

The Creation of a Collaborative, Mutually Informed Trauma and Mental Health Course for Incarcerated Populations

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INTRODUCTION

The prevalence rate of post-traumatic stress disorder (PTSD) in the general population is roughly 4%, while international rates among the incarcerated population range from 30-60% (Belet et al., 2020; Wolff et al., 2014). Even without a formal PTSD diagnosis, 90% of people in prison report experiencing violence or trauma during incarceration, and many endure additional trauma within just eight months of release (Pettus, 2023). Many incarcerated individuals have endured physical or sexual abuse during childhood, often carrying this trauma into the prison system, where symptoms are exacerbated by violence, mistreatment, and other harsh conditions (Dion et al., 2019). Some research estimates that 86% of individuals in prison have experienced trauma before their incarceration, with 70% experiencing trauma in the year leading up to their arrest (Pettus, 2023). Beyond PTSD, mental health issues are also more prevalent in incarcerated populations, with 37% of individuals in state and federal prisons, and 44% in local jails being diagnosed with a mental illness (SAMHSA, 2020).

The effects of trauma often continue after release from incarceration, making it difficult for released individuals to create stable living conditions and stay out of prison (Shahaed et al., 2024). To effectively support these individuals, a trauma-informed approach must be adopted that acknowledges their past, validates their pain, and promotes healing without worsening preexisting traumatic symptoms. Such an approach requires an environment to be fostered that is conducive to healing and growth, in which members can comfortably share their traumatic experiences without fear of harsh judgement and where they can receive consistent support and encouragement in their recovery (Dion et al., 2019).

Race, class, gender, and other social identities shape both exposure to trauma and pathways to incarceration, with communities already marginalized by structural inequalities bearing disproportionate burdens of both. Alabama has one of the highest imprisonment rates in the nation, with Black people incarcerated at 2.9 times the rate of white people (Prison Policy Initiative, 2023). Further, while Black people represent only about one-

quarter of Alabama's population, they account for 53% of the state's prison population (Prison Policy Initiative, 2023). Rates of exposure to adverse childhood experiences (ACES) are also higher among Black children with 61% having experienced at least one ACE from birth to age 17, compared to 40% of white children, 51% of Hispanic children, and 23% of Asian children (Sacks & Murphy, 2018). Black children are also over-represented among those experiencing multiple forms of victimization compared to other races (Finkelhor et al., 2011). When researchers expanded the ACE definition to include exposure to racism, community violence, and neighborhood safety issues, trauma continues to be more prevalent in communities of color (Public Health Management Corporation, 2013).

CURRENT STUDY

The purpose of this paper is to discuss the collaboration between incarcerated men and free world faculty and students to create a mutually informed, trauma and mental health course for a local United States prison. In this setting, those working outside of the prison are considered, "free world instructors" and will be reflected as such throughout the manuscript. This paper was co-written by free world instructors in a social work department at a local university and two incarcerated men serving as program leaders within a specialized education program. Our objectives in this paper are to: 1) share the lived experience of trauma and mental health issues among incarcerated men, 2) examine the research on the prevalence of trauma and mental health concerns in incarcerated populations, and 3) discuss the co-creation of a trauma and mental health course for incarcerated populations.

METHODS

After identifying a need for increased education on trauma and mental health in prisons, a 10-week course was developed in collaboration with free world instructors and two incarcerated men serving as program leaders at a U.S. prison. The course emerged through authentic dialogue between incarcerated men and free world instructors with clinical and research expertise in childhood trauma. Course development was an iterative, collaborative process. Free world instructors with trauma expertise and incarcerated men engaged in ongoing dialogue, where lived experiences met clinical

knowledge. Through these conversations, the group collectively identified relevant topics, shaped content, and refined approaches to curriculum development. Incarcerated program leaders maintained an active role in the classroom, helping facilitate dialogue and reflection among their peers.

