative to custody, you know. Um, so I think, yeah, the court should maybe come around to it eventually if they feel that, you know, we're seeing success, you know, and people are having healthier lives. Their well beings improved, their health's improved (…) Things we can evaluate and they're not re-offending and things like that. (Laura)

5. Discussion

The present study sought to explore the experiences of senior Justice workers in implementing TIP within the adult Justice system in a HSCP in Scotland. By examining both facilitators and barriers, this research provides insight into the practical implications of TIP in justice settings. Participants acknowledged the importance of implementing TIP in justice settings and felt generally positive about their experience in TIP implementation while also highlighting some practical challenges (Research Question 1). Findings highlight the crucial role of consistent and ongoing training for Justice workers, which, combined with supportive infrastructure, fosters an environment conducive to trauma-informed care. These elements enable practitioners to engage with service users in a way that acknowledges and mitigates the effects of trauma. Additionally, the study identified the importance of structural support for TIP, emphasising the need for organisational commitment in terms of resource allocation and a supportive working environment (Research Question 2). However, challenges such as limited resources and resistance to change were significant barriers (Research Question 3). Despite these obstacles, participants noted that adopting flexible and collaborative approaches within their teams helped address some of these challenges. This adaptability allowed Justice workers to better navigate the complex dynamics involved in implementing TIP, highlighting the potential of TIP to bring about meaningful changes in the Justice system.

These findings identified several key facilitators and barriers to TIP implementation, which are consistent with previous research (Covington, 2022; Covington & Bloom, 2018; McAnallen & McGinnis, 2021). Facilitating factors include improving staff and service user

knowledge and well-being through ongoing access to theoretically grounded TIP training (e.g. Bloom & Farragher, 2013; Branson et al., 2017; Foltz et al., 2023; Harris & Fallot, 2001a, 2001b; Mahon, 2022; Purtle, 2020), recognising the importance of TIP in resource allocation, infrastructure, and the physical environment, and encouraging flexible, creative, and collaborative ways of working. Supervision structures for staff in the Justice system are also crucial, contributing to improved staff knowledge, skills, self-efficacy, confidence, competence, sense of safety, and better client outcomes (Berger & Quiros, 2014; 2016; Levenson et al., 2022).

As found in earlier work (Frost & Scott, 2022; Skar et al., 2023), the current study highlighted the numerous emotional and psychological risks when working within the Justice system including burnout and secondary trauma. The emotional toll of working with traumatised individuals and navigating the power dynamics within Justice services can significantly impact their well-being. To manage these risks, justice workers employed various techniques, including peer support, access to supervision, and self-care practices. Additionally, ongoing TIP training helps reinforce trauma-informed approaches and provides workers with the tools to handle the emotional demands of their roles effectively. These strategies play a crucial role in maintaining the well-being of justice workers and ensuring the sustainability of TIP in the Justice system.

The present study identified several factors hindering the implementation of TIP, consistent with earlier research (Elwyn et al., 2017; Rich & Garza, 2022). A key barrier is resistance to changes in working practices. Leadership commitment to trauma-informed organisational change is essential in the Justice system, particularly in recognising unique aspects of organisational culture, such as levels of safety and staff empowerment. This is crucial for overcoming barriers and fostering buy-in from key staff and stakeholders (Middleton et al., 2015). Despite the challenges, all participants acknowledged the relevance and value of TIP in the Justice system.

As in previous studies (Baglivio et al., 2020; Fox et al., 2015; Grady et al., 2016; Hoysted et al., 2018; Levenson et al., 2014; Reavis, 2013; Tran et al., 2018), participants unanimously recognised the high prevalence of trauma among service users. This understanding and appreciation for TIP contributed to building mutual trust, safety, and supporting clients in their recovery journey, fostering growth (Chaudhri et al., 2019; Levenson, 2020). Participants also emphasised that secondary trauma is a significant issue for staff in the Justice system, in line with previous work (Campbell, 2019; Frost & Scott, 2022; Lambert, 2018; Munger et al., 2015). Staff support and therapeutic input were deemed necessary, alongside ongoing TIP

training and supervision, to help recognise and mitigate the risks of secondary trauma and to benefit from the protective role of supervision (Berger & Quiros, 2014; Skar et al., 2023).

