Snare or Turning Point? An Exploration of Change and Continuity in Criminal Behavior Among Formerly Incarcerated Youth

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DEDICATION

I dedicate this dissertation to the many kids that I met, years ago, in the Los Angeles Probation Camps and Juvenile Halls, whose voices are rarely heard. They were the inspiration for this work.
The overall purpose of the current studies was to evaluate the impact of incarceration on formerly incarcerated youth’s post-release psychosocial adjustment from two approaches. A group of formerly incarcerated youth (N = 62) were recruited from a volunteer re-entry program in Southern California. The majority of the sample was eighteen years old, male and Latino. In the first approach I evaluated the impact of abuse during incarceration on post-release psychosocial outcomes (i.e., posttraumatic stress, depression, and criminal involvement) while exploring the prevalence and types of abuse that youth experienced. Findings from the first study indicated that youth experienced a broad range of abuses during incarceration including direct, witnessed, and vicarious abuse experiences. When these forms of abuse experiences were combined, nearly all youth experienced some type of abuse. In addition, the more frequently youth were exposed to abuse, all types combined, the more likely they were to have higher rates of
post-release criminal involvement, depression, and PTSD symptoms even while controlling for child maltreatment and time spent incarcerated.

Second, I evaluated whether youth considered their time spent incarcerated as a turning point in their lives using two methods (i.e., quantitative and qualitative). Findings from the second study indicate that how youth perceive their incarceration experience impacts their post-release outcomes in diverse ways. There was large variability in how much positive change or benefits youth reported following, and because of, incarceration. The amount of benefits youth perceived following incarceration was positively associated with social support and self-esteem, and negatively associated with depression. However, the effect of youth’s perceptions of positive benefits following incarceration on depression and criminal involvement depended on the level of incarceration trauma youth experienced. Lower levels of perceived change following incarceration along with high levels of incarceration trauma were associated with increased criminal involvement and depression symptoms post-release. Finally, when youth were asked to freely identify a turning point in their life, only one-quarter of the sample identified incarceration as a turning point. Taken together, findings reveal that the incarceration experience can be abusive and how youth perceive this experience, along with the level of abuse, impacts post-release functioning.
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CHAPTER 1 – INTRODUCTION AND THEORETICAL FRAMEWORK

Understanding the processes of developmental continuity and discontinuity is central to the study of developmental psychology. Developmental continuity presumes that development unfolds over time in a continuous or stage-like fashion. Changes, then, are understood as building on each other in a quantitative fashion by preserving earlier developmental structures but allowing these structures to mature (Adolph & Robinson, 2008). On the other hand, a focus on the transformation of developmental functions implies a more qualitative change, such as a change in type or form (Miller, 2002).

These concepts of stability and change have been discussed extensively in the literature on antisocial behavior through the concepts of desistance and persistence from crime (Farrington, 2006; Loeber, 1982; Nagin & Farrington, 1992; Sampson & Laub, 1993). It is generally agreed that early antisocial behavior is the best predictor of later antisocial behavior (Moffitt, 1993; Patterson, 1993; Piquero, 2011), though it is also agreed that most antisocial children do not become antisocial adults (Robins, 1978). Yet, much empirical work on the topic has focused on continuities in antisocial behavior. Lynam expresses this sentiment by stating, “the golden grail of high-risk research has become the identification of the minority of children who are most likely to persist in their antisocial behavior from among the multitude of children who engage in some antisocial acts.” (Lynam, 1996, p.211). This emphasis on continuity has, at times,

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1 The terms antisocial behavior, delinquent behavior, and criminal behavior are used interchangeably. Antisocial behavior is the broadest overarching term. Delinquent behavior and criminal behavior are legal terms referring to illegal (and antisocial) behavior at different points in the life span. Delinquency refers to illegal acts before age 18 and criminal refers to illegal acts in adulthood. Because the current study will be sampling youth over 18 years old the term criminal trajectory is used most often.
neglected the process of change and the fact that most people do desist from criminal involvement (Laub & Sampson, 2003; Laub & Sampson, 2005).

The current dissertation focuses on both the process of change and continuity by exploring how the incarceration experience impacts post-release criminal involvement and related psychosocial adjustment (e.g., mental health and self-concept). This dissertation is comprised of two related studies, in both studies the viewpoints of previously incarcerated youth are highlighted; a perspective that is rarely documented. The first study evaluates the prevalence and type of abuse or trauma youth report during incarceration and how it may relate to post-release criminal involvement and mental health. The second study evaluates whether youth perceive incarceration as a turning point and if the quality of the incarceration experience moderates the impact of turning point effects on psychosocial outcomes.

