

This brief is an accompaniment to a short video documentary, [“Don't Abandon Us: Addressing Youth, Crime, and Trauma.”](#) Both designed to help increase awareness among decision makers on how childhood trauma and adverse experiences can contribute to youth crime and future legal system involvement. In a moment of growing concern about crime, the video and brief underscore the importance of public safety strategies that identify and address the early traumas that afflict so many young people who come into contact with the criminal justice system—especially those from underserved communities.

Introduction

Since the onset of the COVID-19 pandemic, and despite overall downward trends for the past few decades, communities have been experiencing some increases in violent crimes beginning in 2020.¹ Although there have been increases in select categories of youth violent crimes, rates remain significantly lower than historical peaks in the 1980s and 1990s, and the available data overall provides an incomplete picture.² Yet, many political leaders and policymakers across the country have used rising community fears to demand a return to “tough-on-crime” approaches to address public safety concerns.

During the peak “tough-on-crime” era of the 1990s, both political figures and the national media terrified the nation with stories of foreboding streets lurking with young “super-predators” ready to cause harm to families and communities.³ This inflammatory language propelled juvenile legal system policies that relied on incarceration and out-of-home placements and focused more on punishment than accountability, providing few options for young people to make amends, address their own trauma, and heal. The “tough-on-crime” rhetoric and the resulting policies widened racial disparities in youth incarceration keeping a disproportionate number of Black and Brown youth locked up.⁴

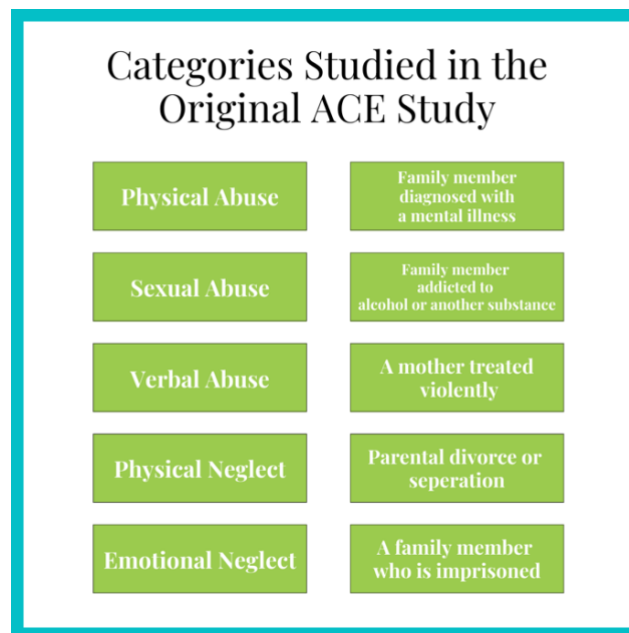
Today, many policymakers are falling into the same misinformation trap that existed in the 1990s, emphasizing “tough-on-crime” responses to a comparatively small increase in youth violence compared to prior decades. The reality is that juvenile violent crime decreased 56 percent between 2010 and 2020 and in 2020, had reached a new low, fully 78 percent below the 1994 peak. And

during the pandemic, according to The Sentencing Project, youth crime and violence was expected to stay flat or continue to decline, although there is no federal data yet available for 2021-2023.⁵ It must also be noted that making assumptions from crime statistics is complicated. Most federal data—gleaned from local and state reporting—is at least two years behind and sometimes incomplete.⁶ If policymakers are truly interested in helping further reduce youth crime and violence, they must learn lessons from the past two decades of research and practice about how we can best hold youth accountable, repair harm, and address trauma.⁷

For instance, most young people in the juvenile and criminal legal systems are also crime victims themselves, and most have suffered what are called, “Adverse Childhood Experiences,” or ACEs, such as physical or sexual abuse or having a parent who suffers from mental illness. Identifying and treating their traumas are key strategies for reducing youth crime, victimization, and preventing young people from continued involvement in the criminal legal system.

ACES Research

The original ACE study was conducted between 1995 and 1997 by researchers in a partnership between the federal Centers for Disease Control and Prevention (CDC) and the Department of Preventive Medicine at Kaiser Permanente San Diego. This first-of-its-kind, 17,000-participant study looked at the relationship between ten categories of adverse childhood experiences on health outcomes in adulthood. There were 10 factors studied.⁸



This list has since been expanded, after many more years of research.¹

¹ See Appendix I.

