### SECTION I

# FRAMING THE ISSUES

#### **CHAPTER**



## A Developmental View of Youth in the Juvenile Justice System

MARTY BEYER

arco is a serious 14-year-old whose parents, born in Mexico, have been stably employed for many years. Although his family is close, Marco has faced numerous family problems, including the death of his grandmother who took care of him, and his parents' preoccupation with the problems of his older siblings, leading to his feeling sad and unloved. Because his parents worked so hard, it felt ungrateful for him to disparage them.

Marco's parents had high aspirations for their children. When his older siblings dropped out of school and had children as teenagers, the pressure was on Marco to be the one to graduate high school. Marco did well in school and particularly loved science. But he found his teachers were overly critical of him—in his view, because they knew his siblings, who had been problem students in the same school, and because some had racist attitudes. When his grades started dropping in eighth grade, the school did not initiate any special supports. He started spending time with dropouts, was suspended, and then arrested for a fight in school; he was diverted from the juvenile justice system but received no services. His parents' disapproval and his own feeling that he was a school failure were difficult for Marco to bear.

For several years, Marco had been increasingly terrorized by gang violence in his neighborhood. He witnessed the murder of a friend and worried every time he walked down the street. Marco had been seriously threatened three times in the 2 weeks before

this arrest. "I tried never to walk alone. If I did, I'd run to a safe spot where there were people. You didn't have to look like a gangbanger. If you ignored them, they would jump you. If you ran, they would chase you. This is not the movies. In life, violence is real. A lot of people have died in my neighborhood. Death is always there."

Marco did not talk to his family members or friends about his sadness or fears. He did not realize how intense the pressure was and how having to contend with it alone undermined good decision making. Marco is emotionally needy, like a younger teenager, but he does not admit his desire for comfort and protection. He started spending most of his time with his brother and his friends, all several years older and in a gang. As he got more scared, Marco reluctantly went along with pressure from them to join their gang. Marco did not realize the risks of gang protection: "I now know that when I joined a gang it was not a smart choice, but I thought I had to have protection." Working long hours with many family responsibilities, his parents assumed Marco was safe with his brother, and did not know that he had joined a gang, used marijuana, and was becoming alienated from school.

The day before ninth grade began, a gang leader gave Marco, his brother, and a friend a ride home. Unbeknownst to Marco, they were on their way to a drive-by shooting. "At first, I thought it wasn't really going to happen. I realized it too late, but I could have gotten out of the car. But I was

threatened. He pushed everyone around. These things went on every day in the neighborhood, shootings and beatings to get revenge. He was mad about something done to him and he made us take revenge. It made no sense. But it seemed the only way out was to do what he ordered." Marco talked about how sad he felt for the victim and expressed sympathy for the family. Marco did not object to being blamed and took responsibility for having bad judgment and not getting out of the car. He knows it was wrong, and if he had seen any choice, he said he would have left, but felt trapped even though he never intended to hurt anyone.

How should the juvenile justice system deal with Marco? What criteria should it use to assess his culpability and impose an appropriate disposition? How does the system currently act in cases such as his?

Juvenile justice systems make most decisions about youth based on age and offense. Yet age tells us little about what is behind an offense—for example, what precipitated it and what its meaning is for that individual—since each youth's developmental progression is unique, often indexed in only limited ways to chronological age. The delinquent act itself also tells us little about the youth, since the contexts in which many offenses are committed are so complex. The intricate weave of factors, individual and contextual, that contributed to Marco's involvement in a drive-by shooting illustrates how much more than age and offense must be considered in designing an effective rehabilitative service combination for him.

However, employing a developmental framework allows for more hopeful and effective responses from the system and the community agencies that should be poised to help. In this chapter, I propose a developmental framework for making decisions regarding court proceedings, detention, and services, based on my training as a psychologist and my years of experience working with youth in

juvenile programs and evaluating them for court. Its foundation, and the organizing premise of the chapter, is that the delinquent behavior of adolescents must be understood as resulting from their immature thinking and the effects of trauma and learning disabilities, which are ubiquitous among these youth. These core components are first introduced briefly below, and then I elaborate on each. I also argue for including youth's strengths, and assessing their capacity for resilience within the context of their families, peers, schools, neighborhoods, and cultural communities at all points of the decision-making process. The chapter concludes with a demonstration of the richness of a developmental framework in vignettes of four system-involved youth, ages 13-16, with a range of offenses; Marco's story is also included in the analyses.

#### **CORE CONCEPTS**

To the extent that juvenile justice decisions are based on developmental concepts, these appear to be the outmoded, rigidly linear stage-based, and noncontextual theories of many years ago (Lerner & Steinberg, 2004). This view of development does not consider strengths, the effects of traumatic experiences, and environmental influences on youth. As a result, both in understanding the young person's behavior and in designing services to change it, system decisions have not been developmentally sound, in the complex ways that we now understand development.

For example, even though there is considerable research on the effects of *trauma* on children (Osofsky, 2004), it has not penetrated the system, perhaps because addressing the effects of trauma on delinquent behavior is not compatible with the simplistic view that offending is a bad choice. Probation and

juvenile facilities assume that youth control their behavior to avoid consequences and get rewards. What this fails to take into account is that some behavior is reactive to past victimization, and that traumatized youth may be unable to use rational decision making when the memories and anxiety from traumatic events are triggered.

The challenges of learning disabilities have been well researched across academic and applied fields. Unfortunately, the application of research on learning disabilities, including processing problems, executive function difficulties, and attention deficits, appears to have been confined to use in schools, not in the many other realms of children's lives. The school-in either the juvenile facility or the community—is expected to manage disabilities as they pertain to education, rather than helping everyone involved with the young person understand that they affect the youth's behavior generally, and use this understanding outside the educational setting. In juvenile justice, disabilities are seldom used as a lens to understand the offense or facilitate behavior change. Instead, it is assumed that youth comprehend what to do and are simply being oppositional and making bad decisions.

The notion that *maturity* should be assessed as a distinct developmental process, apart from chronological age, has a fairly long theoretical history in developmental psychology, but has only recently gained traction in juvenile justice policy and practice (American Medical Association, 2005). Research has demonstrated that adolescents are different from adults (Owen-Kostelnik, Reppucci, & Meyer, 2006; Steinberg & Haskins, 2008), but justice systems treat teenagers as adults in many ways (Bishop, 2000; McGowan et al., 2007). For example, even intelligent teenagers cannot appreciate the consequences of waiving their *Miranda* rights. Most teenagers say that

although they were told they had a right to remain silent, they believed they could not refuse to answer police questions. Typically, when they are asked what would happen if the judge heard afterward that they would not talk to the police, they respond that the judge would believe they were guilty. These beliefs demonstrate that they do not comprehend the meaning of the *right* to remain silent and their decision making is influenced by emotions (Grisso et al., 2003).

Teenagers are also more vulnerable to psychological manipulation than are adults. In the police station without a lawyer, young people may well give statements in response to questions that reduce their self-confidence and make them feel hopeless (Ofshe & Leo, 1997; Warden & Drizin, 2009). While research has found that adolescents 16 and older have similar competence-related abilities to adults regarding understanding facts about court proceedings (see Scott & Grisso, 1997, for a review), these findings have been widely misinterpreted to mean that youth over 16 should be considered adults. In fact, even 16- or 17-year-olds with normal intelligence are often incapable of weighing alternatives, seeing the risks of taking a plea or going to trial, and looking into the future in discussions with their lawyers; youth with learning disabilities are even further compromised.