**Literature Review**

**Continuity and Discontinuity in Criminal Trajectories**

The relation between age and crime shows that antisocial behavior increases from early childhood to adolescence, peaks in mid-adolescence, then shows a marked decline in late adolescence and early adulthood (Farrington, 2006; Moffitt, 1993; Piquero, 2011). Yet, a subgroup of offender does not follow this marked decline; they instead continue offending into and throughout adulthood. These individuals, known as persistent offenders, have gained attention from psychological and criminal researchers, with many theorists attempting to explain why persistent offenders continue to engage in antisocial
behavior (Loeber, 1982; Moffitt, 1993; Nagin & Farrington, 1992; Patterson, DeBaryshe, & Ramsey, 1989).

One of the most influential theories of criminal trajectories is Moffitt’s (1993) developmental taxonomy of antisocial behavior. Moffitt (1993) theorizes that there are two distinct types of criminal trajectories: the Adolescent-Limited (AL) and the Life-Course Persistent (LCP). The AL trajectory is characterized by discontinuity. Individuals who follow the AL trajectory are free of childhood antisocial behavior; it is not until adolescence when there is a qualitative shift towards some form of antisocial behavior. On the other hand, the LCP trajectory manifests antisocial behaviors from an early age, and these behaviors are continuous over time, though they do change in form. While LCPs behavior persists throughout the life course, ALs entrance into the antisocial arena is soon followed by an exit back to previous prosocial functioning. Moffitt’s (1993) dual taxonomy highlights both continuity and discontinuity but most of the empirical work following this theoretical framework has focused on the LCP trajectory (Moffitt & Caspi, 2001). Although the dual taxonomy includes a process of desistance (i.e., the AL trajectory), the offenders that are expected to desist may, instead, become ensnared in the high risk activities and consequences associated with continuity in offending such as the juvenile justice system (Moffitt, 1993). In this framework, the juvenile justice system would contribute to continuities in offending but not discontinuities.

The focus on continuity in antisocial behavior is seen in other theoretical frameworks as well. For instance, Patterson’s (1993) account of antisocial behavior leans heavily towards persistence or continuity (see also, Patterson, DeBaryshe, & Ramesy,
This theory is similar in many respects to the dual taxonomy as it posits two developmental models of antisocial trajectories: early-starters and late-starters (Patterson, 1993). It is expected that early-starters persist offending because they show early antisocial traits such as conduct problems which lead to problems among peers and at school, contributing to academic failure and eventually involvement with antisocial peers, substance use, and delinquency. Early-starters are also expected to be arrested earlier and more often contributing to more contact with the juvenile justice system.

While it is important to explain who persists and why they continue to engage in antisocial behavior, persistent offenders are in fact rarer than limited or non-persistent offenders. Not all children who show early antisocial traits and behaviors become persistent offenders and not all seemingly persistent offenders go on to offend throughout the life course (Robins, 1978). Indeed, most adolescent offenders do desist whether they showed early risk factors or not (Sampson & Laub, 2005), and it is argued that all offenders eventually desist, at some point in the life course (Laub & Sampson, 2003).

In exploring the factors that lead to desistance, perhaps the most influential theory is Sampson and Laub’s (1993) informal social control theory. Informal social control theory (Sampson & Laub, 1993; Laub and Sampson, 2008), which grew out of the Glueck & Glueck study (Glueck & Glueck, 1950), posits that the strength of social controls, which is referred to individual’s ties or bonds to social institutions, influences individual’s deviant behaviors. When the bond is weak, deviance is encouraged, and conversely, when the bond is strong, deviance is discouraged. The kinds of social controls shift across the life course. In adolescence the institutions of social control are
typically family, school, peers, and the juvenile justice system. As individuals move into adulthood the institutions of marriage, work, higher education, and the criminal justice system become more relevant (Samson & Laub, 1993). Social ties to these institutions across the life span then act as a buffer from delinquent or criminal behavior by pressuring individuals to conform to the standards and values of the institution. This work has been pivotal in exploring the process of desistance while drawing heavily from Elder’s (1989) life course theory of development and the concept of turning points (Elder, 1998; Laub & Sampson, 2008).

**Life Course Theory and Turning Points**

Life course theory (Elder, 1998), which focuses on individuals’ context and life experiences, provides a framework for understanding the processes of change and discontinuities in antisocial trajectories. According to life course theory, development is a life-long process, with timing of experiences and transitions playing an important role in the potential for change and discontinuities in individual’s life course. Individuals are viewed as agentic, playing an active role in constructing their life experiences and paths. The impact of life experiences depends, in part, on the timing of transitional experiences; certain life experiences may exert a stronger impact than others, given the timing of occurrence. Within this framework, life experiences that bring discontinuity in an individual’s trajectory are studied via the concept of turning points. Turning points are defined as life events that bring significant change in one’s trajectory or direction in life (Elder, Johnson, & Crosnoe, 2003).
Research on turning points has not gained as much momentum in psychological inquiry as it has in sociological work, quite possibly due to the fact that little is known about what constitutes a turning point and how turning points influence one’s behavior over time. Turning points can be initiated externally through events or experiences, as well as internally through a changed sense of awareness. In addition, how they affect one’s trajectory may be through changes in external (i.e., environment), or internal (e.g., self-concept, cognitive ability, professional skills) factors (Rutter, 1996). For instance, joining the military, which is an external event, is a known turning point, but its impact to alter individuals’ life paths was most likely maintained through its effect on internal social cognitive processes such as self-concept (Rutter, 1996). Thus, turning point experiences as well as the maintenance of the turning point effect can be either internal or external, or some combination thereof.