The course covers an overview of trauma and adverse childhood experiences (ACEs) and how they can affect mental health, substance use, anger, attachment, and relationship outcomes. Although an outline of topics is presented, classroom dialogue facilitates further discussion. Based on Freire's principles, the curriculum emerges from the lived experiences of participants rather than being imposed by academic standards alone. For example, free world instructors provide a foundational knowledge of the basic neurobiology of trauma and the fight/flight/freeze/fawn response. However, the facilitator then engages the group in dialogue, asking questions such as "What does fight-or-flight look like in your experience?" Participants might share how hypervigilance developed as a survival mechanism on the streets transfers into prison dynamics, while free world instructors contribute research on neurobiological responses. Together, we co-investigate how these responses can be adaptive in some contexts while harmful in others.

Through dialogue, we create Freire's concept of "problem-posing education" (Freire, 1970) where instead of presenting trauma as a fixed clinical category, we collectively examine questions such as "How do we distinguish between trauma responses and adaptive survival strategies?" and "What does healing look like in an environment that may continue to be harmful?"

Critical pedagogy requires learning to lead to transformative action. In this context, we provide opportunities for individual transformation and self-reflection, where participants apply new understanding to reframe their own narratives, moving from shame-based self-concepts to trauma-informed self-compassion. Each week, a new coping or grounding technique is taught for participants to practice throughout the week. Throughout the course, participants develop a self-care plan outlining individualized coping mechanisms for managing trauma-related stressors. We also provide opportunities for peer education, where participants become co-facilitators and share knowledge with one another. We discuss strategies to heal trauma that can be used while incarcerated and identify personal strength and resilience factors that can lead to future recovery.

Our approach to gathering reflections from incarcerated individuals mirrored the pedagogical philosophy of the course itself. Just as the curriculum emerged through dialogue rather than top-down design, insights

about the experience were collected through conversational reflection rather than formal pre-post evaluations. Incarcerated men and free world instructors shared their experiences, observations, and transformations through natural dialogue, consistent with the collaborative ethos of the course.

Ethical Implications

The ethical implications of trauma education in prison settings are significant, and social work's professional values provided guidance in our approach. Social workers are bound by commitments to human dignity, self-determination, and social justice. These principles directly counter the dehumanization that can be inherent in carceral systems. Social work faculty bring clinical expertise in trauma while also understanding how structural oppression produces traumatic conditions, allowing them to facilitate learning that addresses both individual healing and systemic factors. As incarcerated settings can re-create or trigger trauma responses, one example of an ethical safeguard was ensuring students in the course were given resources to engage in mental health services offered through the prison.

TRAUMA AS LIVED AND AS UNDERSTOOD BY INCARCERATED MEN

The following firsthand accounts demonstrate incarcerated individuals lived experiences of multiple forms of trauma: childhood trauma, trauma produced by the conditions of incarceration itself, and the ways prison environments can limit the ability to process and heal from these experiences.

Trauma experienced in prison is a very real and under acknowledged area. I believe this is due to a few factors: First off, our prisons are so overpopulated that they have to build larger prisons to house the massive numbers. The resources are few and far between. The general view seems to be: "lock them up and keep the public safe". The public surely has the right to be kept safe from violent incarcerated individuals such as myself. However, the incarcerated individuals and the public are not being prepared for the incarcerated individual's inevitable release.

Incarceration is traumatizing in and of itself. Even though it is a punishment and not meant to be a pleasant experience, I still think we neglect the very real long-term effects of it on a person's psyche. Prison is a pressure cooker; one that's always stuck on the "on" setting. Day in and day

out; month upon month; year after year. You are either a personal victim of or a witness to verbal abuse, emotional abuse, physical abuse, sexual abuse, drug abuse, overdoses, racial tensions, gang influence or dehumanization tactics just to name a few. Navigating your way through these potential dangers, all while fighting to overcome a constant sense of loneliness, stress, depression, and anxiety is difficult. This is firsthand knowledge we get to share with free world instructors who only see small glimpses of our day to day life in prison. Now this is our new reality, soon to become our new normal. Life before incarceration, including close relationships, can no longer be maintained in the same way. Both we and our loved ones are forced to make drastic and rapid adjustments in order to survive. Those who cannot adapt reach critical failure, and our close, long-term relationships end. This failure to adapt, or even the pressure accumulated from successful adaptation, inevitably adds to the constant strain of incarcerated living. Living as such takes an unimaginable toll on one's mental health and stability, and this is to say nothing of their previous state of mental health (conscious or unconscious) before incarceration.

