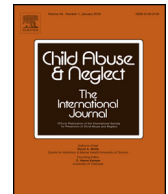




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Research article

Trauma changes everything: Examining the relationship between adverse childhood experiences and serious, violent and chronic juvenile offenders[☆]

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ABSTRACT

Among juvenile offenders, those who commit the greatest number and the most violent offenses are referred to as serious, violent, and chronic (SVC) offenders. However, current practices typically identify SVC offenders only after they have committed their prolific and costly offenses. While several studies have examined risk factors of SVCs, no screening tool has been developed to identify children at risk of SVC offending. This study aims to examine how effective the adverse childhood experiences index, a childhood trauma-based screening tool developed in the medical field, is at identifying children at higher risk of SVC offending. Data on the history of childhood trauma, abuse, neglect, criminal behavior, and other criminological risk factors for offending among 22,575 delinquent youth referred to the Florida Department of Juvenile Justice are analyzed, with results suggesting that each additional adverse experience a child experiences increases the risk of becoming a serious, violent, and chronic juvenile offender by 35, when controlling for other risk factors for criminal behavior. These findings suggest that the ACE score could be used by practitioners as a first-line screening tool to identify children at risk of SVC offending before significant downstream wreckage occurs.

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Introduction

Approximately 1 in 8 reported violent crimes in the United States are committed by a juvenile offender (FBI, 2012). However, less than 10% of all juvenile offenders commit over 50% of all serious and violent juvenile offenses (Piquero, 2011). This segment of the youth offending population, known as the serious, violent, and chronic (SVC) offenders, inflict considerable harm and economic costs on society due to the volume and type of crimes that they commit (DeLisi & Piquero, 2011; Loeber & Farrington, 1998).

Although past research suggests that there are several developmental, social, and psychological risk factors for SVC offending (see Fox, Jennings, & Piquero, 2014), the general approach to identifying SVC offenders has typically been reactive

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in nature. Specifically, SVCs are currently identified only after they have accrued multiple felonies and violent offenses, and the resultant harm has already occurred (Loeber & Farrington, 2000). Consequently, both academics (e.g., Loeber & Ahonen, 2014; Loeber & Farrington, 2012; Thornberry, Huizinga, & Loeber, 1995; Zahn, 2009) and practitioners (e.g., Baglivio, Jackowski, Greenwald, & Howell, 2014) have called for a more efficient and effective method for identifying youth at risk for becoming serious, violent, and chronic offenders.

Therefore, the purpose of this research is to determine if a tool developed in the medical field, called the adverse childhood experiences (ACE) score, could be used to evaluate youth at risk of future SVC offending before their criminal behavior begins. The ACE has been found to relate to serious negative health outcomes in adulthood, such as ischemic heart disease, high blood pressure, chronic lung disease, skeletal fractures, liver disease, cancer, and even early death, for those with higher levels of neglect, adversity, or trauma in childhood (Flaherty et al., 2013). Similarly, criminologists and psychologists have found that individuals who commit serious violent crimes tend to have high rates of trauma, abuse, and other harmful experiences in childhood, even when controlling for other environmental and biological factors (Farrington, 2005; Fox et al., 2014; Laub & Sampson, 1994; Moffitt, 1993; Nagin & Tremblay, 1999). As a result, there is reason to believe that the ACE may also be used to identify individuals at high risk of becoming serious, violent, and chronic offenders.

Serious, Violent, and Chronic Juvenile Offenders

In 1995, the U.S. Department of Justice's Office of Juvenile Justice and Delinquency Prevention (OJJDP) commissioned a study group on serious and violent juvenile offenders in order to learn more about the etiology of these offenders, and how best to prevent juveniles from committing serious and violent criminal acts (see Farrington, Loeber, & Ttofi, 2012; Loeber & Farrington, 2000). Through the study group's investigation, as well as the OJJDP-funded longitudinal youth studies conducted in Denver, Pittsburgh, and Rochester, there has been a substantial increase in the literature on the causes, correlates, and prevention strategies for serious, chronic, and violent juvenile behavior.

One of the most significant and recurring findings in the literature is that SVCs are disproportionately victims of trauma, abuse, neglect, and maltreatment during childhood, as compared to the less severe or non-offending juvenile population (Dierkhising et al., 2013; Fox et al., 2014; Loeber & Farrington, 2000). Specifically, new research shows that 90% of juvenile offenders in the United States experience some sort of traumatic event in childhood (Dierkhising et al., 2013), and up to 30% of justice-involved American youth actually meet the criteria for post-traumatic stress disorder due to trauma experienced during childhood (Dierkhising et al., 2013).

Additional studies have shown that individuals who were abused or neglected during childhood are far more likely to commit a violent act than those who did not experience abuse and neglect (Dodge, Bates, & Pettit, 1990; Maxfield & Widom, 1996; Widom, 1989). In the Rochester Youth Development Study, maltreated children were significantly more likely to commit violence between ages 14 and 18, even after controlling for gender, ethnicity, socioeconomic status, and family structure (Smith & Thornberry, 1995). Maxfield and Widom's (1996) seminal study on child abuse also found that experiencing trauma and abuse during childhood increased the odds of juvenile violent behavior by more than 200%.

This connection between childhood maltreatment and antisocial behavior is addressed in the developmental pathology perspective. This perspective examines the roots and nature of deviance in maltreated children. Theorists studying this paradigm have found that abused and neglected children have a higher likelihood of detrimental development outcomes, including psychopathology (Cicchetti & Toth, 1995; Toth & Cicchetti, 2013). The trauma may affect the biological and psychological development of the child by causing some type of neural impairment disrupting the regulatory processes central to maintaining their normal wellbeing (Cicchetti & Rogosch, 2012). For instance, research suggests that adverse childhood experiences may cause chromosome damage (Shalev et al., 2013) and functional changes to the developing brain (Anda, Butchart, Felitti, & Brown, 2010; Cicchetti, 2013; Danese & McEwen, 2012; Teicher et al., 2003). Stressful events, such as those included in the ACE score, may also lead to a heightened neural state triggering the brain to excrete adrenal steroids, growth hormones, amino acids, and other stress mediating chemicals known as the allostatic response (Garland, Boettiger, & Howard, 2011). While these stress-managing chemicals may be beneficial when produced in short, confined bursts, a prolonged chemical response resulting from chronic stress such as ongoing childhood abuse, called an allostatic load, may result in permanent chemical elevations and other destructive physiological and behavioral responses (Cicchetti & Toth, 2005).

As a result of these neurological and psychological changes, the maltreated child is prone to violence in a number of ways. The physiological changes resulting from the allostatic load may lead to extreme, and potentially violent, reactions to even trivial stimuli. The higher inclination toward violence could also be the result of problems with affect regulation in the abused or neglected children. Specifically, According to Toth, Harris, Goodman, and Cicchetti (2011), maltreated children experience difficulties recognizing, expressing, and understanding their emotions. These children exhibit more aggressive and reactive behavior and are more predisposed to detect angry emotional expressions. A study by Howes, Cicchetti, Toth, and Rogosch (2000) also indicated that abusive families also have more difficulty regulating anger in their children. These effects can produce dramatic changes on the emotional development of the child and may be connected to higher levels of externalizing violent behavior.

Exposure to parental incarceration has also been linked to delinquency and other maladaptive behaviors (Geller, Garfinkel, Cooper, & Mincy, 2009; Murray & Farrington, 2008). Among the 411 males in the Cambridge Study of Delinquent Development, Murray and Farrington (2005) found that parental imprisonment predicted antisocial and delinquent outcomes up to

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