Developmentally sound juvenile justice decisions must be based on more than research on cognitive and psychosocial growth in adolescence. The developmental framework proposed here is comprehensive—including immaturity as well as a clinical perspective on trauma and learning disabilities and using an ecological approach regarding the contexts in which the teenager is gradually maturing.

Let's consider the several components of immaturity first.

## THE EFFECTS OF IMMATURITY ON TEEN BEHAVIOR

Adolescent development is not a smooth, uniform, linear progression—there are differences in maturity among youth of the same age and across domains within individuals. I have sketched out in this section a number of ways that immaturity affects behavior in these years.

#### Immature Thinking

In real life situations, particularly when influenced by peers and/or under the influence of substances, young people often have immature thought processes, including *not anticipating, minimizing danger, reacting to stress*, and *seeing only one option*.

- Not anticipating. Adolescents often do not plan or do not follow their plans and get caught up in unanticipated events. They usually view as "accidental" the unintended poor consequences of actions that adults could have predicted. For example, a young person could go with a group to an event and, on the way, a friend could have a conflict with a young person outside the group; a fight might break out, and several youth might be arrested for an assault they never imagined would have happened. Carrying, and even using, a weapon does not mean that a teen intended harm or thought that he or she would use the weapon. Often, teens feel driven to self-protection and never picture an injured victim.
- Minimizing danger. Risk taking is typical of adolescents who seldom can consider the worst possible outcomes of their actions (Furby & Beyth-

- Marom, 1992; Steinberg, 2008). Youth do not perceive or weigh risks accurately, and indeed, it has been asserted that "it is statistically aberrant to refrain from such [risk-taking] behavior during adolescence" (Spear, 2000, p. 421). In comparison to adults, teenagers attach different value to the rewards that risk taking provides (Fareri, Martin, & Delgado, 2008; Scott & Steinberg, 2008). Difficulty in managing impulses is a normal characteristic of teens, partly because they have more rapid and extreme mood swings than do adults (Scott & Steinberg, 2008). Impulsively defending a friend who is teased or pushed can quickly escalate into a situation a youth will regret but did not view as risky. Similarly, youth get in trouble with parents, school, and/ or the juvenile justice system for texting they think is benign, and do not realize can be interpreted as threatening. Drugs and alcohol, also often not seen as risky, lower inhibitions and reduce teens' abilities to use mature judgment; being high frequently contributes to delinquent acts.
- Reacting to stress. Stress affects the ability to weigh risks and to override impulses with rational thought, and adolescents are more susceptible to stress and emotional fluctuations than are adults (Hampel & Petermann, 2006; Larson, Moneta, Richards, & Wilson, 2002; Seiffge-Krenke, 1995; Spear, 2000; Wills, Sandy, & Yaeger, 2001). Decision making can be even more immature when a teen is scared, particularly if he or she has been mistreated in the past. A common form of immature cognitive processes

in adolescents is reacting to threat that adults might consider exaggerated. For example, a young person with no prior arrests or problems in school who jumps a subway gate without paying could get into a physical confrontation that leads to the serious charge of assaulting a police officer. Afterwards, his parents may find it difficult to understand how he could have felt so threatened.

Seeing only one option. Adolescents only gradually develop the advanced cognitive ability to weigh alternatives simultaneously (Wigfield, Byrnes, & Eccles, 2006). In situations where adults see several choices, adolescents may believe they have only one. It is not unusual even for intelligent adolescents to imagine only a single scenario. When things do not unfold as they imagined, because of their immaturity, they behave as if they are incapable of adapting with another reasonable choice. For example, a teenage girl who thinks she is going shopping with a friend may be surprised when her friend encourages her to shoplift but may feel unable to leave, go home, or shop on her own.

#### Immature Identity

Identity development is among the central tasks of adolescence (Erikson, 1959; Kroger, 2003). Becoming good at something, for example, doing well in school, arts, sports, or religious or cultural practices, is a cornerstone in the development of a positive identity, and helps it to solidify. Many system-involved youth have not experienced success, particularly in school; often, they feel marginalized.

Having an unformed identity makes them more vulnerable to involvement with delinquent peers.

For most teenagers, belonging to a family provides the basic architecture for identity development. Family provides cultural, religious, and other values that are important to the teenager's self-definition: sometimes the youth's values remain consistent with his or her family, and sometimes he or she separates from the family's values. Identifying with peers is another important aspect of self-definition; group membership is necessary for a young person to feel valued. The process of developing a stable identity takes time, during which young people need approval from family and peers.

An ecological approach to understanding teenagers in the context of all their relationships—particularly family and peers—recognizes that development is influenced in complex ways by these interconnected contexts (Garcia Coll, Akerman, & Cicchetti, 2000; Lerner, 2002; Spencer et al., 2006). Conflicting identifications, between two groups of peers or between family and peer expectations, may cause unpredictable behavior in a teenager, especially under stress.

Even protective families find it challenging to ensure positive friendships for their teens, and a teen may have positive peers and still get exposed, often in unplanned situations, to peer coercion and/or pressure from the desire for peer acceptance. Some families think teens cannot be supervised, and others, whose authoritarian tendencies increase out of a desire to protect, instead overlimit the teen's autonomy, both with potentially disastrous consequences (Dodge et al., 2006; Putnick et al., 2008). It is difficult for adults to help youth develop self-confidence to resist peer pressure when the need to belong is so strong. Families can be unaware when a teen, who seems the same at home, becomes more influenced by peers and negative school and neighborhood environments. Furthermore, in some neighborhoods, resisting the pressure to commit crimes or to seek protection from a gang itself puts the young person in danger (Fagan, 2000).

- Racial and ethnic identity. As their social networks expand, youth see themselves in multiple roles requiring different self-presentations. Racial stereotypes and cultural dissonance make the process of achieving a stable identity more difficult for youth of color (Cross & Fhagen-Smith, 2001; Luthar, 2003). Youth are vulnerable to racial and ethnic marginalization. Violence poses a complex series of threats to resilience for Black males, including aggression as an adaptive response to deal with victimization, which may lead to arrest and reinforces negative stereotypes (Graham Lowry, 2004; Spencer et al., 2006).
- Girl identity. Experts disagree about how much the increase in arrests of girls represents a change in behavior as opposed to a change in society's responses to girls (Zahn, 2009). Developmental research has identified stressors on girls that make them more vulnerable, especially during physical maturation and school transitions. For example, many 11- and 12-year-old girls become less outspoken and more preoccupied with perfection and fear being disliked; and this may contribute to an enduring sense of unworthiness affecting their involvement in delinquent acts (Beyer, Blair, Katz, Simkins, & Steinberg, 2003; Brown & Gilligan,

1992; Chamberlain & Moore, 2002; Hennessey Ford, Mahoney, Ko, & Siegfried, 2004; Wood, Foy, Goguen, Pynoos, & James, 2002a).

A connection to others is the central organizing feature of development in girls, and their relationship focus and the struggle to be loyal, including worries about abandonment and disconnection, dominate girls' thinking. Girls in juvenile justice include first-time offenders who were coerced by their older boyfriends. Many teenage girls report violence in their dating relationships. Though some confide in a friend, almost none talk to adults in their family or at school about being victimized in this way and the difficulty of extricating themselves. Traumatic experiences predict delinquency and risky sexual behavior, and most girls who have experienced significant trauma need, but do not receive, trauma treatment—including many do not have PTSD diagnoses (Smith, Leve, & Chamberlain, 2006; see also Sherman & Greenstone, Chapter 7, this volume).

