

Trauma among Youth in Corrections

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What is trauma?



Adverse experiences/life stressors

Other traumatic experiences

Maltreatment

Abuse

Trauma rates in the JJ system

- Approximately 75-90% of justice-involved youth have experienced trauma
- PTSD 3x to 10x more prevalent
- Complex trauma history: 35% of juvenile detainees compared to 10-13% among community youth

Symptoms and manifestations

- Spontaneous memories/flashbacks
- Heightened arousal
- Avoidance behaviors
- Persistent negative thoughts
- Severe negative emotions

Polyvictimization

Multiple forms

1. Repeated/continuous traumatic incidents
2. Experiencing multiple types of trauma

Adapt to survive

- Aggression
- Risk-taking/impulsivity
- Self-medication
- Hypervigilance
- Isolation
- Affiliation with delinquent peers

Trauma and adolescent development

- The “plastic” brain
- Trauma interferes with self-regulation
 - Focus one’s attention
 - Awareness of environment and own physical/emotional states
 - Learn from the past to adapt to the present
 - Maintain a balanced emotional state

The costs of poor self-regulation

- Traumatized youth develop mental health problems
 - Conduct disorders (ADHD, ODD, CD)
 - Personality disorders
 - Behavioral dyscontrol disorders (psychopathy, SUD, IED)
- Implications for treatment
 - Traumatized youth are amenable to treatment
 - Treatment of trauma as root cause

Correctional environments can exacerbate trauma effects

- Mental health triggers
 - Separation from family
 - Strip searches
 - Isolation
 - Physical or sexual abuse
- Inhibit youths' ability to engage in programming

Special populations: girls

Persistent victimization

- 70-90% of incarcerated girls experienced trauma, often polyvictimization
- Higher rates of abuse, sexual victimization → PTSD, self-harm
- More likely to be “crossover” youth

Increased risk for:

- Substance abuse
- Risky sexual behavior
- Teen pregnancy
- Family/domestic violence
- Unemployment/school failure

Girls: correctional challenges

- Housing
- Sexual abuse
- Inappropriate/insufficient programming
- Medical health/basic needs

Special populations: LGBTQ youth

Victimization → JJ system

- Chronic truancy (to escape harassment)
- Running away (abuse at home)
- Survival crimes (e.g., prostitution)

Increased risk for:

- Peer/family rejection and/or abuse
- Homelessness
- Victimization at school

LGBTQ youth: correctional challenges

- Housing
- Further victimization
- Inappropriate use of solitary confinement

Practice recommendations

- Clear prioritization of community based treatment
- In institutional placements:
 - Groups, classes, counseling targeted toward self-regulation
 - Focused training for staff and support persons

Policy recommendation #1

- Screen for trauma and implement procedural protections
 - Screening alone = net widening
 - Screening should match youth to services, not just determine risk
 - Trauma evaluations should not be admissible in court without consent of youth and counsel

Policy recommendation #2

- Focus resources on the least restrictive environment
 - Fund prevention and early identification programs
 - Support community-based programming (in-home, schools)
 - Community-based setting > residential setting
 - Juvenile facility > adult facility

Policy recommendation #3

- Scrutinize, then reform or eliminate, procedures that harm youth
 - Removal from community/family
 - Transfer to adult court and corrections
 - Boot camps
 - Prolonged isolation
 - Physical and mechanical restraints
 - Strip searches

Policy recommendation #4

- Ensure that youths' trauma histories are used as mitigating, rather than aggravating, information
 - Diversion, not punishment, whenever possible
 - Require judges to consider trauma history, future risk in transfer decisions
 - Statutes requiring explicit consideration of trauma in other court processes

Policy recommendation #5

- Fund evaluations of interventions and respond to findings
 - All programs (community-based or institutional) need to be evaluated for efficacy
 - Measure state's ROI

Concluding thoughts

Build on VA's progress!

- Trauma-informed model touches all aspects of system involvement
 - Law enforcement
 - Intake/screening
 - Diversion
 - Secure confinement

Ultimate (shared) goals:

- Reduce recidivism
- Promote positive youth development
- Create law-abiding, community-engaged citizens

*Thank you for your commitment to
Virginia's youth*

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Gender differences

Girls

- PTSD
- Anxiety
- Depression
- Eating disorders

Boys

- Aggression
- Delinquency
- Substance abuse

Why should state systems care about trauma?

Unintended consequences

- Creates risk of harsher treatment
- Can result in youths' self-incrimination
- May lead to stigmatization