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The relationship between trauma and substance misuse in high-risk mentally disordered offenders

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Background
Many mentally disordered offenders (MDOs) have a history of substance misuse and trauma but the limited extant research base has focussed primarily on male MDOs.

Aims
(1) To determine the prevalence of past trauma exposure, and past substance misuse in high-risk MDOs.
(2) To examine the relationship between past trauma and past substance use and current trauma-related psychological sequelae, and to determine whether those relationships differed according to gender.
(3) To investigate high-risk female MDOs’ views about the relationship between their past trauma, and substance misuse.

Method
The research was a mixed methods design with participants recruited from patients detained under the Mental Health Act (1983 as amended 2007) in one high secure hospital. Participants (N=58) completed the Life Events Checklist for DSM-5 (LEC-5), the Drug Abuse Screening Test (DAST-20) and the Alcohol Use Disorder Identification Test (AUDIT). A substance use severity score was calculated from the DAST-20 and AUDIT scores to reflect the level of past substance misuse. Current trauma-related symptomatology was determined with the Trauma Symptom Inventory-2 (TSI-2). A subset of female MDOs (n=23) were interviewed to explore their perceptions, their past substance misuse, and trauma.

Results
Participants had experienced an average of seven traumatic events. Most (N=50; 86.21%) had misused substances historically. Half of the participants had had serious problems with alcohol and/or drugs (N=29; 50.00%) with a further 18.97% (N=11) having had severely problematic use. Greater levels of past trauma exposure were associated with higher levels of past severity of substance use (r=.30, N=58, p<.05). LEC-5 scores were unrelated to TSI-2 scores. Higher substance use severity scores were associated with higher levels of Posttraumatic Stress (r =.27, N =57, p<.05). There were no differences found between male and female MDOs’ past levels of trauma exposure, history of substance misuse, or current trauma-related symptomatology. Greater past substance use severity was associated with higher current levels of trauma-related distress for men but not women.

Theme analysis of interviews with female MDOs identified three superordinate themes: substance misuse as a coping strategy (self-medication hypothesis), substance misuse linked to increased trauma/risk exposure (high-risk hypothesis), and coercion to misuse substances as instrumental to the trauma.

Conclusions
MDOs had high rates of past substance misuse, past trauma, and current trauma-related distress. Unlike male MDOs, for women there was no strong relationship between substance use and current trauma-related symptomatology. Qualitative research suggested that substance misuse was related to self-medication and could contribute to increased exposure to trauma and dangerous situations. The findings support the importance of assessing differing needs of men and women who misuse substances flexibly to ensure a gender-responsive treatment programme that is trauma-informed.