The complexity of turning points is further perpetuated by the wide range of types of potential turning points. These experiences may be within or outside of one’s control, they are not typically universal experiences, and they may include both negative and positive events (Rutter, 1996). A turning point is often subjectively defined after the fact by the individual who has experienced the event. Interestingly, however, empirical research on turning points has typically identified a specific event considered to be a turning point a priori then samples a population that has experienced the event (Rutter, 1996). Regardless of the variability of potential turning points, a defining feature of turning point events is that they provide an opportunity for change (Laub & Sampson, 1993; Rutter, 1996). However, not all individuals who experience an event may consider
it a turning point and experience subsequent change. Turning point effects are, in part, related to the agentic role that the individual plays in his or her life trajectory (Elder, 1998).

The centrality of human agency in life course theory can be seen in both the empirical and theoretical work on turning points. Theoretically, Elder’s ideas on turning points were heavily influenced by Bandura’s work on self-efficacy (Bandura, 2001; Elder, 1994), and shares commonalities with the idea of “fortuitous circumstances” (Bandura, 2001, pg.11) from social cognitive theory. Fortuitous circumstances are opportunities that are presented to individuals, often by chance, which can lead to a shift in the developmental trajectory. These can be as simple as choosing one job over another and meeting your future marital partner as a result, or missing a bus that then ending up in a horrible traffic collision. These events are not necessarily out of one’s control, but some individuals choose to capitalize on them while others do not. This agentic perspective provides a framework when considering individual differences in turning point effects; while subjective experiences of turning points may vary and many people may have similar experiences, it is what one draws from the experience that seems to constitute it as a turning point.

Life course theory and the concept of turning points remain a fertile area for developmental psychologists to understand change processes in developmental trajectories. Utilizing the life course framework, turning points have provided insight into the role major life events have on criminal trajectories. However, much remains to be
learned about the range of potential turning point events and the impact these events may have on psychosocial outcomes beyond criminal trajectories.

**Turning Points and the Juvenile Justice System**

Less is known about whether the juvenile justice system functions as a potential turning point for formerly incarcerated youth. Moffitt (1993) referred to juvenile incarceration as a potential snare for both persistent offenders and adolescent-limited offenders. She contends that youth may find it difficult to desist once they are system-involved because of the risk conferred with system-involvement such as the presence of antisocial peers and potential criminogenic effects or having a juvenile record that can limit later opportunities. For Moffitt (1993) then, involvement in the juvenile justice system should contribute to continuity, rather than desistance. Conversely, from the life course perspective the experience of incarceration could act as a turning point for either adolescent-limited or persistent offenders and encourage desistance. However, there are related factors to consider in evaluating the potential impact incarceration has on youth outcomes, including persistence or desistance from crime. In particular, the quality of the incarceration experience likely impacts whether they perceive the experience as a turning point or not.

What happens during incarceration from the viewpoint of youth is a relatively understudied topic although it likely impacts youth’s psychosocial outcomes. While incarceration aims to rehabilitate and promote positive changes in youth’s life trajectories, incarceration can also be a negative experience for youth. For the past forty years systemic violence in juvenile justice facilities has been legally documented in the
majority of states across the country (Mendel, 2011). It was not until recently that a systematic effort to document these conditions, beyond lawsuits, was established. Two national prevalence reports were released in 2010, the Survey of Youth in Residential Placement (SYRP; Sedlak & McPherson, 2010), and the Bureau of Justice Statistics’ National Survey of Youth in Custody (NSYC), which documents youth-report sexual victimization in juvenile facilities (Beck, Harrison, & Guerino, 2010), and these reports do not paint a favorable picture of juvenile facilities.

The NSYC, which represents over 26,000 youth nationwide, reported that over one in ten (12%) youth reported sexual misconduct by a staff member, and that youth with prior sexual assault histories were more than twice as likely to report sexual assault in their facility (Beck et al., 2010). The SYRP anonymously interviews a nationally representative sample (N=7,073) of youth in juvenile institutions. The SYRP found substantial cases of neglect; 22 percent of youth reported having to use dirty sheets, towels, or clothes, 38 percent reported having to use dirty bathrooms, and 14 percent reported rats or mice in their institution (Sedlak & McPherson, 2010). Also, more than one-third (35%) of youth in custody reported spending time in solitary confinement, and, although best practice guidelines discourages this practice, more than half (55%) of those youth reported solitary confinement exceeding 24 hours.