The risk of secondary trauma identified by participants is consistent with prior evidence on the psychological costs of working with trauma for practitioners in education, health, and psychiatric services (Bercier & Maynard, 2015; Cavener & Lonbay, 2024; Cogan et al., 2022; Cogan et al., 2024; Griffith et al., 2023; Hydon et al., 2015; Ko & Memon, 2023; Lamb & Cogan, 2016). Prioritising staff well-being is vital for TIP implementation, as noted in existing literature (e.g. SAMHSA, 2014; Marsh et al., 2016). Providing a supportive infrastructure, supervision, and reflective practice is essential for safe practice, given the unique challenges and risks of secondary trauma faced by Justice system practitioners who consistently work with traumatised individuals. Establishing a supervisory context that fosters trust and collaboration between supervisors and supervisees is crucial, as specialised supervision addressing the complexity of trauma is key for both practitioners and clients (Berger & Quiros, 2016; Sutton et al., 2022).

Flexibility and adaptability were also found to facilitate TIP implementation, as these approaches shift power dynamics and enhance service user choice and control (Kahan et al., 2020; Levenson, 2017). A 'whole systems' approach is required for TIP, where the workforce understands the effects of trauma and its links to clients' difficulties, maladaptive coping mechanisms, and strengths (Levenson, 2020). It is necessary to embed and regularly review TIP policies and procedures across operational practices, focusing on both physical and psychological safety for staff and service users (Covington, 2022; Covington & Bloom, 2018; McAnallen & McGinnis, 2021; Morton et al., 2024). These policies should be supported by a robust infrastructure that guides and sustains TIP (Jewkes et al., 2019).

Participants also highlighted that the physical environments in which they provided Justice services were often unsuitable for trauma-informed work, hindering TIP implementation. Creating a physical space that fosters safety is critical for the success of TIP (Covington, 2022). Additionally, participants noted the dual role of service users as both trauma survivors and potential perpetrators, raising issues of justice within the system (Ross et al., 2023). Leadership plays a vital role in sustaining a Justice system that views offenders not as the 'dangerous other', but as co-citizens whose behaviours are shaped by multiple factors such as adverse childhood experiences, poverty, and social exclusion (MacIntyre et al., 2022; Cogan et al., 2022).

To prevent replicating patterns of inequality, marginalisation, and oppression within the Justice system, leadership must commit to organisational change grounded in a human rights framework and person-centred TIP (Scottish Government, 2022). Effective TIP implementation requires that the organisational structure of Justice services itself becomes trauma-informed (Covington, 2022). While developing a trauma-informed workforce is a crucial goal (Lyons, 2022), it must be accompanied by an infrastructure that embeds trauma-informed principles into job roles and functions, with systems in place to support Justice workers in applying these principles (Ko et al., 2008).

5.1. Limitations and recommendations

Despite the rich and in-depth information that was gathered in this qualitative exploratory study, a limitation is the inability to generalise qualitative findings. For example, in many Justice systems in the world, individuals from marginalised racial and ethnic backgrounds may face additional challenges and stressors within the system that can exacerbate the effect of secondary trauma (Degruy-Leary, 2017; Kennedy, 2012). The current sample of participants was reflective of the ethnic composition of Scotland, whereby 95.4% of the Scottish population report their ethnicity as 'White' (Audit Scotland, 2022). Further research considering issues of race within Justice services can help gain a more comprehensive understanding of the unique experiences and needs of Justice workers, addressing the intersectionality among race, trauma, and the Justice system (Hoberman, 2012). Nonetheless, transferrable insights from participants' accounts illuminate understandings of what helps facilitate the implementation of TIP, comparable and complimentary to other service settings and practice contexts. It is also noteworthy that the study outcomes are likely to have been impacted by COVID-19 related stressors and the ongoing changes in practice and uncertainty for service providers and users. A growing body of research has highlighted the adverse impact of COVID-19 stressors on health and social care workers (Banks et al., 2020; Cogan et al., 2022; Ravalier et al., 2023). The current study focused on the perspectives of senior Justice workers given that they had been tasked with implementing TIP within their service setting in a single study site. Future research should seek to explore the perspectives and experiences of staff working in diverse roles and levels of seniority within and across Justice services to gain insight into facilitators (and potential barriers) to TIP implementation across the whole system. This would help provide insights into how TIP is being supported and experienced by all staff working within the Justice system. It would also be highly beneficial to consider Justice workers' personal histories of trauma to investigate how personal trauma may contribute to the

development of secondary trauma in this population, as well as the role that organisational support has in mediating this effect (Degruy-Leary, 2017; Woodfield et al., 2023). Trauma survivors are the experts of their own lived experiences, and their voices are crucial for understanding Trauma-Informed Practice (TIP) and for developing collaborative, dialogic approaches that empower individuals from diverse backgrounds to establish new norms of interaction and participation, working together to achieve a collective goal (Weaver, 2019). Furthermore, it is essential to comprehend the needs and experiences of the children and families of prisoners, the impact that involvement in the Justice system has on family relationships, and the significant role families play in supporting the rehabilitation process (Cogan et al., 2005; Gualtieri et al., 2020).