I am guilty and was justly convicted for my crimes. My incarceration is just and fair and I accept responsibility for my horrible choices. Being sentenced to prison is the penalty, but because of factors like the overpopulation of incarcerated individuals and understaffing of officers, the atrocities experienced inside the current prison system would horrify the average citizen and should not be part of the punishment. Our trauma while incarcerated stems from years of witnessing and having to be on alert for threats of violence, death, sexual assault, gang violence, rampant drug use, bad healthcare and an overall forlorn sense of being forgotten. Society does not put in place proper supports to help people who experience harm to deal with their trauma, and in fact over-polices and criminalizes the behaviors of those who have had adverse experiences. Therefore, I believe that it is imperative that a solid course curriculum be put in place to help retrain the trauma-impacted people to recognize and deal with the harms they have experienced. I believe this will improve the prison environment and safety for the incarcerated individuals, officers, and eventually the public.

It is apparent that the current measures being taken, or not being taken, to improve the prison system are insufficient. Our national recidivism rates are disturbingly high, with 66% of released individuals being reincarcerated within just 3 years of their release, and 82% being

rearrested within ten years (Bureau of Justice Statistics, 2021). We must choose one of two responses to this problem: 1) We can choose to believe that their reincarceration is evidence that they do not deserve to participate in society, regardless of any desires they may have to do so, or 2) We can choose to believe that their reincarceration is evidence of our failure to reeducate the incarcerated and provide them with the necessary means to better themselves and be reintegrated as productive members of society, breaking the vicious cycles of generational trauma they were born into. Previous research has found that preparedness prior to release and emotional stability are crucial factors for successful reintegration (Shahaed et al., 2024), both of which can be provided to the incarcerated through mutually informed trauma education.

BREAKING THE ‘CULTURE OF SILENCE’: WHY TRAUMA EDUCATION MATTERS IN PRISON

Though many incarcerated individuals face serious challenges related to mental health and trauma, many lack access to clinical mental health care (NAMI, 2025; Pollack et al., 2009). The Bureau of Justice Statistics (2017) reported that 63% of incarcerated individuals with a history of mental illness do not receive mental health treatment in state and federal prisons. Some programs offer trauma-specific services that do not require a licensed therapist. For example, Seeking Safety and Helping Men Recover are group-based programs that help individuals learn how to cope with triggers, manage anger, and practice self-care. These types of programs are helpful in prison settings because they can be led by trained staff, not just clinicians, and still offer meaningful support to people with a history of trauma (Dion et al., 2019).

Prisons and reentry programs are also beginning to create trauma-informed systems of care, training staff to recognize signs of trauma and strategies for making the environment safer, more respectful, and more supportive. It also includes connecting individuals to other services like housing, employment support, and mental health referrals. Difficulty in accessing services such as these is a key contributor to many cases of reincarceration (Shahaed et al., 2024). When mental health programming looks at the whole person, rather than just their symptoms, it creates space for healing and growth, providing the opportunity for real second chances for the incarcerated (Dion et al., 2019).

Along with mental health support, education plays a crucial role in reducing repeat offenses. Many studies have shown that people who engage in prison education programs are less likely to reoffend (RAND, 2016). Education involves more than simply learning concepts; it involves giving incarcerated individuals the tools and strategies necessary to rebuild their lives after release (Chloupis & Kontompasi, 2025). Those who have successfully reintegrated report that preparation prior to their release, such as learning emotional management skills, were key contributors to their success (Shahaed et al., 2024). Education of all forms has been observed to reduce both violent and non-violent crimes and reduce the likelihood of returning to prison by 43% (RAND, 2016).

BREAKING THROUGH THE ‘CULTURE OF SILENCE’: INCARCERATED MEN’S EDUCATIONAL NARRATIVES

The following are firsthand accounts of incarcerated individuals and their experiences with education programs in the prison setting.

I think education within the prison setting is a vital element of successful rehabilitation. It is important that we continue to learn and grow, exercise our minds, and adapt our thinking patterns so that we can develop effective problem-solving abilities that I believe are integral to our survival. It would be tremendously beneficial to add trauma and mental health education to course offerings. Having a more in-depth understanding of who we are and why better equips us for dealing with our life experiences and relationships. This can also help us to recognize and understand the very thoughts, patterns, and behaviors that led to our incarceration. Personally, I believe that trauma and mental health education in some form should be implemented into our national school system for adolescents. This has the potential to help combat or even prevent a good deal of the negative actions and reactions stemming from trauma and mental health issues.