The CDC-Kaiser study found that a child's life experiences from one or more of the ACE categories correlated with later negative health outcomes, such as heart disease, cancer, chronic lung disease, skeletal fractures, or liver disease. Two-thirds of the study participants experienced at least one ACE category and one in eight individuals experienced four or more. The higher the ACE score, the higher the likelihood that a participant would develop a long-term health problem. In fact, an adult participant with childhood experiences that fell within four or more ACE categories was 12 times as likely to suffer from chronic disease than those who had suffered none.

A 2014 study of youth in Florida's juvenile legal system found that there was an even higher prevalence of ACEs among youth in their institutions. Of the 64,329 study participants, only 2.8 percent reported no childhood adversity compared with 34 percent from the original CDC-Kaiser study, and 50 percent of the Florida juvenile legal system-involved youth reported four or more ACEs, as compared with 13 percent in the original study.⁹ The Florida researchers concluded that higher ACEs scores correlate with an increased risk of serious, persistent, and chronic criminal offending in adolescence and throughout the lives of the youth.¹⁰

Other research has also confirmed that young people who experience multiple types of ACEs have an increased chance of entering the juvenile legal system.¹¹ For instance, one study found that 92 percent of youth in the juvenile legal system had at least one trauma, 84 percent had more than one, and 56 percent had *six* or more traumatic experiences.¹² Furthermore, when multiple traumas were suffered, the majority of the time these events occurred simultaneously, rather than a youth experiencing them one at a time.¹³

This cumulative effect of various and contemporaneous trauma is predictive of future juvenile detention, as well as chronic and violent behavior.¹⁴ In fact, for every additional ACE category a youth experiences, research has shown that the risk of violent behavior increases from 35 percent to 144 percent.¹⁵ In addition, secure confinement further adds to the trauma experience of a child and can hinder a young person's rehabilitation, contributing to the increased likelihood of recidivism and continued juvenile and criminal legal system involvement.¹⁶

Ongoing neurological research has found that prolonged experiences of trauma, adversity, and stress affect brain function in both children and adults. The impact of these experiences especially affects the parts of the brain where emotion, memory, and stress are managed.¹⁷ Trauma also causes immediate difficulty in regulating behavior, impulses, control, and fear responses, which further reduces the ability of a young person, who has not yet fully developed emotionally and psychologically, to think through the consequences of their actions.¹⁸ Moreover, about 70 percent of young people in the juvenile legal system meet the criteria for a mental health disorder and 30 percent of this subset meet the criteria for Post-Traumatic Stress Disorder (PTSD). Ongoing, untreated, or prior experience with a mental health disorder can further increase the likelihood of recidivism and criminal legal system involvement.¹⁹

Legally, younger brains are different than older brains

The landmark 2012 U.S. Supreme Court case, *Miller v. Alabama*, focused on whether juveniles younger than 17 should be handed mandatory life-without-parole sentences. Experts on the science of brain development and mental health testified about the trauma that justice-involved youth often face. They also made the argument that children are not adults biologically, and therefore, have “diminished culpability” for their crimes—and that they also have more capacity to rehabilitate and change the course of their lives, given proper interventions. In a 5-4 ruling, the Court agreed that a more individualized approach to sentencing was needed to better protect children and provide a possible path to rehabilitation.

Source: Equal Justice Initiative, “Miller v. Alabama,” <https://eji.org/cases/miller-v-alabama/>; and *Miller v. Alabama*, brief amici curiae of J. Lawrence Aber et al, January 17, 2012, via Equal Justice Initiative, <https://eji.org/files/miller-amicus-mental-health-experts.PDF>.

Building Better Responses to ACES

The prevalence of trauma histories in youth within the juvenile legal system has led to the development and implementation of evidence-based policies, practices, and cross systems-based approaches focused on identifying ACES and helping young people heal from their past adverse experiences called, “Trauma-Informed Care,” or TIC.²⁰ At its core, TIC begins by asking, “*What has happened to this child?*” rather than traditional responses to delinquency which focus on “*What is wrong with this child.*”²¹ This novel approach recognizes the prevalence of traumas, the impact of trauma on an individual, and promotes healing through safe and supportive treatments and practices, and attempts to avoid re-traumatization of youth within the juvenile legal system. TIC allows young people to gain healthy coping strategies to help them control unhealthy behaviors and impulses.

Jurisdictions that have implemented TIC’s have seen success. For instance, former Attorney General for the District of Columbia, Karl Racine, saw success with these types of policies. “Over the last eight years, we have diverted thousands of young people from the traditional ‘throw-the-

book’ and prosecute, and max-sentence approach. That could be counseling, mental health support, drug abuse services, or just good, old-fashioned mentoring. The young people who completed the intense services that were tailored to their needs—by a factor of 75 to 80 percent—were less likely to recidivate. The evidence is overwhelming: where health-based approaches to violence are utilized, particularly with kids, communities are safer.”