Further research examining the perspectives and lived experiences of Justice service users regarding TIP is essential, as it offers valuable insights into how TIP affects their lives. While this study used a qualitative approach, future research would benefit from a longitudinal, quantitative methodology to produce generalisable outcomes across a wider population of Justice workers. Scotland's justice workforce includes a diverse range of roles across various sectors, including law enforcement, courts, probation, and rehabilitation. According to the latest available data (Community Justice Scotland, 2024), this encompasses around 15,000 individuals in diverse justice worker roles. Survey-based research could yield such population-level data, enabling calculations of representativeness and trend analyses over time within the Justice workforce. Such studies could investigate how TIP influences critical outcomes, including service user re-traumatisation rates, staff burnout, and service effectiveness across varied justice settings. By gathering responses from a broader cohort of Justice workers, longitudinal survey research would facilitate statistical analyses of TIP's impact on both individual and systemic outcomes, providing insights that support the sustainable implementation of TIP in justice contexts. Further longitudinal research will also enhance our understanding of the mechanisms of change that underpin TIP in Justice settings, clarifying how best to measure and evaluate its effects on both staff and service users (Auty et al., 2023; Campbell et al., 2023; Champine et al., 2019; Goodman et al., 2016). Increased funding for evaluation and education, particularly through diverse professional networks, will bolster awareness of evidence-based TIP frameworks (Emsley et al., 2022), promoting informed policy-making and TIP implementation in the Justice system.

Finally, implementing a strengths-based, non-pathologising approach to TIP service delivery in the Justice system should aim to measure opportunities for post-traumatic growth and other potential mediators of positive outcomes among service users and staff exposed to trauma in the workplace (Barnicot et al., 2023; Cogan et al., 2024; Henson et al., 2021; Manning et al., 2015). Adopting this wider 'systems'-based approach has the potential to provide a wide range of health and social care institutions with a multi-level framework for the implementation of TIP that focuses on early intervention, prevention, care and treatment (Magruder et al., 2017). Such as approach can benefit from rapid innovations in artificial intelligence (AI) technologies (Cogan et al., 2024) that will accelerate understandings of trauma and its impacts and help forge pathways to identifying both risks and protective factors for trauma. The need to harness computational approaches to big data on trauma in a secure, private, sensitive and ethical manner in accordance with 'best practice' governance structures for mental health data science is essential (Cogan, 2024)

6. Conclusion

This study provided important insights into senior Justice workers' experiences of implementing theoretically informed TIP in Justice services in one HSCP in Scotland. It highlighted the importance of understanding Justice workers' perspectives and experiences of the potential facilitators and barriers to implementing TIP in Justice settings in accordance with principles aligned to person-centred care (McAnallen & McGinnis, 2021), the recovery movement (Davidson, 2016) and systems development model (Bloom & Farragher, 2013; Harris & Fallot, 2001a, 2001b). Central to the successful implementation of TIP in Justice services is ensuring ongoing trauma training, supervision, resources, funding and an infrastructure of support with leadership 'buy in' to help facilitate organisational change. Whilst challenges in Justices services such as limited resources relative to the high prevalence of trauma within the service may act as barriers to the implementation of TIP, its principles along with ongoing staff training can help create an environment conducive to rehabilitation, safety and recovery (Miller & Najavits, 2012). The conclusions concerning the implementation of TIP in Justice services are dependent on ongoing and future research demonstrating that it has a generalisable benefit on key outcomes such as reducing re-traumatisation within services and improved services user and staff outcomes. Longitudinal research can also help ascertain its wider impact on important outcomes such as rates of re-offending, the development of pro-social coping skills, increased service user engagement and safer work environments.

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Data availability statement

Anonymised data available on request due to privacy/ethical restrictions.

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