Outcomes of rampant lawsuits and these national surveys have summarized the conditions of confinement in juvenile facilities with the following problems; “Widespread physical abuse and excessive use of force by facility staff”, “An epidemic of sexual abuse”, “Rampant overreliance on isolation and restraint”, “Unchecked youth
on youth violence”, and “Frequent violence against staff” (Mendel, 2011, p. 6-8). While these findings are particularly disturbing, it is important to remember that not all incarcerated youth experience these abuses. There is significant variability in youth’s experiences of incarceration. For instance, in Laub and Sampson’s (2003) work they found that the Glueck men, who attended the same reform school that was known for being abusive, often had dramatically different experiences, and still others who in retrospect had divergent perspectives on similar experiences (Laub & Sampson, 2003). Thus, it is expected that the experience of abusive or traumatic events during incarceration will impact post-release psychosocial adjustment and contribute to variability in its identification as a turning point.

**Research Objectives**

The overarching goals of the current dissertation are separated into two studies with distinct but related lines of inquiry. The first study focuses on the experience of trauma or abuse during juvenile incarceration and how it relates to post-release adjustment. The second study builds on the first by evaluating how youth perceive their incarceration experience, using the concept of turning points, and whether the relation between perceptions of change following incarceration (e.g., turning point effects) and post-release adjustment depend on the experience of trauma or abuse during incarceration.

With these goals in mind, the following research questions are addressed: What types of abuse do youth experience during incarceration and how prevalent are these experiences (Study 1: Aim 1)? How is abuse during incarceration associated with
mental health problems and criminal involvement post-release (Study 1: Aim 2)? How much do previously incarcerated youth perceive change in their lives following (and because of) incarceration and how is this related to post-release adjustment (Study 2: Aim1)? Does the relation between perceived change and post-release adjustment depend on the experience of trauma during incarceration (Study 2: Aim 2)? Do youth subjectively identify incarceration as a turning point (Study 2: Aim 3)?

In the first study, it was hypothesized that youth would report various types of abuse experiences during incarceration and these experiences would negatively impact their psychosocial adjustment (i.e., criminal involvement and mental health) following incarceration. In the second study, it was hypothesized that some, but not all, youth would identify incarceration as a turning point. In addition, it was expected that youth who report high levels of incarceration trauma would be less likely to perceive the experience as a turning point. In other words, incarceration trauma would moderate the positive impact that turning point effects on psychosocial outcomes.
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CHAPTER TWO - VICTIMS BEHIND BARS: A PRELIMINARY STUDY ON ABUSE DURING INCARCERATION AND POST-RELEASE SOCIAL AND EMOTIONAL FUNCTIONING

Abstract

Knowledge of pre-incarceration experiences of abuse among youth in the juvenile justice system continues to grow, however we know very little about their experience of abuse during incarceration. Empirical evidence on abuse during incarceration is needed for policymakers to advocate on behalf of the safety of incarcerated youth. This preliminary study evaluated the prevalence of abuse during incarceration in secure juvenile facilities and examined how abuse during incarceration is associated with post-release adjustment among a sample of formerly incarcerated young adults (N=62; male = 75.8%). Nearly all youth experienced some type of abuse (e.g., physical abuse, sexual abuse, psychological abuse, denial of food, and excessive stays in solitary confinement) during incarceration (96.8%). The more frequent a youth was exposed to abuse during incarceration, the more likely they were to report posttraumatic stress reactions, depressive symptoms, and continued criminal involvement post-release. This association was significant even after controlling for pre-incarceration child maltreatment. We discuss policy implications to improve the safety of youth during incarceration.
Victims Behind Bars: A Preliminary Study on Abuse during Juvenile Incarceration and Post-Release Social and Emotional Functioning

A history of child maltreatment is a robust predictor of later involvement in the juvenile justice system (Chamberlain & Moore, 2002; Kerig & Becker, 2010; Widom & Maxfield, 1996; Wood, Foy, Layne, Pynoos, & James, 2002). For instance, youth with recent involvement in the juvenile justice system, either on probation or detained, have reported high rates of lifetime exposure to physical abuse (39.9%), neglect (30.1%), and sexual abuse (24.3%) (Dierkhising, Ko, Woods, Lee, Briggs, & Pynoos, 2013). While empirical knowledge of pre-incarceration experiences of abuse among youth involved in the juvenile justice system has grown significantly in the last decade, we know very little about the experience of abuse during incarceration. Recent prevalence studies point out the high rates of abuse during incarceration, showing that 10.3% of youth report sexual abuse by staff while incarcerated (Beck, Harrison & Guerino, 2010), and 13,000 claims of physical abuse by staff were reported by youth between 2004 and 2007 across the country (Mendel, 2011).

