Victimization and Juvenile Offending

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Introduction

The prevalence and impact of violence and other victimization experienced by our nation’s children has gained increasing attention in recent years. In 2012, the Attorney General’s Task Force on Children Exposed to Violence reported that about two out of three children in the United States have been exposed to some type of violence. Of the 76 million youth currently living in the United States, about 46 million have been affected by trauma in the form of violence, crime, and/or maltreatment.

In addition, many of these youth experience multiple forms of victimization, referred to as polyvictimization. For instance, the National Survey of Children’s Exposure to Violence found that as many as 1 in 10 children in the United States are exposed to multiple types of violence. As noted in a recent national report, “polyvictimized children are at increased risk for losing the fundamental capacities necessary for normal development, successful learning, and a productive adulthood.” Primary among these fundamental capacities is a sense of safety which repeated experiences of victimization can undermine.

Many studies have found that exposure to interpersonal violence is related to an increased likelihood of engaging in delinquent behavior. Youth who have been polyvictimized, for example, show increased risk of aggressive and destructive behavior as compared to their youth counterparts who have not been polyvictimized even while controlling for age, gender, ethnicity, and psychiatric morbidity. In addition, peer victimization is relatively common and represents a distinct threat to adolescent health and development. Approximately 12.4 % of US adolescents report violent victimization at the hands of peers, with peer victimization being linked to an increased likelihood of engaging in physical fights, carrying a weapon, and further delinquent behavior.

Despite the prevalence of violence exposure among children and adolescents, the majority of children in our country who are identified as having been exposed to violence never receive help in recovering from the psychological damage caused by this experience. This translates into many youth failing to receive support that can effectively help them regain a sense of safety, heal their social and emotional wounds, and reduce their risk of subsequent involvement in delinquency. Judges, teachers, counselors, juvenile justice personnel and other professionals should strive to understand the significant effect that victimization has on the behavior, attitudes, and functioning of children and adolescents, in order to work towards mitigating its effects.
Victimization Can Have Profound Effects on Development

Victimization can affect youth in multiple domains of functioning and can substantially alter how they see themselves and interact with the world. More specifically, victimization during childhood and adolescence can undermine the developmental processes related to learning, social-emotional health, and behavior toward others. When children are not nurtured in caring and safe environments, victimization can substantially decrease their sense of safety and increase feelings of helplessness. These shifts in perceptions of the world and themselves can interfere with developmentally important tasks and experiences.\(^6\)

As it relates to learning and cognitive development, victimization can promote patterns of thinking that distort perceptions of the world and heighten attention to perceived threats. With a significant focus on self-protection, youth with a history of victimization may have difficulty focusing in class, problem-solving challenges in a healthy manner, or viewing the world from another’s perspective. Compromises in these key skills have implications for how youth connect with others and modulate their feelings and reactions.

Garbarino and colleagues refer to children exposed to chronic community violence as living in “urban war zones,” with their social maps so altered that they believe they are not safe and no one can protect them.\(^6\) A general preoccupation with safety concerns, coupled with victimization, can take a significant toll on children’s emotional and mental health. Mental health challenges, such as depression and post-traumatic stress disorder (PTSD), are closely associated with victimization. Research has demonstrated a dose-response relationship between experiencing multiple types of victimization (e.g., family violence, community violence, sexual victimization) and increasing PTSD symptoms.\(^7\) Indeed, the more types of trauma children and adolescents are exposed to, the more severe the psychiatric consequences.\(^3\)

The cognitive and social-emotional patterns that victimization inspires can influence decisions about self-protective behaviors. For instance, youth may seek initiation into gangs because they view these deviant social groups as protective, or they may believe involvement with guns provides protection.\(^6\) Involvement in high risk behaviors for the purpose of self-protection among trauma-exposed adolescents can lead to more long-lasting adverse consequences such as school failure, health problems, and employment challenges that initiate a cycle of delinquency and offending.

**Relationship of Victimization to Juvenile Offending**

While not all victimized youth become involved in serious delinquency, the relationship between early victimization and juvenile offending is one of the most consistent and robust associations in research literature.\(^4\) More specifically, victimization has been linked to committing acts of community violence, sexual assault, and a variety of other delinquent behaviors.\(^8,9,10,11\) Studies estimate that over 90% of juvenile justice-involved youth have experienced at least one trauma, with many experiencing polyvictimization and reporting an average of 5 different types of trauma or violence exposure in their lifetime.\(^12,13,14,15\) It is important to note that these studies do not include the frequency of each type of trauma—meaning that youth may have experienced each trauma type multiple times or just once.
Prospective studies focusing on the cycle of violence demonstrate a link between abuse and neglect in early childhood and later arrest as a juvenile and adult—even when controlling for race, gender, and economic status. Further, the age at which children experience maltreatment is related to later delinquency. For instance, maltreatment experienced in adolescence was found to have detrimental outcomes for offending above and beyond childhood-only maltreatment and be more closely tied to delinquent behavior that leads to incarceration than childhood-only maltreatment.