However, currently, there are no federal guidelines for assessing ACES or other trauma histories in juvenile and criminal legal system-involved young people. This means that states and localities implement their own assessments, which can vary widely, creating disparities in recognition of trauma histories, and therefore impacting resources and which evidence-based services are provided.²²

A more standardized approach is needed. Federal guidance that would seek to standardize ACES assessments within the juvenile and criminal legal systems could better help establish a uniform national approach to recognizing the impact of trauma on young people. This could lead to more consistent diagnoses and help ensure that young people receive the best evidence-based services to help them address and grow beyond their trauma.

In addition, for those young people who are determined not to receive community-based services and remain in secure facilities, it is imperative that appropriate evidence-based therapies and modalities are readily available. All programming within secure confinement should focus on youth safety and ensuring that young people feel safe, learn new ways to regulate behavioral and emotional responses, and identify and process their traumas. Trauma-informed and healing-centered approaches must not only be readily available with juvenile legal system facilities, but also integrated into all community-based programming and interventions.

Recommendations

- **Develop and issue standardized federal guidelines:** The U.S. Department of Justice’s Office of Juvenile Justice and Delinquency Prevention (OJJDP) in coordination with the Centers for Disease Control and Prevention, should publish federal guidelines for trauma screenings and assessments to ensure standardization across all juvenile legal system agencies nationwide to assure that appropriate care is provided.
- **Properly resource Trauma-Informed Care (TIC) and other trauma-focused responses.** Federal, state, and local governments should properly fund the implementation of TIC in all juvenile legal system agencies. Federal resources should be devoted to continuing research and evaluation efforts to further identify evidence-based age-appropriate interventions for juvenile and criminal legal system-involved youth exposed to trauma. In 2022, the Department of Justice’s Children Exposed to Violence Initiative secured \$8 million; \$7 million was allocated to further research ACE’s, and \$1 million was initial funding for a task force dedicated to supporting youth and families exposed to trauma.

- **Improve access to publicly available data.** The Office of Juvenile Justice and Delinquency Prevention should work to release juvenile crime statistics in a timelier manner. More readily accessible data can better help facilitate improvements to policy and treatments and aid agencies and nonprofits working with youth.
- **End juvenile transfer.** Given the effects of trauma on youth and adolescent brain development, policymakers should pass laws to end the transfer of all young people into the adult criminal legal system. Short of legislation, prosecutors should refrain from transferring youth into the adult criminal legal system, ensuring that they have access to appropriate age-based care.
- **Educate legal system staff.** All juvenile and criminal legal system agency personnel and community-based programming staff should be both educated about the impact of trauma on youth, and adequately trained on how to properly respond to trauma-related behaviors. At minimum, community-based programming staff and agency personnel must receive proper training and resources to ensure that they do not cause additional trauma to the youth in their care.
- **Support legal system staff.** Front-line staff members working with juvenile and criminal legal system-involved youth should have access to professional development focused on identifying, processing and healing from their own trauma histories and strategies to manage stress all of which have the potential to improve their performance on the job.
- **Public education on ACES and youth trauma.** Public education campaigns should be generated that are aimed at policymakers and juvenile legal system agency and community-based practitioners on the effects of trauma on legal system-involved youth, and the need to make TIC an integral part of all legal system responses and interventions to youth violence.
- **Focus on providing community-based services.** Work with communities to identify resources, choose providers, and structure continuing care.
- **Minimize residential secure placement but if needed, emphasize local facilities.** Residential secure placement should be minimized and located close to a youth's community. Facilities should be designed to provide youths with the type of environment, programming, and services necessary to optimize opportunities for positive development, and should be trauma-informed and focused on healing from past experiences.

Appendix I

ACEs Risk Factors

Individual and Family Risk Factors

- Families experiencing caregiving challenges related to children with special needs (for example, disabilities, mental health issues, chronic physical illnesses)
- Children and youth who don't feel close to their parents/caregivers and feel like they can't talk to them about their feelings
- Youth who start dating early or engaging in sexual activity early
- Children and youth with few or no friends or with friends who engage in aggressive or delinquent behavior
- Families with caregivers who have a limited understanding of children's needs or development
- Families with caregivers who were abused or neglected as children
- Families with young caregivers or single parents
- Families with low income
- Families with adults with low levels of education
- Families experiencing high levels of parenting stress or economic stress
- Families with caregivers who use spanking and other forms of corporal punishment for discipline
- Families with inconsistent discipline and/or low levels of parental monitoring and supervision
- Families that are isolated from and not connected to other people (extended family, friends, neighbors)
- Families with high conflict and negative communication styles
- Families with attitudes accepting of or justifying violence or aggression