These alarming rates of abuse during incarceration affirm the need for continued reform efforts in juvenile justice facilities. However, in order for policymakers to continue to lobby and advocate for juvenile justice reform, particularly for the safety of youth during incarceration, more evidence is needed regarding the prevalence and impact of abuse during incarceration. This preliminary study examined the prevalence and types of abuse youth may experience during incarceration and how these experiences influence social and emotional functioning post-release. In the current study, the experience of
victimization during incarceration is explicitly referred to as abuse because we operate under the definition of child maltreatment defined by federal law, which states that child abuse is an act or a failure to act by a caregiver (Department of Health and Human Services: DHHS, 2008). Because incarcerated youth are wards of the court and legally in the custody of the juvenile court, the juvenile justice system and its employees are their legal caregivers.

**Conditions of Confinement: Prevalence of Abuse During Incarceration**

For the past forty years, systemic violence in juvenile justice facilities has been legally documented by court records from lawsuits in the majority of states across the country (Mendel, 2011). This documentation reveals, “states have been identified not for one or a handful of isolated events, but for sustained patterns of maltreatment” (Mendel, 2011, p.5). Yet it was not until recently that a systematic effort to document conditions of confinement, beyond lawsuits, was established. Two notable national prevalence reports were released in 2010, the Survey of Youth in Residential Placement (SYRP; Sedlak & McPherson, 2010), and the Bureau of Justice Statistics’ National Survey of Youth in Custody (NSYC; Beck, Harrison, & Guerino, 2010). According to the SYRP, which anonymously interviewed a nationally representative sample (N=7,073) of youth in juvenile institutions, more than one-third of youth in custody reported spending time in solitary confinement, and more than half (55%) of those youth reported solitary confinement exceeding 24 hours, which is against best practice guidelines (Sedlak & McPherson, 2010).
Prolonged stay in solitary confinement is a discouraged practice because it has been linked to suicide during confinement (Hayes, 2009: Gallagher & Dobrin, 2006). A national survey on suicide in juvenile facilities found that about half of suicide cases were on room-confinement at the time of death and many had histories of child maltreatment (Hayes, 2009). Although not explicitly evaluated, a history of pre-incarceration maltreatment may make youth more vulnerable to the stress of solitary confinement, particularly for youth with mental health problems. For instance, a Human Rights Watch (HRW) investigation found that solitary confinement often triggered traumatic reminders of prior trauma (HRW, 2012). One youth recounts, “Once you are confined the way I was, then any other confinement just triggers that experience -loss of sleep, all these different flashbacks of different bad events. You try to harness it, but you don’t know how or what’s going on or what’s happening” (HRW, 2012, p.35).

Sexual abuse has also been identified as a prevalent form of abuse during incarceration. The Prison Rape Elimination Act of 2003 (PREA) requires the Bureau of Justice Statistics (BJS) to statistically track and examine the prevalence and consequences of prison rape in both juvenile and adult facilities. The NSYC, which represents over 26,000 adjudicated youth nationwide, found that one in ten (10.3%) youth reported sexual misconduct by a staff member, and youth with prior sexual assault histories were more than twice as likely to report sexual assault in their facility than youth without a history of sexual assault (Beck et al., 2010). In community samples, a history of abuse puts adults/youth at risk for sexual abuse (Boney-McCoy & Finkelhor, 1995); it appears this association is also true in the context of juvenile facilities. The BJS
also reports that official allegations of sexual abuse in juvenile facilities averaged around 2,000 cases a year in 2005-2006, with 32% classified as staff sexual misconduct, 11% as staff sexual harassment, and 57% youth-on-youth sexual violence. (Beck, Adams, & Guerina, 2008). It is likely that these statistics are conservative because they only include official allegations (Dumond, 2000). Reporting procedures (e.g., grievance policies) for youth regarding staff misconduct are often problematic, resulting in underestimation of the prevalence rates. Staff may discourage youth from submitting grievances, grievances may be destroyed or ignored, and even when submitted no formal response or consequence may be offered (Burrell, 1999). Evidence shows that up to one-third of youth report problems with grievance policies, such as not knowing how to file one or being concerned about retribution if they do (Sedlak & McPherson, 2010).

While physical abuse is also likely during incarceration, accurate data have been scarce given the difficulties in documenting physical abuse perpetrated by staff. Importantly, the experience of physical abuse by staff is obscured by practices that are routine and legal in juvenile facilities (e.g., handcuffing, use of force, and restraint). Because detention staff work in a potentially unsafe environment, they are given the legal authority to use force. It is only when these practices are overused or misused that they are then classified as ‘excessive use of force’ (America Correctional Association: ACA, 2012) and become illegal. The ACA current policy statement on the use of force indicates:

“Use of force consists of intervention with an offender to promote safety, control behavior, and enforce order. Use of force includes use of restraints
(other than for routine transportation and movement), chemical agents, electronic devices and weapons. Force is justified only in instances of self-defense, protection of others, protection of property, prevention of escapes, and maintaining or regaining control, and then only as a last resort and in accordance with appropriate statutory authority.” (ACA, 2012, pg. 31).