The fact of the matter is that those of us in prison not only suffered trauma prior to and during incarceration but also inflicted trauma when committing our crimes. Without education that addresses trauma and mental health for the incarcerated, how can we expect any healthy path to re-entry? Make no mistake: many of the incarcerated in Alabama will at some point be released back into society. Taking this into consideration we should ask ourselves

which choice makes more sense for the future: to lock them up and forget about them, or to educate the incarcerated about trauma and mental health so that we can improve the individual together and, as a result, improve the whole community.

I was sentenced to 20 years with the possibility of parole after 7 years for a serious crime. That was almost 12 years ago. During the first 12 months, I am now ashamed to admit, I would downplay the severity of my crime. I would downplay the harm that I caused. The harm that I endured early in life led to bad choices down the road. I would even sometimes justify my illegal actions. However, through my own determination and diligence, I volunteered for every class and program I could find in prison. I even transferred to a different facility to attend a 2-year cognitive behavior program. These are things I have learned in my journey as a student aiming for improvement: First, that all education or behavior modification classes are strictly volunteer. Therefore, if an incarcerated individual does not want to take classes to improve themselves, they are not required to. I believe this does not prepare men and women for release, and it is not helpful for the overall environment inside the prisons. Perhaps, having some mandatory coursework would encourage greater participation in other programming opportunities within the prison setting. Secondly, I now see that everyone has suffered different levels of trauma in their lives. What is important is how we learn to process and react to this trauma. Thirdly, the trauma that I inflicted is real and affected not only my victim but also affected my family and the public trust, and that my crime burdened the already overwhelmed justice system. Without the availability of properly taught curricula to address trauma and mental health, I would not have this change of mindset.

APPLYING FREIRE'S CRITICAL PEDAGOGY TO PRISON-BASED TRAUMA AND MENTAL HEALTH EDUCATION

Traditional prison education often reflects Freire's (1970) concept, the "banking model" in which instructors view students merely as learners of their expert knowledge. This approach ignores the rich lived experiences of trauma, resilience, and survival that incarcerated individuals bring to the classroom. In contrast, a critical pedagogy approach (Freire, 1970) recognizes that incarcerated individuals are not merely recipients of mental

health education, but co-creators of knowledge based in their own lived experience. Using a critical pedagogical approach, free world instructors bring academic frameworks about trauma theory, attachment styles, and therapeutic interventions. However, they simultaneously become students of the real-world application of these concepts. They learn from lived experience how trauma manifests in environments of poverty, systemic racism, violence, and incarceration, contexts often absent from academic textbooks. Incarcerated participants then get to serve in the role of student-teachers. As they learn formal psychological concepts, participants simultaneously teach faculty about the lived realities of trauma, the psychology of survival in extreme environments, and forms of healing and community support that emerge within prison culture. This framework was used as we co-created the course, applying tenets of critical pedagogical such as dialogue and praxis into course curriculum and development.

THE TEACHER-STUDENT, STUDENT-TEACHER DYNAMIC: COLLABORATION ACROSS PRISON WALLS

I love collaborating with the free-world instructors. Doing this is psychologically healthy for an incarcerated individual for many reasons. This helps us to feel seen and recognized. For someone who is not of this particular lifestyle to come into this environment, of their own free will, speaks volumes. The fact that they all give of their own personal time, energy, trust, concern, and that they willingly endure the protocols and procedures demanded by the correctional administration is no small thing to us. Having a free-world instructor gives us a different perspective and practical advice for real life issues that we deal with regularly in our environment. It helps to break up the continuous prison mindset that we are engulfed in day-in and day-out. Most free-world instructors come from different walks of life than those with whom we usually interact with, which helps us to broaden our own horizons. It allows us to practice interacting with people whose manner of life is different from what we are accustomed to, which is necessary for us to learn how to properly reintegrate into society. In prison we learn to be gruff with each other and become accustomed to such behavior. Collaborating with free-world instructors helps us to become more active and responsive.