Why are Victimization and Juvenile Offending Related?

The association between victimization and offending is clear: as victimization increases so does risk for juvenile offending. To better understand this relationship, multiple theories regarding the underlying mechanisms that link trauma and delinquency have been explored. In general, these theories build on our understanding of the biopsychosocial impacts of victimization in early life.

- Some researchers suggest that the relation between victimization and delinquency can be understood by general strain theory. Cumulative stressors across multiple contexts can produce deficits in social and personal resources that would normally help to moderate the negative effects of victimization. As an adolescent tries to cope with negative events, he or she may experience an increase in negative emotional states and a decrease in positive coping strategies, which may then lead to an increase in delinquent behavior. Adolescents engage in high risk behaviors, therefore, to cope with increased negative emotional states resulting from being victimized.

- Some researchers discuss the concept of tension reduction behavior—the tendency to turn to external methods such as self-harm, aggression, sexual acting out, suicide threats—in order to distract, soothe, or reduce inner tension or distress. Substance abuse is a common sequela of exposure to trauma that may comprise a maladaptive attempt to cope but which in turn increases the risk of engagement in risky behaviors and in juvenile arrest.

- Youth with a history of victimization may acquire a callous veneer. The concept of acquired callousness suggests that youth who are exposed to trauma might intentionally cultivate emotional detachment as a method of coping with overwhelming distress. Emotional detachment may contribute to the withdrawal of empathy or remorse and cultivation of callousness toward others—an affect regulation strategy contributing to antisocial or offending behaviors. In less intentional ways, emotional numbing related to PTSD may contribute to the cultivation of callousness toward others. In fact, studies have linked posttraumatic emotional numbing of fear and sadness to youth aggression.
• It has also been proposed that youth who have been victimized chronically may develop a facade of defiance and toughness as a form of survival coping. The experience of victimization brings about a sense of distrust in relationships, and a disregard for consequences may develop as youth find themselves continually working to protect themselves. Importantly, youth who are victimized rarely see their victimizers brought to justice, which can instill a distrust in the justice system and low motivation to follow the law.

• There is clear evidence that the manifestations of posttraumatic stress symptoms are related to offending. Increased levels of posttraumatic stress symptoms have been found to be associated with a higher number of arrests and increased delinquency severity within the past year. Increased arousal is also common among victimized youth, which can increase irritability and impulsivity and interfere with decision making processes. In addition, posttraumatic stress and/or trauma exposure can instill in youth feelings that there is no future in store for them, which increases their involvement in reckless and dangerous activities. Negative self-appraisals—shame and self-blame—are often seen among youth who have been victimized. The experience of trauma and subsequent PTSD symptoms may lead to self-estrangement and powerlessness—making youth more liable to distance themselves from others, dismiss pro-social values, and engage in negative behaviors.

• Trauma exposure can leave a youth with interpersonal processing deficits. Youth are more likely to misread social cues, misperceive others’ intention as hostile, and employ aggressive strategies to address interpersonal challenges.

Addressing the Cycle of Victimization and Subsequent Offending

Below are individual and system-based strategies for creating sustainable support for victimized youth at risk of offending. Perhaps the most important theme in recommendations for breaking the link between victimization and delinquent behavior is restoring or establishing a sense of psychological safety—the sense of having sufficient internal and external resources to address challenges in one’s environment. The primary goal of disrupting the cycle of victimization and offending is to help youth restore a sense of psychological safety using healthy coping strategies. Achieving this goal generally requires both systemic and individual interventions that address past victimization and prepare youth to manage stressors in their environment.

Integrate Practical Support

As noted above, victimization can interrupt important developmental processes. The following practices provided by adults interacting directly with youth (e.g., direct care staff, teachers, parents) can promote recovery and buffer youth from further victimization that leads to delinquent behavior:

• **Create and adhere to predictable routines.** Victimization can lead to feelings of excessive vulnerability. Healthy routines help youth feel safer through an increased ability to plan for what is next.

• **Provide youth choices when possible.** When youth have been victims, feelings of helplessness may overwhelm them. Helping youth improve their decision-making ability by providing two reasonable options for activities, meals, and so forth, can empower youth to feel more in control and let them practice decision-making skills.
- **Follow through on plans.** Victimization make youth keenly aware of unfairness and often undermines their sense of trust. Being clear and consistent about what will be done for a youth and following through on it help rebuild their trust in others.