This description provides a starting point, but is, unfortunately, vague and left open to interpretation creating a significant challenge for facility administrators to describe and enforce standards for their staff.

Although data on staff-on-youth physical abuse are scarce, surveys have captured more general indicators of physical abuse and youth’s perceptions of excessive use of force. Half of youth surveyed in the SYRP reported that staff inflicted some type of punishment without cause and 28% of youth reported experiencing some type of restraint, including handcuffs, restraint chair, and/or chains (Sedlak & McPherson, 2010). Additionally, 28% of youth reported fear of being attacked from anyone while incarcerated, but 22% were fearful of attack from staff. Many incarcerated youth are vicariously exposed to violence through their fellow residents’ experiences; about one-third of youth reside in facilities where other residents had been pepper sprayed and 29% reside in facilities where fellow residents had been placed in a restraint chair (Sedlak & McPherson, 2010).
Conditions of Confinement: Litigation-Based Reform Efforts

Our knowledge is still limited regarding what is actually happening in the facilities youth are incarcerated. In light of the dearth of empirical work, it is informative to review reform efforts that have stemmed from litigation against facilities. A number of notable federal court rulings have impacted the treatment of incarcerated youth and declare the rights of youth to be free from abuse while incarcerated. In general, courts around the country have determined that the Due Process Clause of the Fourteenth Amendment, which implicitly encompasses the protections of the Eighth Amendment and protection from Cruel and Unusual Punishment, is the appropriate standard for reviewing juvenile conditions of confinement. Adult inmates are protected from Cruel and Unusual Punishment, but children are entitled to a higher level of care because they are adjudicated as juveniles and not convicted of a crime (Burrell, 1999; HRW, 2012).

Litigation-based reform efforts have been essential to the juvenile justice reform; although they typically occur after abuse has occurred by drawing on the civil or constitutional rights’ of youth. The Civil Rights of Institutionalized Persons Act (CRIPA) was enacted in 1980, which enabled a civil rights division of the Department of Justice (DOJ) to use litigation as a means to improve conditions of confinement in both adult and juvenile facilities. It was not until 1998 that the DOJ became more active in addressing the safety of youth in juvenile facilities when they investigated facilities in Georgia (US v. Georgia). Specifically, the DOJ alleged that the care of youth was unconstitutional, and wards were denied sufficient special education, medical, and mental health services and the facility staff used excessive force for disciplinary actions (Bell, 2012). After this suit
was filed, the parties agreed upon a plan to improve the facilities and they settled out of court that year. CRIPA investigations and associated court cases have been a catalyst for change in many states.

Litigation-based reform and national prevalence studies have become a powerful tool in advocacy efforts to protect the safety of youth; however, there are still limitations with these approaches. Prevalence studies highlight the issue of maltreatment during incarceration but do not clearly explicate the various types of abuse that may be experienced, particularly physical abuse by staff. Litigation-based reform rarely utilizes a prevention-based framework, though it can prevent future abuses in specific facilities, it occurs after maltreatment has been reported and substantiated. Litigating is also extremely expensive for facilities that are already crippled by limited resources and funding and since the passing of the Prison Litigation Reform Act (1995) and a 2003 Court ruling that limited attorney compensation fewer lawsuits have been brought against facilities (Mendel, 2011). Most importantly, prevalence studies and litigation have yet to evaluate how these experiences impact post-release functioning, a critical component in advancing reform.

Social and Emotional Functioning Among Incarcerated Youth

Although direct evidence regarding the impact of abuse during incarceration on social and emotional functioning is scarce, the abundant research on child maltreatment has consistently documented social and emotional problems following the experience of child maltreatment. For instance, research on the cycle of violence has shown a consistent relation between child maltreatment and arrest as a juvenile (Widom & Maxfield, 1996).
More generally, child maltreatment is associated with delinquent behaviors (Lansford, Miller-Johnson, Berlin, Dodge, Bates, & Pettit, 2007; Maas, Herrenkohl, & Sousa, 2008), and puts adolescents at risk for a variety of emotional problems, particularly posttraumatic stress disorder and depression (Margolin & Gordis, 2004). Rates of mental health disorders among incarcerated youth are also higher than the general population (Ford, Chapman, Hawke & Albert, 2007). Representative studies have found that up to 70% of incarcerated youth meet criteria for a mental health disorder and many suffer from comorbid mental health disorders (Schufelt & Cocozza, 2006; Teplin, Abram, McClelland, Dulcan, & Mericle, 2002; Wasserman, McReynolds, Ko, Katz, & Carpenter, 2005). Only one study, to our knowledge, has evaluated the persistence of mental health problems following incarceration. Teplin and colleagues (2012) prospectively followed a random sample of nearly 2,000 detained youth in Cook County, Illinois to evaluate the rates of mental health disorders up to five years post-release (Teplin, Welty, Abram, Dulcan, & Washburn, 2012). Their findings reveal that mental health and behavioral disorders generally decreased over time; however, previously incarcerated youth maintained high rates of disorders with up to 50% of participants meeting criteria for one or more mental health disorders at follow up.