In my opinion, having the opportunity to take the classes taught by the free-world instructors is the key component to success. The Department of Corrections offers a few 8-week classes that are very helpful. However, due to the overburdened status of our prisons, the classes are too short, which prevents the teachers from going in-depth. Having highly educated free-world instructors come in to teach the incarcerated shows us that we are not forgotten and that there is hope for us to improve prior to our release, and it helps to remove the stigma of seeking treatment for mental health issues when released.

IMPLEMENTATION, EVALUATION AND RESULTS

At the end of the workshop, participants were given a brief evaluation form on their satisfaction with the course and areas for improvement. We hope to incorporate other methods for assessing impact, including more in-depth surveys, qualitative interviews, and standardized behavioral measures in the future. Feedback from participants helps to direct the next steps for an enhanced curriculum that meets the needs of those with lived experience.

Teacher as Learner:

Free World Instructors' Observations

In our first year teaching the course in summer 2024, all 12 students reported having experienced at least three adverse childhood experiences. As we dialogued on the various forms of ACE exposure, incarcerated students taught free world instructors about the complex and compounding impacts of trauma in their communities growing up. The integration of their lived experiences opened the door for broader conversations on how to address systemic roots of trauma in diverse communities. On evaluation forms, students reflected on how their knowledge of trauma increased throughout the course. Students reported an increase in awareness of trauma symptoms, greater understanding of themselves, and having more tools to use to cope with their trauma while incarcerated. The free world instructor observed changes in the men's ability to empathize with one another in the class and watched students develop a deeper understanding of what trauma responses they observe in others across the prison. Students were actively engaged in discussions and practiced self-reflection as they processed traumatic events that they both experienced and perpetrated. The free world instructor

emphasized the hope that comes from increased awareness and focused on how future oriented thinking can lead to more positive outcomes. Participants are not just learning coping skills, they are developing an analysis of why these skills are necessary and how systems might change to address the root causes of trauma.

Student as Teacher:

Incarcerated Men's Role in Knowledge Co-Creation

During my own personal journey, I have been driven by necessity to understand how I came to commit my crime. It is imperative that I come to grips with whatever is broken inside of me, so that I will never again make mistakes like those that I have in the past. Taking the course in trauma has helped me immeasurably in my effort to understand my trauma and how it has affected me. I now know what childhood traumas I have been carrying around and why they have stuck with me unconsciously. I have earnestly begun to address these issues, and I am now learning how to leave this baggage behind. It amazed me how much weight I had been lugging around for so long and the things that had been so severely imprinted on my mind. I have now resolved several of them and feel more freedom and confidence than I have ever felt before. Even better, I can now help my own children to address whatever lingering effects my actions may have caused them. The free world instructors have provided me with invaluable knowledge that will continue to benefit me for the rest of my life.

After taking the Trauma 101 course, I have seen excellent results while implementing the lessons that I have learned. I found that my view of others had changed for the better because I now had a better understanding that others' behaviors, just like my own, were based on our experiences. For example, I had a fellow incarcerated peer who was always very loud and exuberant when he spoke and almost always had to be the center of attention. At first, I was just annoyed with him, but then I began to think that maybe he did not have the same level of attention from others that I had growing up. Perhaps, he experienced trauma that made him feel unheard or stifled. These considerations changed my perspective of him. Now I try to spend time with him daily and simply listen to him, practicing active listening and engagement. This has improved my friendship with him and has improved both of our communication skills as well.

DISCUSSION

Redefining Expertise for the Future:

The Generative Knowledge of Incarcerated Participants

As participants in the first trauma workshop, we found it to provide a helpful overview of trauma and its effects. In the future, we think adding more time to the workshop, whether additional weeks or a longer class time, would be beneficial as understanding and resolving trauma (the hopeful goal) is not a process that can be rushed and is difficult for those incarcerated to admit to or address. Perhaps after the 101 course there should be another class that dives even deeper into the understanding of changing our neuropathways as it is vital for the incarcerated person and the public to scientifically see and know that it is possible for us to change the way we think and therefore change our actions, habits, and destiny.

Additionally, creating classes for the victims may be helpful. Generally speaking, the victims of our crimes do not wish for us to be released on parole. This is understandable since there has been little to no help for the victim to process or deal with the trauma inflicted on them.

