

YOUNG OFFENDERS AND TRAUMA: EXPERIENCE AND IMPACT A PRACTITIONER'S GUIDE

Introduction

This practice guide is one of an ongoing series produced as part of the Beyond Youth Custody (BYC) programme, funded under the Big Lottery Fund's Youth in Focus initiative. BYC has been designed to challenge, advance, and promote better thinking in policy and practice for the effective resettlement of young people.

Trauma and its effects are a key consideration for those who work with young offenders. Not only are traumatic experiences very common in the backgrounds of young people in custody, but the impact of these experiences can limit their ability to engage with opportunities in the short term, and in the longer term can seriously narrow their life chances.

It is therefore critical that resettlement practitioners are aware of issues concerning trauma because attempting to address behaviour without understanding a young person's underlying difficulties can result in unsuccessful and sometimes counterproductive interventions.

This practitioner briefing aims to highlight what is currently known about the links between trauma and young people's behaviour and development.

The next practitioner briefing explores how this insight can begin to inform work with custody leavers.

For a full exploration of research and practice literature concerning trauma, please see Liddle, M., Boswell, G., Wright, S. and Francis, V. (2016). *Trauma and young offenders: A review of the research and practice literature*. London: Beyond Youth Custody

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What is trauma?

There are many definitions of trauma, most of which focus on the way in which individuals immediately experience negative events. It is important, however, to consider how trauma affects individuals differently – particularly in terms of its long-lasting effects:

Trauma is an emotional wound, resulting from a shocking event or multiple and repeated life threatening and/or extremely frightening experiences that may cause lasting negative effects on a person, disrupting the path of healthy physical, emotional, spiritual and intellectual development.
National Child Traumatic Stress Network (NCTSN)

Individual trauma results from an event, series of events, or set of circumstances that is experienced by an individual as physically or emotionally harmful or threatening and that has lasting adverse effects on the individual’s functioning and physical, social, emotional, or spiritual well-being... In short, trauma is the sum of the event, the experience, and the effect.
Substance Abuse and Mental Health Services Administration (SAMHSA)

Trauma can be generated by a wide range of events, whether these are interpersonal or impersonal, immediate and one-off or chronic and ongoing. The following types of events have the potential to generate trauma:

- Emotional, physical, and sexual abuse
- Neglect
- Assaults
- Bullying
- Witnessing family, school or community violence
- War
- Racist victimisation
- Acts of terrorism
- Disasters
- Serious accidents
- Serious injuries
- Loss of loved ones
- Abandonment
- Separation

Events of this kind are traumatic because they overwhelm an individual’s capacity to cope and produce powerful feelings such as fear, terror, helplessness, lack of control, hopelessness and despair.

What impact does trauma have?

Trauma impacts negatively on an individual in the short and medium term, but also in the much longer term. Not all traumatic events generate lasting damage – the impact of traumatic events is usually dependent on a range of factors, including the following:

- **The type of event that gave rise to the trauma** – with ‘interpersonal traumas’ (e.g. involving violence or child abuse) being more likely to increase the risk of subsequent further traumatic experiences and re-victimisation than ‘non-interpersonal traumas’ (e.g. road accidents, disasters).
- **Previous experience of trauma** – where adverse experiences are multiple or chronic, the scope for a negative impact on individual health and development is increased (and this can be exacerbated where an accumulation of trauma is also accompanied by a lack of protective factors).
- **Mental and emotional strengths and weaknesses** (resilience).
- **What kind of support the individual has** (at home or elsewhere).

Factors concerning lifestyle, socio-economic circumstances and environment also play a role in determining complex patterns of traumatic experience and impact.

Where trauma is particularly acute or generated by multiple events (as in the case of child abuse, for example) there can be an adverse physical and emotional impact which in turn has a profound effect on individual development during childhood, adolescence and into adulthood. These effects can blunt emotional development and socialisation, levels of self-esteem and confidence and the ability to form relationships with others.

Longer-term impacts can also be linked to a range of risk behaviours in adolescence and adulthood including: substance abuse, indiscriminate sexual behaviour and reduced awareness of danger. These behaviours in turn can increase the likelihood of further victimisation and the generation of further trauma.

Young people who have experienced a number of incidents and types of maltreatment during childhood are at greater risk of revictimisation in adolescence and adulthood. For example, abuse victims are more likely to have also experienced psychological neglect; children exposed to physical abuse are more likely to experience psychological abuse and brain injury; intrafamilial abuse is associated with extrafamilial abuse; and being sexually abused as a child substantially increases the likelihood of being sexually assaulted in adulthood.