- **Be aware of reactions to reminders.** Youth who have experienced victimization can become overwhelmed by situations that remind them of being victimized. Each youth’s reminders are particular to them, and they may be unaware of some of them. Being aware of reminders, observant of situations that are distressing for youth, and creating environments that limit reminders help youth better master managing reactions to reminders and lays the foundation for them to choose healthy coping strategies that can limit delinquent behavior.

In addition to the above individual-focused strategies for addressing victimization and preventing delinquent behavior, the following system-based approaches for integrating interventions are recommended to support youth who have experienced victimization.

**Intervene Early and Provide Trauma-Focused Interventions**

Youth who have been victims are at high risk for future offending and further victimization. These risks increase soon after the initial victimization, so therapeutic intervention should occur as soon as possible following disclosure of a victimization experience. Youth who are both victimized and delinquent have more adversities, lower levels of social support and higher rates of mental health symptoms. Improving strategies for identifying and helping this group therefore should be a priority to reduce further victimization and offending.

Trauma-informed clinicians should receive training in identifying cognitive patterns indicative of offending behaviors. Modifying these patterns of thinking, along with cultivating empathy and perspective-taking, should be goals of treatment for these traumatized children and youth. Those treating victimized youth showing risk or involvement in delinquency should choose evidence-based treatments shown to reduce co-occurring offending and trauma. Trauma-informed treatment planning for youth exposed to trauma should include building family cohesion and the key protective factor of effective family supervision of the youth.

**Improve Trauma-Informed Screening and Assessment in Service Systems**

Child welfare, juvenile justice, and mental health systems nationwide should employ trauma-informed mental health screening. Positive screenings should result in referral to indicated resources or services (e.g., psychological evaluation/assessment, trauma treatment). Trauma-informed assessments should include screening for signs of, and risks for, potential delinquent behaviors (e.g., school failure, association with delinquent peers). In addition, the effects of witnessing interpersonal violence (e.g., stabbings, sexual assault) should not be underestimated and trauma-informed mental health screenings should assess for such experiences. Justice settings can be traumatizing for youth, both through events they directly experience and through those they witness. Providers working with young people released from detention or placements should screen for new traumatic experiences. Additionally, the young people may be less guarded when answering questions once they are released.

**Improve Reporting of Youth Victimization**

The majority of victimizations of youth, even the most violent, are not reported to police or other authorities. Contributing factors for not reporting may include youth concerns about personal
autonomy, fears of being blamed or not taken seriously, fears of being labeled a “snitch,” fears of retaliation, fears of being punished for engaging in risk-taking behavior or associating with deviant peers, family concerns about involving their child in the justice system, family concerns about their child’s safety, and the perception of both youth and adults that offenses against youth are not real crimes. The justice system can increase reporting of these crimes by providing supports to protect youth from future victimization, protecting witnesses’ identities, ensuring ongoing monitoring and safety measures as cases proceed to trial, addressing threats to witnesses with legal sanctions when they occur, and building better relationships between police and the community.

Help Schools Recognize Reactions to Victimization
Children and youth who have been victimized are at risk for reactive aggression and repeated suspensions and expulsion, which in turn increases likelihood of offending. School districts should develop and maintain school policies that support retaining students in school rather than expelling them or pushing them into the juvenile justice system via involvement of law enforcement in school discipline situations. Restorative justice practices for youth who display maladaptive behavior due to trauma should provide opportunities for youth to learn new skills to manage frustrating situations. Individualized assessments of students’ recurring educational, emotional, and/or behavioral problems should consider the impact of trauma and aim to be trauma-informed.

Engage Families
Family treatment or efforts to repair family cohesion should be incorporated into therapy aimed at youth who witness community violence and experience other forms of victimization. Studies suggest that family cohesion can moderate the effect of witnessing community violence on future delinquent behavior.29 In addition, family functioning and cohesiveness can serve as a protective factor against perpetrating violence following trauma exposure. For instance, youth who witnessed violence and reported low levels of family cohesion were twice as likely to report later delinquency as youth who reported that their homes were more cohesive.30

Summary
No single risk factor or experience leads a young person to delinquency, but the chances of offending clearly increase when a youth is a witness or victim of violence. Protecting juveniles against victimization of all types needs to be a priority for community leaders, policy makers, and professionals. Along with preventing future problems like substance abuse, suicide, and mental health problems, reducing rates of victimization and responding early to young victims to offset the adverse consequences of victimization may lessen the severity of juvenile violence and crime in society.
References


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