Harassment for gender-nonconforming appearance or behavior, a nonheter-osexual orientation or nontraditional gender identity can lead to a serious loss of self-esteem (Galliher, Rostosky, & Hughes, 2004). Homophobic discrimination at school and in the community is common and hurtful to teenagers and can lead to youth missing school or activities because they feel unsafe (Majd, Marksamer, & Reyes, 2009). Youth who experience

antigay victimization in middle or high school are more than twice as likely to be depressed and have substance abuse problems and three times as likely to report suicide attempts than lesbian, gay, or bisexual peers who have not been harassed (Wilber, Ryan, & Marksamer, 2006; see also Garnette, Irvine, Reyes, & Wilber, Chapter 8, this volume). Youth whose parents reject their sexual orientation and gender expression are more likely to be depressed and suicidal; they may end up living on the street, which may, in turn, bring them into the juvenile justice system (Ryan, Huebner, Diaz, & Sanchez, 2009).

#### Immature Moral Reasoning

Much has been written about moral development during adolescence, stressing youth's increasing responsibilities in relationships and awareness of how others will judge one's actions (Eisenberg, Morris, McDaniel, & Spinrad, 2009). The practical application of adolescent moral development research to real-life reasoning under stress is complicated. Committing a delinquent act can be misconstrued as an indication that the young person did not know right from wrong and/or lacked concern for others. But youth may express strong family and religious values and are frustrated that they cannot explain why they used poor moral reasoning during the offense. Adolescents are generally moralistic, insisting on what should be and intolerant of unfairness (Smetana & Turiel, 2003). They may become involved in an offense naively in order to right wrongs, often out of loyalty. As a result, they may not express an adult understanding of the

effect of their offense on victims, despite the fact that their capacity for empathy with others may not be impaired.

Next let's turn to considering the role of trauma in the lives of these youth.

## THE EFFECTS OF TRAUMA ON TEEN BEHAVIOR

The incidence of posttraumatic stress disorder (PTSD) among youth in the juvenile justice system is up to 8 times higher than youth in the community in general (Abram et al., 2004; Kerig, Ward, Vanderzee, & Moeddel, 2009). Among nonincarcerated youth seen in juvenile court clinics, one in nine met criteria for PTSD (Brosky & Lally, 2004). In a study of 50 delinquents, all but two had experienced trauma, including repeated abuse and/or parent death and/or abandonment; at least a third were physically abused and a quarter were sexually abused; more than half the girls had been physically or sexually abused (Beyer, 2006).

In my experience, trauma typically slows down development in children and can interfere with all aspects of a youth's functioning. While other children are growing emotionally, the child coping with trauma is distracted from normal developmental tasks and is occupied with sadness and feeling powerless. Trauma causes disturbances of emotional regulation, social relationships, and attachment (Lieberman & Van Horn, 2004). Children who have been abused or were not protected from violence often blame themselves and have trouble trusting others (Cohen, Mannarino, & Deblinger, 2006).

Many youth in juvenile justice have in the past been involved with child protective services and some are in foster care when they are arrested. Children who are exposed to disrupted caregiving (separation from their families and multiple foster homes) are at risk for continued difficulty in emotional regulation and deficits in social cognitive processing (Price & Landsverk, 1998).

#### **Depression Associated With Trauma**

Depression is common but often not diagnosed in traumatized teenagers (Ney, Colbert, Newman, & Young, 1986). Their behavior problems become the focus rather than their underlying sadness, isolation, and loss. Depressed children typically express self-dislike, show distorted thinking, and have a greater dependence on peers, but being depressed is correlated with teacher and peer ratings of unpopularity (Cicchetti & Toth, 1998). Often, young people come to juvenile justice without having received trauma treatment despite persistent depression, aggression, and school difficulties (Wolfe, Rawana, & Chiodo, 2006).

#### Aggression Associated With Trauma

Aggression can be a defense against the helplessness common among traumatized children. Traumatized youth may misinterpret and be offended by relatively benign things that others say and react with combative selfpreservation. These young people often have had difficulty since childhood modulating their reactions and putting their feelings into words. They react negatively to outside controls and are often labeled oppositional (Ford, Chapman, Hawke, & Albert, 2007; Wolfe et al., 2006). Traumatized teens may not be able to stop these reactions because they see controlling adults as mean and unfair, to which past abuse has made them acutely sensitive. When adults threaten them, they reflexively

protect themselves; even if the adults believe they are controlling a situation, the teen automatically reacts as if back in the position of being victimized. When their feelings are hurt, they are flooded with anger from the past, which they are unaware is out of proportion to the present provocation, and they lack the ability to calm themselves. Unless adults arrange an environment to meet their needs, this predictable reflexive reaction will be provoked repeatedly. Multiple placements cause more loss and anxiety, provoking fear reactions and reinforcing sensitivity to hostility, rejection, and perceived unfairness.

Externalizing behaviors—behavior problems in school, substance use, and truancy—are correlated with extreme parental permissiveness, and internalizing behaviors—depression, anxiety, and self-destructiveness—are associated with extreme parental psychological control (Steinberg, Lamborn, Darling, Mounts, & Dornbusch, 1994). Furthermore,

the problem-solving strategies that boys bring to adolescent and adult social situations are directly traceable to the lessons learned from dads . . . young boys who are aggressive and are low in pro-social behaviors . . . have fathers who are more likely to engage in angry exchanges with them . . . the [boys] who are most prone to break down when the going gets tough are those who have been raised with the idea that to admit vulnerability, even to themselves, is weak. (Kindlon & Thompson, 1999, pp. 102–104)

#### Reactions to Bullying

Youth who have been chronically picked on have low self-esteem and academic and peer difficulties in school, leading to more teasing and bullying (Horowitz et al., 2004). Bullying keeps children from perceiving school as a safe environment. Other students fear that by associating with victims they may become targets. Sometimes victimized children become bullies themselves, and they tend to have more emotional problems than those who are victims only (Arseneault et al., 2006; Olweus, 1993).

#### Pathologizing Trauma-Related Behaviors

It is unfortunate that the effects of trauma on youth are often overlooked or misunderstood (see Sedlak & McPherson, 2010; see also Baker, Cunningham, & Harris, Chapter 11, this volume). The effects of trauma may significantly interfere with the young person's life and put him or her at risk of delinquency, even those whose symptoms do not meet the PTSD criteria (Widom, 1994; Wood, Foy, Layne, Pynoos, & James, 2002b) (see also Braverman & Morris, Chapter 3, this volume). Adolescents with a history of trauma have high rates of alcohol and substance abuse; these youth rely on substances to escape sad feelings and bad memories (Giaconia, Reinherz, Paradis, & Stashwick, 2003). Trauma is considered a significant risk factor, accounting for numerous items in checklists of factors connected to delinquency or dangerousness (e.g., the Structured Assessment of Violence Risk in Youth [SAVRY] and the Massachusetts Youth Screening Instrument [MAYSI-2]), but is seldom considered in designing rehabilitative services. Too often, symptoms from trauma are misinterpreted as part of the character of the young person, rather than a guide to what is behind behavior that can be changed.

Finally, I briefly discuss the effects of learning disabilities on the behavior of youth in the juvenile justice system.

## THE EFFECTS OF LEARNING DISABILITIES ON TEEN BEHAVIOR

About 17–53% of youth in juvenile justice systems have learning disabilities, in comparison to 2–10% in the overall child population (Kazdin, 2000; Sedlak & McPherson, 2010). Learning disabilities affect young people not only in school, but at home and in the community, particularly in comprehending, following directions, and establishing and maintaining relationships. Learning disabilities include a variety of problems in listening, remembering, prioritizing, and strategizing as well as reading and mathematics. Delinquents

have higher rates of neuropsychological deficits as reflected in language, verbal intelligence, working memory, and reading. Of special interest are deficiencies in "executive" functions that are served primarily by the frontal lobes of the brain . . . [including] abstract reasoning, goal setting, anticipating and planning, self-monitoring and self-awareness, inhibiting of impulsive behavior, and interrupting an ongoing sequence of behavior in order to initiate a more adaptive behavior (Kazdin, p. 53).