Importantly, incarcerated youth often enter the juvenile justice system with a history of child maltreatment, which further complicates our understanding of how abuse during incarceration may impact post-release functioning. Research on crossover youth (i.e., youth who are involved in both child protective services and the juvenile justice system) highlights the association between child maltreatment and juvenile justice; up to
42% of justice-involved youth also report contact with the child welfare system or child protective services (Dierkhising et al., 2013; Herz, Ryan, & Bilchik, 2010). Given the intertwined nature of child maltreatment and incarceration it is important to take abuse before incarceration into account when studying the effect of abuse during incarceration.

**The Current Study**

This preliminary study evaluates the prevalence of abuse during incarceration and examines how the experience of abuse is associated with post-release criminal involvement and mental health functioning (i.e., posttraumatic stress reactions and depressive symptoms) among a sample of formerly incarcerated young adults. The primary questions guiding this study include: 1) What types of abuse do youth experience during incarceration?; 2) How prevalent are these abuse experiences?; and 3) How is abuse during incarceration associated with mental health problems and criminal involvement post-release? We hypothesized that abuse during incarceration would be prevalent and these experiences would be associated with increased rates of social and emotional maladjustment, including higher levels of criminal involvement, posttraumatic stress reactions, and depressive symptoms post-release. Pre-incarceration histories of child maltreatment were included as a covariate to tease apart the unique impact of abuse during incarceration.

**Methods**

**Participants**

The current study is based on data from a sample of formerly incarcerated young adults (N = 62; male = 75.8%). Participants were recruited from a voluntary reentry
program in Southern California. The reentry program provides services for youth and adults who are involved in gangs, have been incarcerated, or (typically) both. In this study, participants who met the following criteria were interviewed: 1) participants who have been incarcerated in a juvenile institution at some point in the twelve months prior to the interview; and 2) participants who were at least 18 years of age at the time of the assessment. Age of the participants ranged between 18 and 20, with a mean age of 18.

The ethnic breakdown of the sample was Hispanic/Latino (83.9%) followed by African-American (11.3%), and Mixed/Other (4.8%). Most of the youth lived with their mother (41.9%) followed by both parents (22.6%), another relative(s) (14.5%), or in one of many other living situations (e.g., on their own, with a girlfriend or boyfriend, with friends, with father, with guardian, or other). Nearly a quarter of youth (24.2%) had at least one child. Most youth were employed (73.8%), 29% had a high school diploma, and 66.1% were currently in school (e.g., still in high school, GED classes, community college, or trade school).

On average, participants were first arrested at age 13.78 (SD = 1.75), ranging from 9 to 17 years old. Approximately 45% of participants were arrested between one and five times at the time of the interview, 32.3% between six and ten times, 9.7% between eleven and fifteen times, 6.5% between sixteen and twenty times, and 3.2% more than twenty times. Two participants could not recall how many times they were arrested. Participants were incarcerated on average 4.2 times (SD = 2.41, range = 1-10) in a juvenile facility. Types of facilities ranged from probation camps, detention centers, California Youth Authority, and residential treatment centers. Total time spent
incarcerated at the time of the interview was approximately 17 months or 68.31 weeks, ranging from 2 weeks to 6.25 years.

The interview was conducted on average 6 months ($M = 5.65$, $SD = 4.15$) after the participants were released from the last juvenile facility. Six participants had also been incarcerated in an adult county jail between the time of the interview and the time since release from a juvenile facility. Only two individuals stayed in an adult facility longer than 2 weeks (i.e., 6 & 8 months).

**Recruitment and Interview Procedures**

An on-site liaison between the interviewer and the program aided in recruitment by announcing the interview to people involved in or on the waitlist for reentry services (e.g., job placement, mental health services, and life skills classes). When someone indicated interest in participating and signed the Consent form, a questionnaire was completed in the presence of an interviewer in a private office. The interviewer was present at each individual interview to answer questions and walk the participant through the questionnaire. Once the questionnaire was completed, the interviewer handed the participant an unmarked manila envelope within which they placed their questionnaire. The interviewer then placed the envelope with the questionnaire into a locked file folder, separate from the Consent forms. The locked folder was not opened until there were at least 20 interviews in the folder so that the interviewer could not link a participant’s identity to a questionnaire. This procedure was considered ideal in maintaining anonymity of participants’ from all parties including the interviewer in light of the sensitive nature of the questions. Participants received a $25 gift card incentive upon
completion of the interview. The protocols were approved by the Institutional Review Board at the institution of the first author.