Community Risk Factors

- Communities with high rates of violence and crime
- Communities with high rates of poverty and limited educational and economic opportunities
- Communities with high unemployment rates
- Communities with easy access to drugs and alcohol
- Communities where neighbors don't know or look out for each other and there is low community involvement among residents
- Communities with few community activities for young people
- Communities with unstable housing and where residents move frequently
- Communities where families frequently experience food insecurity
- Communities with high levels of social and environmental disorder

ACEs Protective Factors

Individual and Family Protective Factors

- Families who create safe, stable, and nurturing relationships, meaning, children have a consistent family life where they are safe, taken care of, and supported
- Children who have positive friendships and peer networks
- Children who do well in school
- Children who have caring adults outside the family who serve as mentors/role models
- Families where caregivers can meet basic needs of food, shelter, and health services for children
- Families where caregivers have college degrees or higher
- Families where caregivers have steady employment
- Families with strong social support networks and positive relationships with the people around them
- Families where caregivers engage in parental monitoring, supervision, and consistent enforcement of rules
- Families where caregivers/adults work through conflicts peacefully
- Families where caregivers help children work through problems
- Families that engage in fun, positive activities together
- Families that encourage the importance of school for children

Community Protective Factors

- Communities where families have access to economic and financial help
- Communities where families have access to medical care and mental health services
- Communities with access to safe, stable housing
- Communities where families have access to nurturing and safe childcare
- Communities where families have access to high-quality preschool
- Communities where families have access to safe, engaging after school programs and activities
- Communities where adults have work opportunities with family-friendly policies
- Communities with strong partnerships between the community and business, health care, government, and other sectors
- Communities where residents feel connected to each other and are involved in the community
- Communities where violence is not tolerated or accepted

- ¹ Department of Justice, Office of Juvenile Justice and Delinquency Prevention, "Juvenile Arrest Rate Trends," *Statistical Briefing Book*, July 8, 2022, https://www.ojjdp.gov/ojstatbb/crime/JAR_Display.asp?ID=qa05201; U.S. Department of Justice, Office of Juvenile Justice and Delinquency Prevention, "Trends in Youth Arrests for Violent Crimes," *Juvenile Justice Statistics: National Report Series Fact Sheet*, by Charles Puzzanchera, August 2022, <https://ojjdp.ojp.gov/publications/trends-in-youth-arrests.pdf>
- ² Jamiles Lartey, Weihua Li, and Liset Cruz, "Ahead of the Midterms, Most Americans Say Crime Is Up: What Does the Data Say?" *The Marshall Project: Closing Argument*, November 5, 2022, https://www.themarshallproject.org/2022/11/05/ahead-of-midterms-most-americans-say-crime-is-up-what-does-the-data-say?gclid=EAIaIQobChMIreXikM65_wIVC5bICh00nAJxEAAAYASAAEgIW6PD_BwE; Department of Justice, Office of Juvenile Justice and Delinquency Prevention, "Juvenile Arrest Rate Trends," *Statistical Briefing Book*, July 8, 2022, https://www.ojjdp.gov/ojstatbb/crime/JAR_Display.asp?ID=qa05201; Richard Rosenfeld, Bobby Boxerman, and Ernesto Lopez, *Pandemic, Social Unrest, and Crime in U.S. Cities: Year-end 2022 Update*, Council on Criminal Justice, January 2023, <https://counciloncj.org/wp-content/uploads/2023/01/CCJ%E2%80%93Crime-Trends-Year-End-2022-Word-for-PDF.pdf>; U.S. Department of Justice, Office of Juvenile Justice and Delinquency Prevention, "Trends in Youth Arrests for Violent Crimes," *Juvenile Justice Statistics: National Report Series Fact Sheet*, by Charles Puzzanchera, August 2022, <https://ojjdp.ojp.gov/publications/trends-in-youth-arrests.pdf>; Eliza Fawcett and Jacey Fortin, "Data From Cities Show Violent Crime Rates Fell Slightly Last Year," *New York Times*, January 26, 2023 <https://www.nytimes.com/2023/01/26/us/crime-data-2022.html>; and Rachel Treisman, "Many Midterm Races Focus on Rising Crime: Here's What the Data Does and Doesn't Show," *NPR Morning Edition*, October 28, 2022, <https://www.npr.org/2022/10/27/1131825858/us-crime-data-midterm-elections>.
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