Attention deficit disorder (ADD) and attention-deficit/hyperactivity disorder (ADHD) are the most frequently diagnosed behavior disorders of childhood. It is estimated that at least 25% of adolescents (17% of males and 21% of females) in the juvenile justice system have ADHD, compared to 9% in the overall child population (12% of males and 5% of females; Eme, 2009). Distractibility and impulsiveness are prominent characteristics of attention deficit disorders, making these young people less able to stop

behaviors, which may contribute to delinquency (especially when they have immature cognitive processes and are unable to see alternative choices at the time of an offense). Difficulties with social skills are also common among children with attention deficits and, in my experience, often lead to indiscriminately seeking acceptance (even from delinquent peers). Some youth's problem-solving skills are compromised by not accurately perceiving cues from peers and adults, typically attributing hostility to others and believing that aggressive acts will result in peer approval (Dodge, 2003).

By the time the learning disability is identified, many youth lack the basic skills necessary to comprehend schoolwork and to get along with others. Often, the youth who is embarrassed by poor performance gets into a negative cycle of attention seeking that interferes with school participation. Some youths' problem-solving skills are compromised by not accurately perceiving cues from peers and adults, typically attributing hostility to others and believing that aggressive acts will result in peer approval (Dodge, 2003). Truancy from feeling picked on by teachers and/or students and frustration with poor academic progress can begin early in young people with learning disabilities, and not attending school can lead to delinquency.

## STRENGTHS OF YOUNG PEOPLE AND THEIR ENVIRONMENTS

Youth have strengths that must be built on in designing supports and services to meet the needs driving their delinquent behavior (Eccles & Gootman, 2002; see Lerner et al., Chapter 5, this volume). Often, youth can be engaged in change when their strengths

are recognized. Their aspirations may be connected to something they are or were good at, and what may motivate them to change is to get back on track toward achieving dreams. Although families are typically blamed as the cause of delinquency, most families also have strengths, and youth often take it personally when their families are criticized (see Jacobs, Miranda-Julian & Kaplan, Chapter 10, this volume). Peers and neighborhoods also receive blame for youth getting involved in delinquency, but positive peers can encourage the youth's aspirations and neighborhoods can offer significant support (such as pastors, relatives, and other adults and athletic and artistic opportunities) (see Hawkins, Vashchenko, & Davis, Chapter 12, this volume). Schools are seen as failing to address youth problems before they drop out or are suspended or expelled, but schools also can meet youth needs with services that offer youth the opportunity for success.

Through a developmental framework, juvenile justice can avoid pathologizing and instead identify the strengths and needs behind each young person's behavior. Rather than viewing the young person as a "bad seed" likely to become an adult offender, developmentally sound services support the youth's resilience so he or she can outgrow unacceptable behaviors.

## VIGNETTES OF YOUTH IN JUVENILE JUSTICE

The stories of four youth are presented next, including brief descriptions of their strengths; family, peer, school, and neighborhood contexts; immaturity; trauma; and disabilities. These vignettes demonstrate how a developmental framework can guide our understanding and treatment of these youth, as well as our efforts to prevent systeminvolvement for others. Marco's story is included, as well, in the analysis presented in Table 1.1.

#### Dustin

Dustin is a quiet 13-year-old Native American youth born on a reservation. His mother was 16, his father was incarcerated before his birth, and he was raised by his grandmother. When he lived with his mother, he periodically ran away to his grandmother because of his mother's physical abuse. His mother married, and they moved across the country to live with his new stepfather when Dustin was in seventh grade, shortly before the birth of his brother. It was traumatic for Dustin to lose his extended family and strong cultural roots. His stepfather was young, had not parented before, and favored his newborn; his mother's life centered around her husband.

Dustin adjusted surprisingly well to his new school. He had several friends who lived nearby and he spent most of his time in their homes. The girl next door was his best friend, and he felt "adopted" by her parents, who took him to the water park and skating rink; he resented his family for not caring enough about him to do activities together. He worried about his stepfather's drinking, which caused work and marital problems. His stepfather was furious when Dustin protected his mother when he was about to slap her. Dustin said his stepfather hit him and constantly reprimanded him for not doing household chores properly.

Dustin's mother and stepfather criticized him for getting poor grades, although he complained that he worked on his homework longer every afternoon than his friends. Initially, his teachers attributed his academic struggles to their assumption that the small reservation school he had attended from first to sixth grades was inferior. Because he was so "shy," his trouble concentrating and following directions was overlooked, and they were surprised that on his first standardized testing in late spring, Dustin scored more than three grades lower than his classmates. Although he was not referred for evaluation of attention deficit (without hyperactivity) and/or executive function deficits, Dustin was likely eligible for special education services to address disabilities, which would have improved his grades and self-esteem.

During the summer, Dustin's mother told him they had to move, but not back to his relatives. When he told his friend next door, she cried and Dustin said he held back tears. He was upset he would have to leave his friends and their caring families and adjust to a new school. The week of the offense, it came as a surprise to Dustin that his mother was sending him to live with a relative he did not know far from both his grandmother and where his mother was moving. He felt rejected, especially since his stepfather said it was his disobedience and poor grades that were making them send him to relatives who could discipline him.

Early physical abuse, being separated from family members, chronic disapproval, worrying about his mother's marriage, and the impending move was a significant amount of trauma. Dustin did not have anyone to confide in and internalized his feelings. Leading up to his explosion, Dustin was under extreme stress that compromised his typical immature thinking. When he walked in the door that night, Dustin said his mother immediately started yelling at him. He heated up some food and was watching television. His stepfather yelled at him to get off the couch and turn off the TV.

He was real mean about it. I was still eating. He told me to hurry up. I got up and moved so he could lie down on the couch. I went into the kitchen and put my dishes in the dishwasher. Then he yelled at me because I had turned the kitchen light on. It made me mad. I was sick of being yelled at and not allowed to watch TV in my own house. I can't explain what happened next. I grabbed a knife from the dishwasher.

Without thinking, Dustin lunged at his stepfather, cutting him seriously before he ran out of the house. Later, he understood that he had "bottled up all that anger at my stepfather and my mother and it all came out at once, but I didn't expect it."

Behind Dustin's aggression were complicated unmet needs to:

- Understand that the loss and rejection he experienced are not his fault;
- Learn how to respond when criticized and not overreact to rejection;
- Learn how to express himself without holding his feelings in until he erupts;
- Feel successful in school;
- Recognize the effects of his learning disabilities on his concentration and decision making; and
- Not be separated from family.

These needs could be met by trauma treatment, services to learn how to compensate for his learning disabilities, coaching on expressing his feelings and not overreacting, and returning to live with his grandmother.

#### Peter

Peter is a childish, White 14-year-old who was traumatized by abuse by his mentally ill mother, and then by abuse in his foster home. Later, he was moved to his father and stepmother's home. When he was in elementary school, Peter ran away repeatedly because of

his father's abuse. Child Protective Services again placed him in a foster home for more than a year. When he was returned, the school complained that his father was not cooperative in dealing with Peter's academic and behavior problems. Peter remembers being picked on since second grade for being behind academically. As he got older, Peter was upset that he was teased for being gay. He said he always liked girls, but kids thought he was gay because "I'm small and soft." He felt unfairly treated by the PE teacher and got Fs in PE because he was being harassed in the locker room and refused to change.