In short, where individuals have multiple traumatic experiences in their backgrounds, the impact of these may accumulate and reinforce one another.

Considerations for practice

Does your project:

- Raise staff awareness of the issue of trauma and its impact upon young people?
- Consider whether young people might have experienced neglect or abuse, suffered or witnessed intimidation or violence, lived through disasters, war or serious accidents, or experienced loss of, abandonment by, or separation from, loved ones?
- Recognise that multiple or chronic traumatic experiences have a serious negative impact upon individuals’ health, development and capacity to engage with services?
- Assess young people’s levels of resilience: their mental and emotional strengths/weaknesses and the protective factors they can tap into?
- Consider how trauma influences behaviour?

In addition to its immediate negative impact, early child maltreatment interrupts normal child development, especially emotional control. For adolescents, key developmental processes may be hindered by their negative experiences, as summarised in the table below:

| Key adolescent development | The impact of trauma makes them... |
|---|--|
| Learn to think abstractly | Exhibit reckless, self-destructive behaviour |
| Anticipate and consider the consequences of behaviour | Experience inappropriate aggression |
| Accurately judge danger and safety | Over- or underestimate danger |
| Modify and control behaviour to meet long-term goals | Struggle to imagine/plan for the future |

Young people’s experiences of trauma are linked to anti-social behaviour and offending. Childhood abuse and/or neglect in particular are associated with the following:

- Difficulties in tolerating and controlling negative emotions
- The development of maladaptive or self-endangering behaviour
- The use of avoidance strategies, especially emotional avoidance
- Dissociation, substance abuse and tension reducing behaviour
- Compulsive sexual behaviour, purge eating, impulsive aggression, suicidality and self-mutilation

Young people who have experienced a range of childhood abuse and neglect will tend to use distraction, self-soothing or the artificial induction of a positive state in an attempt to reduce their negative emotions. Feeling suicidal, engaging in substance abuse, dissociation and other dysfunctional behaviour may serve to reduce trauma-linked emotional distress in young people who have experienced multiple forms of interpersonal trauma in particular.

These behavioural characteristics can set children and young people on a difficult trajectory that may lead to:

- Attention difficulties
- Poor behaviour and parenting challenges
- School truancy and exclusion
- Peer delinquency and substance misuse
- Offending

Considerations for practice

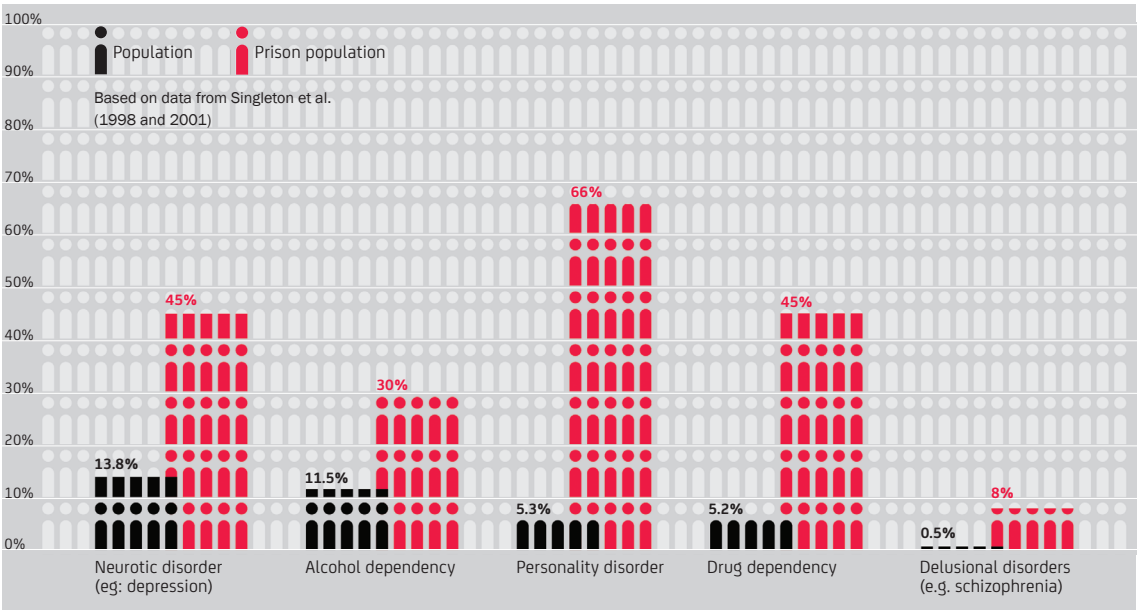
Do the young people with whom your project works:

