



## Trauma Informed Training & Police Perceptions of Victim Behaviors

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Sexual and domestic violence occur with frequency, have significant consequences for survivors, and have historically been met with skepticism by the criminal justice system, particularly among law enforcement. This is evidenced by the backlog of untested sexual assault kits in major cities (Fallik & Wells, 2015; Wells, 2016), the use of extra-legal factors in sexual and domestic violence case processing (Holleran, Beichner, & Spohn, 2010), and significant case attrition (Campbell et al., 2014). Existing research has suggested that general shortcomings in responding to sexual and domestic violence survivors may, in part, be the result of misperceptions surrounding the manner in which trauma manifests and the way the police officers expect victims to behave.

### Trauma, Police Misperception, and Case Attrition

Extant research has demonstrated the extent to which sexual and domestic violence victims develop clinically diagnosable symptomology, specifically, post-traumatic stress disorder (PTSD; Campbell, Dworkin, & Cabral, 2009; Mason & Lodrick, 2013). As a consequence of PTSD, survivors may present with restricted affect, emotional numbing, and avoidance of eye contact. Disjointed recollection has also been a common consequence of PTSD. Oftentimes, the memory encoding process is disrupted during traumatic experiences, which can result in amnesia or fragmented memories (Hardy, Young, & Holmes, 2009; Mason & Lodrick, 2013). Subsequently, survivors may provide multiple, inconsistent, and non-linear recollection of victimization events that piece together like a puzzle (Hardy et al., 2009; Maddox et al., 2012).

Importantly, the conduct and self-presentation that sexual and domestic violence survivors often exhibit is inconsistent with the traditional expressive emotionality expected among police officers (Ask, 2010). Victims who have presented with flat affect, emotional numbing, avoidance of eye contact, and disjointed recollection of events may signal to criminal justice personnel that they are not “worthy victims” or are behaving deceptively (Ask, 2010; Bollingmo et al., 2008; Maddox et al., 2012). While not systemic across all agencies, research has documented that when behavioral expectations are not met, police question survivor credibility, consequently producing secondary victimization (Campbell, 2008). In turn, this dimin-

ishes the possibility that victims will participate in the criminal justice system — only further exacerbating case attrition and aggravating negative health consequences.

For these reasons, police perceptions surrounding trauma manifestations among sexual and domestic violence survivors can play a key role in a variety of criminal justice processing outcomes and victim-related interactions—thus warranting significant attention. That said, police misperceptions of trauma responses may, in part, be due to a lack of specialized training and education concerning the range of ways trauma can be expressed following victimization (Campbell, 2005).

### Effectiveness of Police Training

In 2015, the Department of Justice established an authoritative guidance on identifying and preventing gender bias to aid law enforcement in building policies, training, and practice to assist crime victims (Department of Justice, 2015). Ideally then, police training should reduce gender bias and enhance the appropriate handling of sexual and domestic violence cases, including investigation, interagency and personnel cooperation, and prosecution.

Despite the importance and potential implications of training, only one study has assessed the effect of training on trauma misperceptions among police officers. Using a sample of 211 Swedish police officers, Ask (2010) reported that prior training on crime victims' psychological presentation produced a decrease in the interpretation of emotional expressiveness as an indicator of victim credibility compared to non-participating officers. This finding is promising, yet limited in its utility due to concerns surrounding generalizability to a U.S. context.

### Methods

This current report provides a summary of results from a recent study designed to examine the relationship between a mandatory trauma-informed training and the endorsement of trauma misperceptions among police personnel from a large, urban municipal police department located in one of the five largest U.S. cities (Franklin, Garza, Goodson, & Bouffard, 2018). Specifically, 5,300 police personnel participated in an agency-wide, mandated, four-hour training block—the first of its kind for this particular agency—that addressed best practices in

responding to sexual and family violence, gender bias, neurobiology of trauma, and resource referral for sexual and family violence survivors. The training cycle began on September 1, 2016 and concluded August 31, 2017. Sessions were held once a week, and training was administered by police personnel and professional victim advocates/trainers from the local county women's center.

Prior to the 2016-2017 training cycle, baseline pre-training data were collected during roll-calls at all 14 metropolitan substations. Roll-calls were held at 6:00 and 7:00am, 2:00 and 3:00pm and 10:00 and 11:00pm. On the scheduled date, pencil-and-paper surveys were administered to commissioned personnel who were present for roll-call after reading an institutional review board (IRB) approved description of the study that highlighted the voluntary and anonymous nature of participation. In total, 694 surveys were handed out and 633 surveys were returned, for a response rate of 91.2 percent. Of the 633 surveys, 514 surveys had completed data.