Peter's arms are lined with scars. "I was always cutting my wrists. My teacher saw it. My dad saw it. No one did anything about it." Peter talked about being isolated and alone, tolerating physical punishment by his father and conflict with his stepmother. "I didn't care about anybody. I just wanted to be dead." Asked what made him get to that point in eighth grade, he responded, "Thinking no one cares, people making fun of me all the time. My whole class made fun of me for being gay and not being able to do math."

Because of past trauma, Peter was unusually sensitive to criticism. He could not articulate that he felt hurt when he was teased and embarrassed about being unable to do his schoolwork. After years of abuse, Peter experienced any "no" as another victimization and he reflexively reacted to protect himself. He had not learned how to prevent escalation or how to calm himself down when he was teased, cornered, pushed, or touched. Peter's IEP (Individualized Education Plan) was blaming, focused on behavior control, and reflected no understanding of trauma-driven behavior. Peter got angry when he read his behavior intervention plan (BIP): "Peter's motivation for inappropriate behavior and language toward peers and teachers is avoidance of work and attention seeking." He thought his IEP was wrong: "Why do they think I avoid work? I go to school. I try to do my work. I need help on a lot of things. I am frustrated when I can't get more help."

After his arrest, a neuropsychological evaluation found "a severe attentional disorder, a slow rate of information processing, and memory and executive dysfunctions which constitute a significant functional disability" that interfered with Peter's school performance as well as with interactions with family and friends. For years he had IEPs without the required evaluations, which could have identified his disabilities in order to design the proper combination of services to ensure that his social skills, attentiveness, reading, and math improved. Had instruction in the give-and-take of communication, how to avoid talking too much, how to read others' nonverbal cues, and how not to misinterpret rules as mistreatment been initiated in the early elementary years when his social skills deficits were first documented, Peter's behavior improvement might have prevented being picked on. His early depression and anxiety might have been reduced with improved peer relationships, although these were also symptoms of trauma that went untreated.

The kids were picking on me, calling me gay every day. The teacher heard them and didn't do anything. The PE teacher yelled at me. The counselor wouldn't do anything. No one would help. Nobody cared. A kid called me a name, another kid tripped me as I was walking to my seat. I got angry. My teacher yelled at me to calm down. I got more out of hand. She came toward me, trying to corner me. When I get angry, I don't think. I was telling her to

leave me alone. She was yelling just like my father. She pushed me. I told her, "You better not touch me again." She pushed me against the cabinet. I went ballistic. I pushed her down, ran out of the school.

Behind Peter's aggression were numerous unmet needs to:

- Learn to separate his past victimization from provocation in the present;
- Learn to calm himself before reacting;
- Understand his pool of anger and hurt and learn to be less sensitive to rejection and to express his anger without hurting himself or others;
- Understand his attention, processing, and executive function difficulties; and
- Be successful at something.

These needs could be met by trauma treatment, services to learn how to compensate for his learning disabilities, a home and school where he is not maltreated, and guidance for the adults to understand that their actions might prevent most of his behavior problems by avoiding power struggles and deescalating before he gets out of control.

#### Brandon

Brandon is a bright, engaging African American 15-year-old from a loving family. His mother is proud of her two older children in community college and she is raising her young great nephew who had been neglected. Brandon's father's murder when Brandon was young led to his family's move out of a high-crime area.

Brandon's arrest for selling marijuana shocked all of them. His siblings and mother

insisted that their family's love, religious values, emphasis on school achievement, and strong work ethic made it inconceivable that any of the children could be a delinquent. Family members expressed regret for not realizing that his doing poorly in school and hanging around with kids who were not successful in school or athletics put him at risk. Brandon kept secrets from his mother for more than a year. His family said Brandon remained the same loving, childish, entertaining son and sibling at home, helping with his cousin and doing chores. But when he was out, he was using marijuana daily and paying for it by selling marijuana.

Brandon's life had changed significantly in the past 2 years, in a negative direction in several dimensions simultaneously.

- The loss of basketball. Brandon experienced a major, painful rejection when he was not invited to continue with the elite team he had been on for years. He felt humiliated, and lost a sense of belonging and identity that was critical to him. He stopped playing basketball altogether, believing his future as an athlete was over.
- Less attention from his mother. When he was in seventh grade, his mother lost her job and they had to move again. Her great nephew required a lot of her assistance when he was removed from his mother and had to adjust to a new family and school. Because Brandon was not playing sports, he spent less time with his mother, who had been at all his games.
- His brother's leaving. When Brandon's brother left home, he lost the daily friendship and guidance of the person to whom he was closest in his family.

- This marked the end of Brandon's life at home playing video games, since his brother was his game partner from second to seventh grade.
- The loss of school as a place of success. For Brandon, like many students, seventh grade was a difficult adjustment—the work was more challenging and he felt the teachers expected too much. Although in elementary school he had met state standards, getting As and Bs, in seventh grade Brandon was below standard in math and reading, did not like his teacher, and failed a class. In eighth grade, he was absent 40 days (in contrast to nearly perfect attendance in elementary school), got Ds, and was suspended for getting into an argument. Not wanting to burden his mother, he kept his problems from her. His brother told Brandon "to turn it around. You are just being lazy." A friend's parent was monitoring her MySpace and complained to the school that Brandon wrote threatening statements about the assistant principal; he was arrested, put on probation, and suspended (even though he said he was just joking). His probation officer detained him for a week when he was suspended in the first month of ninth grade for having marijuana in his pocket at school.

Unaware of the seriousness of Brandon's problems, his family viewed these as minor "incidents" due to his being unfairly treated at school and by probation. His mother was angry at the school for singling Brandon out:

If he had been a White kid, the school would have given him help a long

time ago. If he had been White, his probation officer would have sent him to a drug program, rather than locking him up in detention.

Brandon's immature thinking included not being able to anticipate the long-term consequences of poor grades. He did not imagine that each day his choices about his schoolwork were taking him off the path of high school graduation and going to college on a sports scholarship. Brandon also minimized the risks of his secret life. He was smoking marijuana every day in ninth grade and believed that marijuana was benign. Brandon said marijuana gave him a "mellow mind," and he liked being relaxed. The only problem he saw with marijuana was cost.

Brandon also had an immature identity. Prior to seventh grade, Brandon was a successful athlete and student, staying close to his family and home. But he lost some of his family-centeredness and he lost his sportsfocused identity. Brandon did not want to turn his back on his close friends, with whom he had played basketball since elementary school. They smoked marijuana together, were barely passing in school, and none were playing high school sports. He was their supplier, believing he would never get arrested selling drugs just to people he knew.

Behind Brandon's illegal behavior were significant unmet needs to:

- Be successful at school:
- Develop a stable, positive identity supported by successful peers at school;
- Talk about how much he has missed his father and brother;
- Learn how to get a "mellow mind" without using marijuana; and

 Learn how to anticipate consequences, see risks, and make choices that will allow him to achieve his goals.

These needs could be met by coaching on getting involved with college-bound peers, decision-making skills, returning to sports, improving study habits, tutorial assistance, college-preparatory summer programs, and guidance for his mother in providing supervision and recognizing Brandon's successes.

#### Kristi

Kristi is a 16-year-old biracial girl whose grandmother said she was "the perfect child until middle school: good grades, happy, nice friends, loved sports. She loved her mother; they had survived hard times together." Her parents' arguments and bitter divorce and her mother's remarriage were hard on Kristi. She missed having her father at home, and by the time she was in fourth grade, the fighting between her mother and stepfather was frightening. "I was scared of him. He wasn't working and was living off my Mom and me. I couldn't understand why she took him back over and over." Kristi developed an eating disorder in sixth grade after her stepfather was arrested for attacking her mother and Kristi when she tried to get help.