- Exhibit impulsive, reckless, self-destructive behaviour?
- Struggle to tolerate negative emotion and experience inappropriate aggression?
- Over- or underestimate danger?
- Avoid activities that they find challenging, especially those raising emotional issues?
- Find it difficult to imagine or plan for the future?
- Engage in self-harming/suicidal behaviour, drug or alcohol misuse, sexual risk-taking, eating disorders or other dysfunctional behaviour?

Trauma in the offending population

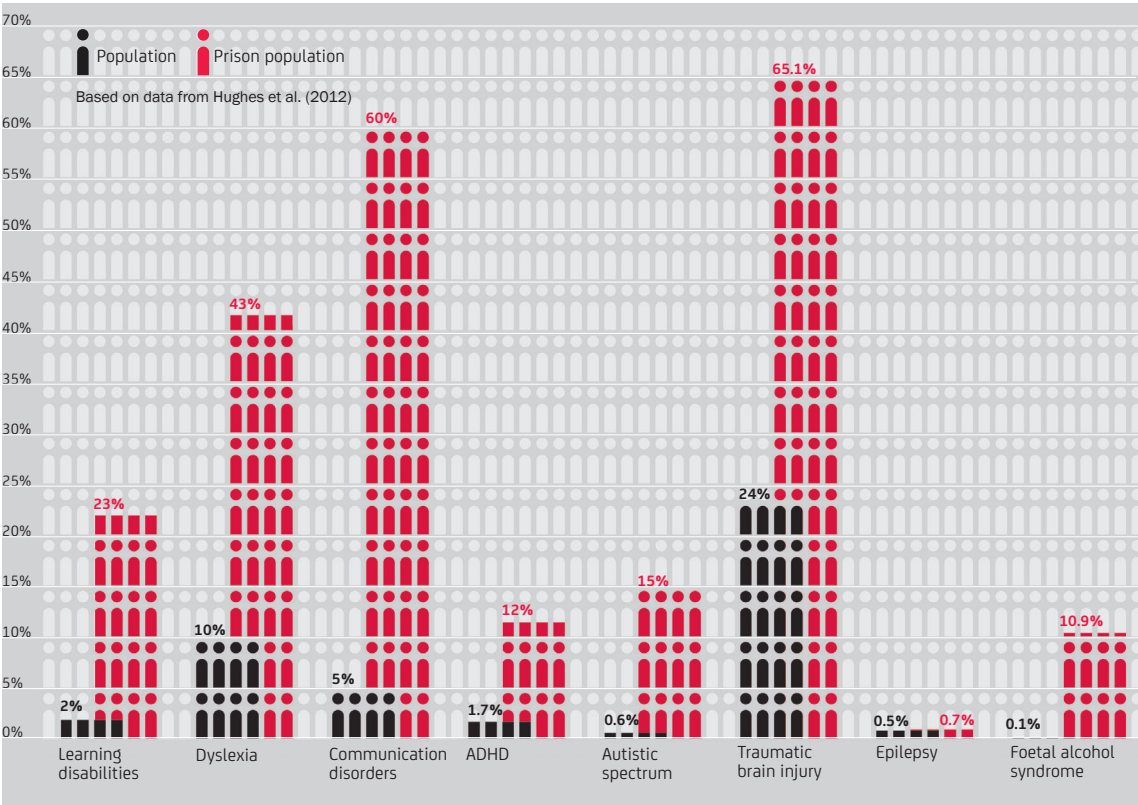
Mental health difficulties, communication difficulties and neurodevelopmental disorders are more prevalent among offenders in custody than among the general population. The following chart reveals the greater prevalence of a range of mental health and related dimensions among prisoners:

Range of mental health issues amongst prisoners



Neurodevelopmental disorders are also far more common among young people in custody than among those in the general population (including brain trauma, which is specifically associated with violent offences and a younger age of incarceration) as shown in the graph below:

Neurodevelopmental disorders common among young people in custody



A study of 10-17 year old offenders found the experience of abuse and/or significant loss to be key factors in the lives of the majority of young violent offenders sentenced to custody, as the chart opposite illustrates.

