EXPOSURE TO TRAUMA IN CHILDHOOD AMONGST ADULT MALE PRISON AND FORENSIC POPULATION: A SYSTEMATIC REVIEW

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ABSTRACT

Background: Exposure to trauma in childhood has been linked to increased engagement with the criminal justice system and negative outcomes later in life. This review aims to summarise studies reporting on the prevalence of adverse childhood experiences (ACEs) in adult male detained in prison and forensic hospital settings. Methodology: Electronic databases were systematically searched for peer-reviewed articles published between 1980 and 2021. Results: Of 61 articles, 50 (82%) were conducted in western countries. Childhood abuse and neglect were reported more frequently than indirect trauma. Ethnicity was only reported in 26 studies (43%). Conclusions: This review identifies biases in the types of trauma explored in male populations and explores the cultural competency of ACEs framework.

INTRODUCTION

The number of individuals detained, worldwide, has increased by 24% in recent decades (Walmsley, 2018). Consistent with the increasing number of prisoners, there is growing demand for forensic psychiatric services, particularly in Western European countries (Jansman-Hart et al., 2011). The rise in the number of people in prisons and needing specialist forensic services has resulted in a resurgence of research into risk factors associated with offending, including trauma (Honoroato et al., 2016; Hughes et al., 2017). The current systematic review aims to systematically summarise related studies and highlight the types of childhood trauma reported amongst male adults in the criminal justice system.

METHODOLOGY

Search Strategy: Articles published between Jan 1980-2020 were retrieved from electronic databases. The focus search was also performed on high-yield journals.

Exclusion Criteria: i) did not report prevalence, ii) duplicate publications from a previously used dataset, iii) grey literature, iv) sample which was more than 90% female, or were adolescents, v) qualitative research.

Procedure: Abstract and full-text screening, quality appraisal, and data extraction were performed by two researchers. Consensus was reached with a 3rd researcher.

RESULTS

Fig 1 shows the search strategy and references screening process. Overall, the search identified 15,335 articles. Of these, 61 were included in the current systematic review.

Study Characteristics

45 (74%) were in a prison. 8 (13%) in forensic inpatients. 3 (5%) in forensic outpatients. 2 (3%) in probation services. 3 (5%) in both forensic and prison.

Only 26 (43%) reported ethnicity. Of papers which reported ethnicity, 42.8% were White, 38.3% Black, 16.6% Hispanic, 2.8% Indigenous and 7% identifying as other.

Prevalence of Exposure to Childhood Trauma

The current review demonstrated direct traumas, such as sexual abuse, to be the most frequently measured (n=40), as opposed to indirect traumas, such as household mental illness and parental separation (n=7).

DISCUSSION

This systematic review identifies the cultural competency of ACEs to be a clear gap in the literature, with most studies conducted in high-income and western countries. In addition, considering that direct and indirect trauma are often co-occurring, the latter being the lowest measured variable might indicate that biases are present in our understanding of childhood trauma among the specified populations.

Clinical and Corrocal Implications

- Trauma-informed interventions, environments and policies are critical to meeting the trauma needs of offending populations.
- Recognising and responding to such needs holds potential implications for improving engagement in rehabilitative work and reducing future risk for recidivism.

Future Research

- A greater research focus on indirect trauma experiences is needed across male forensic and prison populations.
- Future research exploring exposure to childhood trauma across different cultural contexts is also necessitated.

Limitations

- The review included papers exploring traumas included in the ACEs framework, which limited its breadth and scope.
- Pooled prevalence was not calculated.

REFERENCES