Kristi's soccer team was the center of her life for years, and her mother, grandmother, and father cheered for her at tournaments: "It was hard work to be on a travel team. It was an honor. We went to the state championship and met girls from all over. We did so well. We had so much fun." After the game, Kristi and her friends got caught drinking and their coach kicked them off the team. "I was going to try out for the high school team, but I gave up. . . . It was a big mistake that I regretted."

Her father talked about the vacuum that not playing soccer caused in Kristi's life, observing that without the discipline of sports she "became less motivated to do well in school, had more worries about her weight, and did not have her good group of friends."

The combination of reactions to her parents' divorce and her mother's involvement in an abusive second marriage made Kristi susceptible to an exploitive relationship with an older male. With her worries about her appearance, the loss of soccer, and feeling less motivated academically, Kristi was flattered by his attention, and minimized keeping him a secret from her parents, who would not have approved.

He was extremely moody, arguing with people for no reason. He hit me with his fists. He said the meanest stuff to me. And then sweet talk me, saying beautiful things. I told my best friend I didn't want to stay with him, but I didn't know how to break it off. I was so depressed.

#### Kristi continued,

I was ashamed that I still loved him and his sweet-talking and hoped our good times would return. I didn't ask for help because I didn't realize I was over my head. I knew getting high with him and skipping school to be with him were wrong. But I thought I could quit him anytime.

Kristi said she hid "how bad I felt about myself" and did not know how to get counseling without burdening her mother. She told herself that her substance use was not a problem. She believed that she would get serious about school again and achieve her goal of college.

Lacking experience, Kristi did not correctly assess many danger signals: "He would not let me go anywhere without him. His mood swings were extreme and unpredictable. He smashed things when he was angry." His obsession that afternoon with wanting to run away with her was annoying, but she thought it was "just talk" when he kept coming back to the same subject for hours and was not satisfied with her telling him she was not leaving home. What Kristi did not know was that he had been using meth that day. She was shocked when he attacked her mother, stabbing her to death with a kitchen knife when she got home from work: "It was so quick; I was in shock, shivering and not understanding what was happening." Threatening Kristi with the knife, he ordered her to get her mother's car keys and wallet and made her drive to an ATM to withdraw the limit in cash from her mother's account.

When they were apprehended in her mother's car, it did not occur to Kristi that the police would arrest her. She gave a simple statement about what had happened:

I thought the police wanted information about what he did. I didn't try to explain it to them. I didn't understand what happened myself. I thought they knew I didn't have any part in it and were going to take me home.

Asked whether she told the police she had been kidnapped, Kristi responded that she thought kidnapping referred to a small child or someone being tied up. She added,

I was forced the whole time. I wasn't dragged by my hair. But if I had refused, he would have made me. The look in his eyes was so threatening. In the car he was holding the knife. I didn't have control, of course, I never did with him.

Her boyfriend told the police it was Kristi's idea to kill her mother because she wanted to run away from home. In her state, 16-year-olds charged with murder did not have a hearing where a judge would decide whether they could be rehabilitated in juvenile court. Kristi was held for many months in an adult jail, fortunately supported by maternal and paternal extended family, before she was acquitted by a jury in an adult trial.

Behind Kristi's involvement in an abusive relationship were complex unmet needs to:

- Recover from her parents' divorce and her exposure to domestic violence, and understand the connection between her worries about loss of relationships and her eating problems and use of substances;
- Be proud of her academic performance;
- Learn how to have a good dating relationship without violence or being controlled; and
- Improve her ability to assess the riskiness of her choices.

These needs could be met by trauma treatment, support from teachers and family for good grades in school, and guidance in deciding about whether to return to sports.

## Commonalities Among These Young People

Of the five youths ages 13–16 arrested for a range of offenses described previously, all had strengths. Three had loving families and one had been raised in the past by a loving grandmother. All five needed, and had not received, trauma treatment. The behavior for which they came to the attention of the juvenile justice system (and one of them to the child welfare system) was linked to abuse, loss, harassment, and exposure to

violence. None of them understood the connection between past trauma and their present problems, even the two whose aggression was directly related to prior victimization.

For two of the youth, their delinquent behavior was associated with their untreated learning disabilities. The other three did not have disabilities, but had become alienated from school and were not achieving as well as they had in the past.

Immaturity affected all of their offenses. All had immature thinking, minimized risk, and were unable to anticipate the worst possible outcomes of their behaviors. None of them had the experience to realize that they needed help and could not solve their problems themselves. One was helped by friends, one was loyal to friends, two were pressured by older youth, and one had poor peer relationships. All expressed moral values and knew right from wrong, but they were not rational and could not use mature moral reasoning when caught up in an offense they did not realize was going to happen. The range of developmental characteristics behind the behavior of these five youth is presented in Table 1.1.

These portraits are quite different than the standard files of system-involved youth might suggest. Without minimizing the seriousness of the acts these young people have committed, each portrait attempts to explain how the youth came to be in the situations that led them to these actions, and based on that information, what services would likely be successful in building on their strengths and meeting their needs so they can achieve adult lives of purpose. They argue, in my view, for keeping youth out of adult probation, jails, and prisons—allowing them the opportunity to mature and to heal within a juvenile justice system that can provide developmentally sound support. The vignettes also identify lost opportunities for intervening before delinquent acts were ever committed.

	Dustin (Age 13)	Marco (Age 14)	Peter (Age 14)	Brandon (Age 15)	Kristi (Age 16)
STRENGTHS	Wants to complete high school No prior arrests or substance use Knows hurting someone is wrong	Wants to complete high school Remorseful	Wants friends, nonabusive home No prior arrests or substance use	Wants to go to college Athletic talent	Wants to go to college No prior arrests Athletic talent
FAMILY CONTEXT	Attached to extended family Strong positive family values Felt criticized by stepfather, betrayed by mother	Strong, caring family Did not know how to provide supervision or encouragement	Separation from mother, abuse in foster home, abuse by father and stepmother  Years of feeling unwanted	Strong, caring family Did not realize he needed more supervision and help	Strong, caring family Did not realize she needed more supervision and help
PEER CONTEXT	Nondelinquent friends	Brother and friends in gang	Picked on every day in school for 6 years	Friends no longer athletes and likely to drop out of school Daily marijuana use requires \$	Nondelinquent friends except her boyfriend Unable to leave abusive boyfriend
SCHOOL	Well liked by teachers Behind academically No testing for services	Capable of grade-level work, but alienated Feels teachers are unsupportive	IEP for behavior control, not for disabilities Feels no one stopped mistreatment	Was an excellent student	Was an excellent student Decreased confidence in school
NEIGHBORHOOD CONTEXT	Loss of reservation culture Safe neighborhood	Temified by gang violence	Isolated rural area	Working-class neighborhood with increasing crime	Low-crime neighborhood
ІММАТОКІТҮ	Impulsive reaction to criticism Did not realize anger and sadness could explode Did not realize he needed help Not excelling at anything	Minimized risks of joining gang Felt he had no choice but to do what was ordered Did not realize he needed help Not excelling at anything	Can't anticipate consequences Didn't want to be perceived as gay Not successful at anything Self-destructive behavior	Minimized risks of selling marijuana Did not realize drift away from path of school and sports Did not realize he needed help Did not want to be disloyal	Minimized risks of boyfriend Minimized risks of alcohol and marijuana Did not realize she needed help
TRAUMA	Physical abuse Separation from family Constant criticism Stress of moving	Deaths in family Parents preoccupied Constant fear from violence Pressure to achieve	Tormented by teasing Repeated abuse caused reflexive reaction to threat Depressed	Father's murder Loss of sports Mother's job loss and move Brother leaving	Divorce Domestic violence at home Loss of sports Depressed
DISABILITIES	Undiagnosed ADD and/or executive function deficit		Untreated processing, attention and executive function difficulties		

Taking an ecologically oriented, traumainformed developmental view of who these young people are, what they need, and what they might yet become is a step toward providing them with the effective juvenile services described in subsequent chapters.