Among the individuals in the above study, only 9% (18) had no reported evidence of either abuse or loss. As the researchers point out, the fact that 35% of the young offenders had experienced both abuse and loss suggests that the existence of a double childhood trauma may be a potent factor in the lives of violent young offenders. The researchers emphasise that child abuse and loss are not the only potential causes of violent offending, nor does every abused child become an offender. Yet unresolved trauma is likely to manifest itself in some way at a later date. Many children become depressed, disturbed, violent or all three, with girls tending to internalise their responses and boys tending to externalise theirs. Such experiences are sufficiently prevalent to warrant the introduction of systematic assessment for violent young offenders.

Attempting to address young offenders' behaviour without understanding their underlying difficulties can result in unsuccessful and sometimes detrimental interventions. Failure to take account of experiences of trauma and its impact upon child development and emotional well-being will limit the potential benefits of resettlement work:

... traumatic childhood experiences are not only extremely common; they also have a profound impact on many different areas of functioning. For example, children exposed to alcoholic parents or domestic violence rarely have secure childhoods; their symptomatology tends to be pervasive and multifaceted, and is likely to include depression, various medical illnesses, as well as a variety of impulsive and self-destructive behaviors [sic]. Approaching each of these problems piecemeal, rather than as expressions of a vast system of internal disorganization [sic] runs the risk of losing sight of the forest in favor [sic] of one tree.

van der Kolk, 2005



Considerations for practice

Do the young people with whom your project works:

- Struggle with communication difficulties?
- Recall experiences of sustaining head injuries or being knocked out?
- Have mental health difficulties or problems with substance misuse?
- Report experiences of abuse or loss of a significant person in their life?

What this means for resettlement practice with young offenders

We know that adversity affects children's brain development and that experiencing violence in one's formative years heightens sensitivity to threat and anger in others. But in addition to increasing the risk of offending, the impairment of neuro-cognitive development may make it difficult for these young people to understand and comply with criminal justice interventions and also to comprehend the consequences of breaching them.

Considerations for practice

The challenge faced by young people affected by trauma in trying to comply with the criminal justice system is apparent when one reflects that they are likely to:

- Be disinhibited, make poor social judgements and behave inappropriately
- Lack the communication skills necessary to allow them to negotiate their way out of conflict
- Have limited planning skills and respond inflexibly to challenging situations
- Experience difficulties with attention, working memory and cognition
- Misperceive situations (be unable to read others' emotions, or perceive a threat when there is none)
- Have difficulty in considering alternative behaviour or controlling their impulses – especially in conflict situations.

These young people are likely to feel extremely isolated and mistrust strangers (i.e. resettlement practitioners). Having developed maladaptive coping skills, they will be prone to derailing interventions, even those specifically designed to help them. Those sentenced to custody may experience significant difficulties in coping with new situations (known as 'adjustment disorder') which can arise both upon entering and leaving custody and may last for up to six months. Many current criminal justice interventions will be highly distressing for young offenders who are particularly poorly equipped to deal with these emotional challenges.

In summary, what we know is that young offenders:

- have a disproportionate amount of trauma in their backgrounds
- are more likely to have suffered adverse impacts from trauma
- display problematic behaviour that is linked to their experiences of trauma
- have resettlement outcomes whose scope may be adversely affected unless their traumatic experiences are identified and addressed.

Summary

This is an extremely complex field of work and the stigma attached to experiences of trauma makes it difficult for many people to disclose what has happened to them. Having developed detrimental methods of dealing with their distress, perhaps including distrust and rejection of those in authority, these individuals tend not to engage with services. In adopting this approach, they run the risk of further negative consequences for breaching criminal justice requirements. So without tailoring interventions in a way that acknowledges young people's traumatic experiences and supports them to learn new coping skills, the long-term impact of any intervention may be quite short-lived.

The next Beyond Youth Custody practitioner briefing examines how our knowledge about the links between trauma and youth offending (including their capacity to comply with youth justice interventions) can begin to inform more effective resettlement practice with custody leavers.

The Beyond Youth Custody team hopes that this practice guide is useful to you, and would be interested to hear about your experiences of the issues raised here. Please feel free to contact the programme manager at beyondyouthcustody@nacro.org.uk to share your insights or discuss these issues.

We regularly update our publications which are available to download at www.beyondyouthcustody.net

This review has been produced by the Beyond Youth Custody partnership, consisting of Nacro, ARCS (UK) Ltd, the Centre for Social Research at the University of Salford, and the Vauxhall Centre for the Study of Crime at the University of Bedfordshire.

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