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# Trauma among Girls in the Juvenile Justice System

**National Child Traumatic Stress Network  
Juvenile Justice Working Group**

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**From the**

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## Trauma among Girls in the Juvenile Justice System

### Introduction

Despite falling crime rates, more adolescent girls are arrested and incarcerated in the United States today than ever before (NMHA, 2003). Nearly three-quarters of a million girls below the age of 18 were arrested in 1997, accounting for 26 percent of juvenile arrests. In the 1990s, the number of juvenile females arrested for violent crime index offenses increased 25 percent, although there were no increases for male juveniles for the same offenses. The growing number of girls in the juvenile justice system and the high rates of exposure to violence among these girls pose special challenges and obligations for the juvenile justice facilities and programs.

### Prevalence and Descriptive Statistics

Despite differences in methodology and instrumentation, numerous studies done over the past 10 years have documented high rates of mental and emotional disorders among youth in the juvenile justice system, including high rates of traumatic stress (Arroyo, 2001; Abram et al., 2004; Cauffman et al., 1998; Steiner, 1997; Wasserman et al., 2002; Wood et al., 2002a; Wood et al., 2002b). Prevalence rates of post-traumatic stress disorder (PTSD) among youth in the juvenile justice system should be considered with caution as they vary significantly depending on the type of sample, the measure used, and the time frame assessed (Abram et al., 2004). Additionally, few studies have specifically investigated PTSD among female juvenile offenders, which also makes generating reliable estimates challenging. Generally, however, PTSD has been found to be more common among youth in the juvenile justice system than in community samples, and more common among incarcerated girls than boys. Studies show the following:

- Rates of PTSD among youth in juvenile justice settings range from 3 percent in some to over 50 percent in others (Arroyo, 2001; Garland, et. al., 2001; Teplin, et. al., 2002; Wasserman, et al., 2002; Cauffman, et al., 1998). These rates are up to eight times as high as in community samples of similar-age peers (Saigh, et al., 1999; Saltzman, et al., 2001).
- Among a sample of juvenile detainees, significantly more males (93.2 percent) than females (84 percent) reported a traumatic experience, but more females met criteria for PTSD (almost 18 percent for females compared to 11 percent for males) (Abram et al., 2004).
- Among a sample of incarcerated youth, girls were 50 percent more likely to be suffering from PTSD than the equivalent male population (Steiner et al., 1997).

- Among a sample of female juvenile offenders, 70.0 percent had been exposed to some form of trauma, 65.3 percent had experienced symptoms of PTSD sometime in their lives, and 48.9 percent of these incarcerated females were experiencing the symptoms of PTSD at the time of the study (Cauffman et al., 1998).
- Among a sample of incarcerated youth, traumas experienced by delinquent girls were different from those experienced by delinquent boys: males were more likely to report having witnessed a violent event, while females were more likely to report being the victim of violence (Steiner et al., 1997).
- Among a sample of incarcerated youth, girls reported significantly higher levels of physical punishment and sexual abuse and higher levels of psychological distress (e.g., PTSD and depression) than boys (Wood, 2002).
- Among a sample of female juvenile offenders, 74 percent reported being hurt or in danger of being hurt, 60 percent reported being raped or in danger of being raped, and 76 percent reported witnessing someone being severely injured or killed (Cauffman, 1998).
- Girls from minority groups are over-represented in the juvenile justice system (Chesney-Lind, 2001).

### Potential Consequences of Trauma

Many of the youth in the juvenile justice system have been exposed to myriad traumatic events, either as victims or as witnesses. Consequently, many of these youths develop PTSD and other mental disorders, which then impact their ability to achieve normal developmental milestones in a timely manner (Arroyo, 2001).

Studies have consistently found that among those who are exposed to trauma, females are more likely than males to develop mental health problems as a result (Cauffman et al., 1998; Giaconia et al., 1995). Crimmins et al. (2000) suggest that if trauma is not resolved, negative residual effects may result, including (a) alcohol and drug use, (b) involvement in violent activity, and (c) development of mental health problems such as PTSD. For many of these adolescent females there appears to be a link between the experience of abuse and neglect, the lack of appropriate treatment, and the behaviors that led to arrest.

According to Simkin and Katz (2002), girls who are victims of extreme abuse often act out in ways that cause them to be arrested, and subsequently they are routinely criminalized by the juvenile system. Ford's (2002) review of the research on the development of oppositional defiant disorder and conduct disorder indicates that victimization and PTSD are prevalent among girls, as well as boys, with these disorders.

Chamberlain and Moore (2002) note that stress-reactivity, developmental lags, and impairment put girls at risk for "intra and inter-relational chaos," which can in turn result in involvement in ongoing relational and social aggression as victim and perpetrator.

Exposure to trauma also increases the risk of illicit substance use and subsequent victimization among girls, who may wind up in the juvenile justice system. In fact, arrests for drug abuse violations

have increased markedly over the past few years for adolescent females. In some cities, nearly 60 to 70 percent of young women (ages 15 to 20) test positive for drugs at the time of arrest, with 60 to 87 percent of those female offenders needing substance abuse treatment (NMHA, 2003).

Widom and Kuhns (1996) examined the extent to which childhood abuse and/or neglect increases the risk of promiscuity, prostitution, and pregnancy among traumatized teens. The results from 1,196 subjects (676 abused and/or neglected and 520 controls) indicated that childhood abuse and/or neglect is a significant predictor of prostitution for females.

### **Impact of Juvenile Processing on Traumatized Girls**

The impact of trauma and potential PTSD should be considered when evaluating and providing behavioral health services to girls in the juvenile justice system (Reebye et al., 2000). Because the courts often lack the necessary training and resources to address or to recognize the impact of traumatic experiences, they often lack the capacity to adequately meet the mental health needs of girls who may then end up going deeper into the system.

Girls in juvenile justice settings who have trauma histories need to feel physically and psychologically safe. Many characteristics of the detention environment (seclusion, staff insensitivity, loss of privacy) can exacerbate negative feelings and feelings of loss of control among girls, resulting in suicide attempts and self-mutilation. The traditional methods of preserving order and asserting authority in these centers (especially “tough” physically confrontational approaches and the use of isolation and restraints) may backfire with female detainees who suffer from PTSD (Griffin, 2002). In fact, for females with PTSD the detention experience may result in re-traumatization and/or re-victimization.

### **Need for Gender-Specific Programming**

Connection with others is a central organizing feature of development in girls. Likewise, much of the trauma they face is interpersonal and relational in nature. Juvenile justice programs must help girls address complex and conflictual relationships with family members, boyfriends, and children. They should help girls negotiate gender and family roles, determine appropriate boundaries in relationships, and avoid conflict and violence in dating relationships. Programs should also assist girls to learn appropriate coping strategies and constructively explore and resolve their feelings.

### **Summary**

This review suggests that trauma-sensitive and gender-specific programming and treatment models are needed in order to address needs and prevent retraumatization of girls in the juvenile justice system. The treatment models should provide girls with developmentally reparative experiences that address not only PTSD but also issues of identity, trust, safety, body image, physical self care, affect regulation, peer group selection and engagement, and sexuality. Programs should screen for and address issues related to physical and sexual violence, HIV/AIDS, pregnancy, and drug and alcohol dependency. In addition, the high prevalence of girls from minority ethnocultural groups indicates the need for culturally specific services.

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