#### REFERENCES

- Abram, K. M., Teplin, L. A., Charles, D. R., Longworth, S., McClelland, G., & Dulcan, M. (2004). Posttraumatic stress disorder and trauma in youth in juvenile detention. Archives of General Psychiatry, 61, 403–410.
- American Medical Association (2005). Amici curiae brief, Roper v. Simmons, United States Supreme Court, pp. 4–20.
- Arseneault, L., Walsh, E., Trzesniewski, K., Newcombe, R., Caspi, A., & Moffitt, T. E. (2006). Bullying victimization uniquely contributes to adjustment problems in young children. *Pediatrics*, 130(9), 118.
- Beyer, M. (2006). Fifty delinquents in juvenile and adult court. *American Journal of Orthopsychiatry*, 76(2), 206–215.
- Beyer, M., Blair, G., Katz, S., Simkins, S., & Steinberg. A. (2003). A better way to spend \$500,000: How the juvenile justice system fails girls. *Wisconsin Women's Law Journal*, 18(1), 51–75.
- Bishop, D. (2000). Juvenile offenders in the adult criminal justice system. *Crime and Justice*, 17, 81.
- Brown, L., & Gilligan, C. (1992). *Meeting at the crossroads*. New York, NY: Ballantine.
- Brosky, B. A., & Lally, S. J. (2004). Prevalence of trauma, PTSD and dissociation in court-referred adolescents. *Journal of Interpersonal Violence*, 19(7), 801–814.
- Chamberlain, P., & Moore, K. (2002). Chaos and trauma in the lives of adolescent females with antisocial behavior and delinquency. *Journal of Aggression, Maltreatment and Trauma*, 6(1), 79–108.
- Cicchetti, D., & Toth, S. L. (1998). The development of depression in children and adolescents. *American Psychologist*, 53, 221–241.
- Cohen, J., Mannarino, A., & Deblinger, E. (2006). Treating trauma and traumatic grief in children and adolescents. New York, NY: Guilford Press.
- Cross, W. E., Jr., & Fhagen-Smith, P. (2001). Patterns of African American identity development: A life span

- perspective. In B. Jackson & C. Wijeyesinghe (Eds.), *New perspectives on racial identity development: A theoretical & practical anthology* (pp. 243–270). New York: New York University.
- Dodge, K. A. (2003). Do social information processing patterns mediate aggressive behavior? In B. Lahey, T. Moffitt, & A. Caspi (Eds.), Causes of conduct disorder and juvenile delinquency (pp. 254–274). New York, NY: Guilford Press.
- Dodge, K. A., Malone, P. S., Lansford, J. E., Miller-Johnson, S., Petit, G. S., & Bates, J. E. (2006). Toward a dynamic developmental model of the role of parents and peers in early onset substance use. In J. Dunn & A. Clarke–Stewart (Eds.), Families count: Effects on child and adolescent development (pp. 104–131). New York, NY: Cambridge University Press.
- Eccles, J. S., & Gootman, J. (2002). Community programs to promote youth development. Washington, DC: National Academy Press.
- Eisenberg, N., Morris, A. S., McDaniel, B., & Spinrad, T. L. (2009). Moral cognitions and prosocial responding in adolescence. In R. M. Lerner & L. Steinberg, Handbook of adolescent psychology, Vol. 1: Individual bases of adolescent development (3rd ed., pp. 229–265). Hoboken, NJ: Wiley.
- Eme, R. (2009). Attention deficit hyperactivity disorder and the family court. Family Court Review, 47(4), 650–664.
- Erikson, E. H. (1959). *Identity and the life cycle; selected papers*. New York, NY: International Universities Press.
- Fagan, J. (2000). Contexts of choices by adolescents in criminal events. In T. Grisso & R. Schwartz (Eds.), *Youth on Trial* (pp. 371–402). Chicago, IL: University of Chicago Press.
- Fareri, D. S., Martin, L. N., & Delgado, M. R. (2008). Reward-related processing in the human brain: Developmental considerations. *Development and Psychopathology*, 20, 1191–1211.
- Ford, J. D., Chapman, J. F., Hawke, J., & Albert, D. (2007). Trauma among youth in the juvenile justice system: Critical issues and new directions. Retrieved from National Center for Mental Health and Juvenile Justice Web site: www.ncmhjj.com
- Furby, M., & Beythe-Marom, R. (1992). Risk-taking in adolescence: A decision-making perspective. *Developmental Review*, 12, 1–44.
- Galliher, R. V., Rostosky, S. S., & Hughes, H. K. (2004).
  School belonging, self-esteem, and depressive symptoms in adolescents: An examination of sex,

- sexual attraction status, and urbanicity. Journal of Youth and Adolescence, 33(3), 235–245.
- Garcia Coll, C., Akerman, A., & Cicchetti, D. (2000). Cultural influences on developmental processes and outcomes. Development and Psychopathology, 12, 333–356.
- Giaconia, R. M., Reinherz, H. Z., Paradis, A. D., & Stashwick, C. K. (2003). Comorbidity of substance use disorders and posttraumatic stress disorder in adolescents. In P. Ouimette & P. J. Brown (Eds.), Trauma and substance abuse (pp. 227–242). Washington, DC: American Psychological Association.
- Graham, S., & Lowry, B. (2004). Priming unconscious racial stereotypes about adolescent offenders. *Law* and *Human Behavior*, 28, 483–504.
- Grisso, T., Steinberg, L., Cauffman, E., Scott, E., Graham, S., Lexcen, F., . . . Schwartz, R. (2003). Juveniles' competence to stand trial. *Law and Human Behavior*, 27(4), 333–363.
- Hampel, P., & Petermann, F. (2006). Perceived stress, coping, and adjustment in adolescents. *Journal of Adolescent Health*, 38, 409–415.
- Hennessey, M., Ford, J. D., Mahoney, K., Ko, S., & Siegfried, C. (2004). Trauma among girls in the juvenile justice system. Los Angeles, CA: National Child Traumatic Stress Network.
- Horowitz, J. A., Vessey, J. A., Carlson, K. L., Bradley, J. F., Montoya, C., McCullough, B., & David, J. (2004). Teasing and bullying experiences of middle school students. Journal of the American Psychiatric Nurses Association, 10(4), 165–172.
- Kazdin, A. (2000). Adolescent development, mental disorders, and decision making of delinquent youth. In T. Grisso & R. Schwartz (Eds.), Youth on trial (pp. 33–65). Chicago, IL: University of Chicago Press.
- Kerig, P. K., Ward, R. M., Vanderzee, K. L., & Moeddel, M. A. (2009). Posttraumatic stress as a mediator of the relationship between trauma and mental health problems among juvenile delinquents. *Journal of Youth and Adolescence*, 38(9), 1214–1225.
- Kindlon, D., & Thompson, M. (1999). Raising Cain: Protecting the emotional life of boys. New York, NY: Ballantine.
- Kroger, J. (2003). Identity development during adolescence. In G. R. Adams & M. D. Berzonsky (Eds.), Blackwell handbook of adolescence (pp. 205–226). Malden, MA: Blackwell Publishing.
- Larson, R. W., Moneta, G., Richards, M. H., & Wilson, S. (2002). Continuity, stability, and change in daily