From Expert to Co-Learner:

Free World Instructors' Insights

As a co-free world instructor of the Mental Health and Trauma Workshop, I have witnessed just how deeply many incarcerated individuals want to understand themselves and grow. I have seen powerful lightbulb moments as men connect with concepts like stress responses, attachment styles, and emotional regulation. These workshops have created a powerful space for reflection, where participants do not just absorb new ideas, they begin to make sense of their own stories, often for the first time. It is in these moments that real understanding and healing start to take root. Contrary to what many believe, these men are not closed off to change - they are hungry for it. Because so many will return to the free world, it would be a profound disservice to withhold the knowledge and tools that could help them heal, reconnect, and thrive, not only for their sake, but for the sake of their families, friends, and communities.

Each visit to the prison reinforces my understanding of how our environment shapes our behavior. When we discuss current events, evolving technology, or our favorite music, we do so at will. My attention

is not solely focused on completing tasks for a job and our interactions are not transactional. I choose to engage in conversations with them, laugh with them, and explore heavy feelings. The freedom to choose to engage with another person is something I often take for granted outside the prison walls, but the participants often share that having a conversation with a free world person is something they certainly do not take for granted. It is deeply valued and reminds them of their humanity and worth.

Implications for Prison Education on Mental Health

The successful implementation and sustainability of mutually informed educational programs on trauma and mental health for the incarcerated require several considerations. Firstly, it requires that clinicians or academics invest in providing psychoeducational opportunities for successful reintegration through mental health education to incarcerated populations at the local level. Without the investment of trained free world instructors, incarcerated individuals have no means of pursuing a research-informed education in trauma and mental health. Prior research demonstrates the effectiveness of having “outside” instructors in which a confidential and collaborative treatment model is used that recognizes the power dynamics at play in the therapeutic relationship within a carceral setting (Pollack et al., 2009).

Secondly, it requires institutional support from the correctional facilities. This course was only made possible by the active support and partnership of the correctional facility involved. The cooperative participation of prison staff and administration is required for the incarcerated population to have access to these services. Along with administrative buy-in, long-term sustainable funding models are vital for meaningful educational programming to continue in prison settings.

Furthermore, these projects could benefit from the enthusiastic participation of individuals who have previously successfully reintegrated. Incarcerated people typically only have contact with those who have failed to successfully reintegrate back into society. This reality can greatly discourage them and challenge their hopes for success. By connecting the incarcerated with individuals who have healthily reintegrated, they are encouraged, guided, and inspired in their endeavors to reintegrate (Boles et al., 2022). Further, forming strong connections with institutions and businesses that can provide services like mental health care, housing, and employment to previously incarcerated individuals can considerably influence the released

individual's ability to form a stable life and successfully reintegrate into society (Shahaed et al., 2024).

With regard to future research, we hope to collect more rigorous quantitative and qualitative data regarding the program. However, evaluation research with incarcerated populations faces significant methodological and ethical challenges, including institutional review board complexities, power dynamics that can influence response validity, high attrition rates due to transfers and releases, and the need to balance research objectives with the vulnerability and privacy concerns of a population already subject to extensive surveillance and control. We hope to work with prison administration to discuss how to best approach this research, adding quantitative data to the anecdotal stories of success that we hear.

CONCLUSION

In the future, we hope to expand collaborative educational models in incarcerated settings. The collaborative development of trauma-informed programming within correctional settings represents a transformative approach that challenges traditional power dynamics and recognizes the expertise of lived experience. Through the co-creation of trauma education between academic instructors and incarcerated individuals, this model not only addresses the pervasive mental health needs within prison populations but also fundamentally reframes the relationship between knowledge production and marginalized communities. The success of such initiatives demonstrates that meaningful healing and educational outcomes are most effectively achieved when those who have directly navigated trauma are positioned as co-educators rather than passive recipients of mental health interventions.

As correctional systems increasingly recognize the prevalence of trauma among incarcerated populations and its connection to recidivism, this collaborative framework honors the resilience and insight of incarcerated individuals while creating more effective, culturally responsive mental health programming. Ultimately, this approach suggests that the most profound systemic change occurs not through top-down implementation of evidence-based practices, but through genuine partnership that elevates the voices and experiences of those most directly impacted by both trauma and incarceration.

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