Post-training data were collected using Qualtrics, an online survey platform. During the year-long training cycle (Sept. 1, 2016 – Aug. 31, 2017), officers at each training session were verbally notified about the opportunity to participate in a voluntary and anonymous survey. Attendees were provided with a postcard that described the survey as "Police Attitudes About Crime and Victimization," detailed information about how to access the survey online. The online survey included the same items contained in the pre-training, baseline survey. Online survey administration yielded 1,221 responses, for a response rate of 23.03%. Of those, 468 provided completed data.

### Dependent Variable

**Trauma Misperceptions.** Seven items were used to measure beliefs about crime victim behaviors (Ask, 2010). Items were measured on a 6-point Likert-type scale from 0 (strongly disagree) to 5 (strongly agree). Items included statements: "A crime victim who displays positive emotions (e.g., laughter, smiling) during his/her testimony is not likely to be telling the truth" and "A crime victim's inability to report details about the event shortly after the crime (less than a day) is reason to question the accuracy of the statement." Items were summed to create an additive index from 0 to 35, with higher scores representing increased adherence to misperceptions of trauma.

### Independent Variables

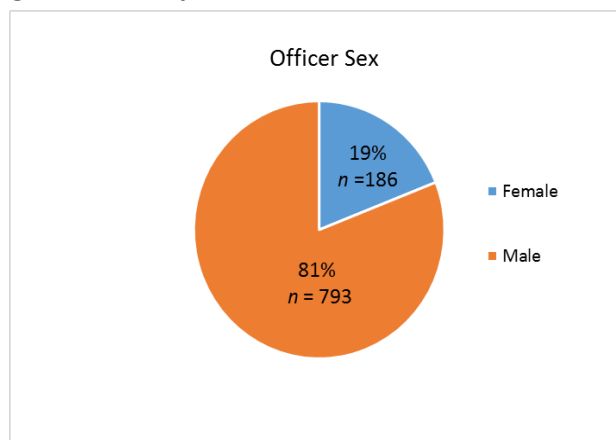
**Trauma-Informed Training.** Participation in the agency, mandatory training was captured as a dichotomous variable [Pre-training = 0 ( $n = 514$ ; 52.5%); Post-training = 1 ( $n = 465$ ; 47.5%)].

### Control Variables

Eight variables were included as control measures: sex, race/ethnicity, educational attainment, years of service, number of family violence calls in previous 12 months, number of sexual assault calls in previous 12 months, rape myth adherence, and impulsivity. *Officer sex* was a dichotomous variable (see Figure 1) and *race/ethnicity* was recoded into three dummy vari-

ables where "White" was the reference category. Educational attainment was an ordinal variable [high school = 0 ( $n = 58$ ; 5.9%); some college = 1 ( $n = 240$ ; 24.5%); two-year degree = 2 ( $n = 107$ ; 10.9%); four year degree = 3 ( $n = 370$ ; 37.8%); graduate school = 4 ( $n = 204$ ; 20.8%)]. *Years of service* was a continuous variable that measured years employed in law enforcement ( $M = 15.07$ ,  $SD = 10.27$ ). *Number of family violence calls in previous 12 months* was an ordinal variable that captured calls participants responded to [None = 1 ( $n = 331$ , 33.8%), "One to five" = 2 ( $n = 113$ , 11.5%), "Six to ten" = 3 ( $n = 79$ , 8.1%), "11 to 20" = 4 ( $n = 118$ , 12.1%), 21 or more = 5 ( $n = 338$ , 34.5%)]. *Number of sexual assault calls in previous 12 months* was an ordinal variable that captured calls participants responded to ["None" = 1 ( $n = 456$ ; 46.6%), "One to five" = 2 ( $n = 383$ , 39.1%), "six to ten" = 3 ( $n = 83$ , 8.5%), "11 to 20" = 4 ( $n = 26$ , 2.7%), "21 or more" = 5 ( $n = 31$ , 3.2%)]. *Rape myth endorsement* was captured using 20 items from the Illinois Rape Myth Acceptance Scale– Short Form (Payne, Lonsway, & Fitzgerald, 1999). Items were summed to create a scale from 0-100 where increased values represented higher levels of rape myth acceptance ( $M = 19.41$ ,  $SD = 11.05$ ). Finally, three items from Grasmick et al. (1993) were used to capture participant levels of *impulsivity*. The three items were summed to create an additive index from 0-15 where increased values represented increased impulsivity ( $M = 3.57$ ,  $SD = 2.92$ ).