- emotional experience across adolescence. *Child Development*, 73(4), 1151–1165.
- Lerner, R. M. (2002). Concepts and theories of human development (3rd ed.). Mahwah, NJ: Erlbaum.
- Lerner, R., & Steinberg, L. (2004). The scientific study of adolescent development past, present, and future. In R. Lerner and L. Steinberg (Eds.), *Handbook of adolescent psychology* (pp. 1–12). Hoboken, NJ: Wiley.
- Lieberman, A., & Van Horn, P. (2004). Assessment and treatment of young children exposed to traumatic events. In J. Osofsky (Ed.), Young children and trauma (pp. 194–216). New York, NY: Guilford Press.
- Luthar, S. S. (2003). Resilience and vulnerability: Adaptation in the context of childhood adversities. Cambridge, MA: Cambridge University Press.
- Majd, K., Marksamer, J., & Reyes, C., (2009). Hidden injustice: Lesbian, gay, bisexual and transgender youth in juvenile courts. Legal Services for Children, National Juvenile Defender Center, and National Center for Lesbian Rights. San Francisco, CA.
- McGowan, A., Hahn, R., Liberman, A., Crosby, A., Fullilove, M., Johnson, R., . . . Task Force on Community Preventive Services. (2007). Effects on violence of laws and policies facilitating the transfer of juveniles from the juvenile justice system to the adult justice system (Centers for Disease Control and Prevention). American Journal of Preventive Medicine, 32(4 Suppl), 7–28.
- Ney, P., Colbert, P., Newman, B., & Young, J. (1986). Aggressive behavior and learning difficulties as symptoms of depression in children, *Child Psychiatry* and Human Development, 17(1), 3–14.
- Ofshe, R., & Leo, R. (1997). Decision to confess falsely. Denver University Law Review, 74, 979– 1122.
- Olweus, D. (1993). Victimization by peers: Antecedents and long-term outcomes. In K. H. Rubin & J. B. Asendorf (Eds.), *Social withdrawal, inhibition, and* shyness (pp. 315–341). Hillsdale, NJ: Erlbaum.
- Osofsky, J. D. (2004). Young children and trauma: Intervention and treatment. New York, NY: Guilford Press.
- Owen-Kostelnik, J., Reppucci, N. D., & Meyer, J. R. (2006). Testimony and interrogation of minors: Assumptions about maturity and morality. *American Psychologist*, 61(4), 286–304.
- Price, J. M., & Landsverk, J. (1998). Social informationprocessing patterns as predictors of social adaptation and behavior problems among maltreated children in foster care. *Child Abuse and Neglect*, 22(9), 845–858.

- Putnick, D. L., Bornstein, M. H., Hendricks, C., Painter, K. M., Suwalsky, J. T., & Collins, W. A. (2008). Parenting stress, perceived parenting behaviors, and adolescent self-concept in European American families. Journal of Family Psychology, 22(5), 752–762.
- Ryan, C., Huebner, D., Diaz, R. M. & Sanchez, J. (2009) Family rejection as a predictor of negative health outcomes in white and Latino lesbian, gay and bisexual young adults. *Pediatrics*, 1, 346–352.
- Scott, E. S., & Grisso, T. (1997). The evolution of adolescence: A developmental perspective on juvenile justice reform. The Journal of Criminal Law and Criminology, 88, 137–189.
- Scott, E. S., & Steinberg, L. (2008). Adolescent development and the regulation of youth crime. The Future of Children, 18(2), 15–33.
- Sedlak, A., & McPherson, K. (2010). Conditions of confinement: Findings from the Survey of Youth in Residential Placement (May). Washington, DC: Office of Juvenile Justice and Delinquency Prevention, U. S. Department of Justice.
- Seiffge-Krenke, I. (1995). Stress, coping, and relationships in adolescence. Hillsdale, NJ: Erlbaum.
- Smetana, J. G., & Turiel, E. (2003). Moral development during adolescence. In G. R. Adams & M. D. Berzonsky (Eds.), Blackwell handbook of adolescence (pp. 247–268). Malden, MA: Blackwell.
- Smith, D., Leve, L., & Chamberlain, P. (2006). Adolescent girls' offending and health-risking sexual behavior: The predictive role of trauma. *Child Maltreatment*, 11(4), 346–353.
- Spear, L. P. (2000) The adolescent brain and age-related behavioral manifestations. Neuroscience and Biobehavioral Reviews, 417–463.
- Spencer, M. B., Harpalani, V., Cassidy, E., Jacobs, C. Y., Donde, S., Goss, T. N., . . . Wilson, S. (2006). Understanding vulnerability and resilience from a normative developmental perspective: Implications for racially and ethnically diverse youth. In D. Chicchetti (Ed.), Handbook of development and psychopathology (pp. 627–673). New York, NY: Wiley.
- Steinberg, L. (2008). A social neuroscience perspective on adolescent risk-taking. *Developmental Review*, 28, 78–106.

- Steinberg, L., & Haskins, R. (2008). Keeping adolescents out of prison. Princeton University-Brookings Institution Policy Brief. Retrieved from www.future ofchildren.org
- Steinberg, L., Lamborn, S. D., Darling, N., Mounts, N. S., & Dornbusch, S. M. (1994). Over-time changes in adjustment and competence among adolescents from authoritative, authoritarian, indulgent and neglectful families. *Child Development*, 65, 754–770.
- Warden, R., & Drizin, S. (Eds.). (2009). True stories of false confessions. Chicago, IL: Northwestern University.
- Widom, C. S. (1994). Child victimization and adolescent problem behavior. In R. D. Ketterlinus & M. E. Lamb (Eds.), Adolescent problem behavior: Issues and research. Hillsdale, NJ: Erlbaum.
- Wigfield, A., Byrnes, J. B., & Eccles, J. S. (2006).
  Adolescent development. In P. A. Alexander & P. Winne (Eds.), Handbook of educational psychology (2nd ed., pp. 87–113). Mahwah, NJ: Erlbaum.
- Wilber, S., Ryan, C., & Marksamer, J. (2006). Serving LGBT youth in out-of-home care. Washington, DC: Child Welfare League of America.
- Wills, T. A., Sandy, J. M., & Yaeger, A. M. (2001). Coping dimensions, life stress, and adolescent substance use: A latent growth analysis. *Journal of Abnormal Psychology*, 110, 309–323.
- Wolfe, D., Rawana, J., & Chiodo, D. (2006). Abuse and trauma. In D. Wolfe & E. Mash (Eds.), Behavioral and emotional disorders in adolescents. New York, NY: Guilford Press.
- Wood, J., Foy, D., Goguen, C., Pynoos, R., & James, C. B. (2002a). Violence exposure and PTSD among delinquent girls. Journal of Aggression, Maltreatment and Trauma, 6(1), 109–126.
- Wood, J., Foy, D., Layne, C., Pynoos, R., & James, C. B. (2002b). An examination of the relationships between violence exposure, posttraumatic stress symptomatology, and delinquent activity: An "ecopathological" model of delinquent behavior among incarcerated adolescents. In R. Greenwald (Ed.), *Trauma and juvenile delinquency* (pp. 109–126). New York, NY: Hayworth.
- Zahn, M. (2009). *The delinquent girl*. Philadelphia, PA: Temple.