**Figure 1. Participant Sex**



### Results

Descriptive statistics examined the extent to which police participants in the pre-training sample endorsed trauma misperceptions. Participants scored at the approximate midpoint on trauma misperceptions ( $M = 14.82$ ,  $SD = 6.95$ ). Additionally, participants scored well below the scale midpoint on rape myth acceptance ( $M = 19.41$ ,  $SD = 11.05$ ) and on impulsivity ( $M = 3.57$ ,  $SD = 2.92$ ). One-third of participants reported no experience responding to family violence CFS in the previous 12 months ( $n = 331$ ; 33.8%) and nearly half of participants reported no experience responding to sexual assault CFS in the previous 12 months ( $n = 456$ ; 46.6%)

### Predictors of Trauma Misperceptions

A multivariate ordinary least squares regression model (OLS) was estimated to determine the relationship between the

trauma-informed training, while controlling for several relevant variables. Five variables were significant predictors of trauma misperceptions behaviors (see Table 1).

First, the trauma-informed training was a significant negative predictor of trauma misperceptions, such that officers who completed the training reported decreased trauma misperceptions. Among the officer demographics, officer sex was a significant negative predictor of trauma misperceptions, such that female officers reported decreased trauma misperceptions as compared to male officers. Years of service was a significant negative predictor of trauma misperceptions, such that officers with longer tenure on the job, reported decreased trauma misperceptions. Additionally, rape myth acceptance was a significant positive predictor of trauma misperceptions, such that officers with higher endorsement of rape myths reported increased trauma misperceptions. Finally, impulsivity was a significant positive predictor of trauma misperceptions, such that officers with higher levels of impulsivity reported increased trauma misperceptions.

**Table 1. Predictors of Trauma Misperceptions**

Variables	Effect on Trauma Misperceptions
Trauma-Informed Training	-
Female	-
Black	No effect
Latino/a	No effect
Educational Attainment	No effect
Years of Service	-
Family Violence Calls for Service	No effect
Sexual Assault Calls for Service	No effect
Rape Myth Adherence	+
Impulsivity	+

## Discussion

The present study was the first of its kind to examine the relationship between a mandatory trauma-informed training and trauma misperceptions among police officers within the U.S. context. Several findings are worthy of significant discussion.

First, results demonstrated some level of police officer trauma misperceptions among the pre-training sample. In other words, police personnel in this study endorsed attributions that support stereotypical trauma response, such as emotional expressiveness, hysteria, timely reporting, and linear recollections. Endorsing these attributions has the potential to exacerbate secondary victimization among survivors and aggravate case attrition. Future research should continue to assess trauma misperceptions among police officers commissioned in other geographic regions, employed at small or mid-sized agencies. It would also be beneficial to assess trauma misperceptions among other personnel who interface with survivors such as victim advocates, prosecutors, and representatives from non-governmental organizations.

Next, findings from the current study demonstrated that police officers who had participated in the trauma-informed training reported significantly decreased levels of trauma mis-

perceptions as compared to police officers in the pre-training sample. These results lend to support to existing research on ways that specialized training has improved attitudes among law enforcement personnel (Darwinkel, Powell, & Tidmarsh, 2013; Smith, Wilkes, & Bouffard, 2016). Indeed, systematized training offered to all police practitioners has the potential to augment police responses to sexual and domestic violence survivors.

Additionally, findings from the multivariate OLS regression identified the role of officer sex and years of service as significant predictors of trauma misperceptions. To be sure, male police participants adhered to increased levels of trauma misperceptions as compared to female police participants. This finding is in line with existing research that has demonstrated that women, in community and police samples, generally have responded more positively to crime victims (Hockett, Smith, Klausling, & Saucier, 2016; Rich & Seffrin, 2014). Furthermore, police participants with more years of service reported decreased trauma misperceptions as compared to police participants with less job tenure. This is likely due to increased exposure and knowledge from responding to crime victims.

It is worth mentioning that rape myth endorsement was a significant positive predictor of trauma misperceptions, such that police officers who endorsed higher levels of rape myths reported increased trauma misperceptions. This finding is particularly interesting given that police participants in this sample endorsed relatively low levels of rape myth adherence. This result demonstrates the saliency of rape myth endorsement and the negative role that this has on police response to sexual and family violence survivors. From a policy standpoint, this indicates that rape myth endorsement continues to be a critical area for improvement and intervention.

Finally, police participant impulsivity emerged as a significant predictor of trauma misperceptions, such that police participants with higher levels of impulsivity reported increased trauma misperceptions. Future research should continue to examine the influence of police officer impulsivity on other responses to crime victims, such as discretionary decision making.

## Implications and Recommendations for Texas

Findings from the present study have important implications, particularly for law enforcement across Texas. Indeed, results from the current study demonstrate that when law enforcement are provided with the most recent scientific information regarding trauma-informed police practices, they endorse lower levels of trauma misperceptions. Furthermore, results presented here point to the potential for the 2015 Department of Justice guidance to improve law enforcement responses and decrease gender bias in responding to sexual and domestic violence survivors through victim centered, trauma informed approaches. From a policy standpoint, this has the potential to enhance first contacts and follow-up investigations to encourage victim participation and decrease case attrition only benefiting all stakeholders.

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