**Measures**

**Abuse during incarceration.** Nine questions were developed for the current study, as there is no existing standardized assessment of abuse during incarceration for juveniles. Building upon measurement techniques for child maltreatment and community violence (Finkelhor, Ormrod, & Turner, 2009; Richters & Martinez, 1993; Richters & Saltzman, 1990), the items were designed to capture various types of abuse as perpetrated by staff and peers (e.g., physical abuse, sexual abuse, emotional abuse, and neglect). Participants’ responses included reference to all incarceration experiences rather than a specific stay or facility. In addition, each question was followed by (a) whether this happened to the participant directly (direct exposure), (b) whether they saw this happen to someone else (witnessed exposure), and (c) whether they heard about it happening to someone (vicarious exposure). Assessing each level of exposure (e.g., witnessed, vicarious, and direct) allowed for a better understanding of the severity and prevalence of abuse. These experiences included: 1) getting beaten up, hit or physically hurt by a staff member, 2) getting beaten up, hit, or physically hurt by another minor, 3) being left in solitary confinement for more than a day at a time, 4) a staff member calling a minor by a racist name, another rude or mean name, or say other mean things about a minor, 5) minors being denied their dinners or food, 6) unwanted sexual contact by another minor, 7) unwanted sexual contact by a staff member, 8) sexual harassment by a staff member, and 9) sexual harassment by another minor. Response options were based on a four-point
Likert scale (0 = Never, 1 = Once, 2 = A couple times, and 3 = Often). The scores on each item were summed to create direct, witnessed, and vicarious exposure summed scores, which were used in the prevalence analyses. We also computed the total abuse score that aggregated all types of abuse and we used this aggregate score in the regression models. The abuse during incarceration scale yielded a Cronbach alpha of .945. The scores were transformed using a square root transformation to correct a negative skew.

In addition, one open-ended question was asked, “Is there anything else that happened in camp/detention that really bothered you or something that just seemed wrong to you?” Participants wrote out their response freely. A quarter of youth responded to this open-ended question; responses are interspersed with the results as illustrative examples.

**Posttraumatic stress reactions.** The UCLA PTSD Reaction Index-Adolescent Version (PTSD-RI: Steinberg, Brymer, Decker, & Pynoos, 2004) was used to assess posttraumatic stress reactions. The PTSD-RI is well validated and widely used, with Cronbach alpha falling in the .90 range and test re-test reliability ranging from good to excellent (Steinberg et al., 2004, Steinberg, Brymer, Kim, Briggs, Ippen, Ostrowski et al., 2013). The PTSD-RI includes both an assessment of trauma exposure and traumatic stress reactions; only the traumatic stress reactions scale was used for the current study. This 22-item symptom checklist assesses Criterion B, C, and D of the diagnostic criteria of PTSD as described by the Diagnostic and Statistical Manual of Mental Disorders (DSM-IV-TR; 2004). The 17 items that map directly onto the DSM-IV-TR were summed to indicate a posttraumatic stress reaction score, as described by Steinberg and colleagues.
(Steinberg et al., 2004). Participants reported how much of the time during the past month they experienced the symptom using a Likert scale with 0 = *Never*, 1 = *A little (about two times a month)*, 2 = *Sometimes (one to two times a week)*, 3 = *A lot (3 to 4 times a week)*, and 4 = *Most of the time (Almost everyday)*. A cutoff score of 38 and above is recommended to indicate clinically significant posttraumatic stress reactions (Steinberg et al., 2004). For the current study the 17-items yielded a Cronbach alpha of .943.

**Depressive symptoms.** The Center for Epidemiological Studies Depression (CES-D) Scale was used (Radloff, 1977) to assess depression symptoms. The CES-D is a well-validated scale for depression among adolescents and young adults (Radloff, 1991), and was developed to detect depression in community samples. This 20-item scale assesses symptoms within the last week and includes four response options of 0 = *rarely or none of the time (less than 1 day)*, 1 = *some or a little of the time (1-2 days)*, 2 = *occasionally or a moderate amount of time (3-4 days)*, and 3 = *Most or all of the time (5-7 days)*. The CES-D has shown very good reliability with a Cronbach alpha of .85 on average in community samples (Radloff, 1977) and .772 in the current sample. The CES-D is considered a screening tool for depression symptoms, not to be used for diagnostic purposes, and provides a continuous symptom severity score with a cutoff score of 16 and above indicating mild to significant depression symptoms (Radloff, 1991). We transformed the score using a square root transformation to adjust the negative skew of the variable.
**Post-release criminal involvement.** A 12-item self-report of criminal behavior assessed involvement in crime post-release (prior 12 months or less). Questions were adapted from the RAND Adolescent Outcomes Project (Morral, McCaffrey, & Ridgeway, 2004) and cover a broad range of illegal activities including: aggravated assault, armed robbery, burglary, DUI, theft, simple assault, stealing, drug sales, vandalism, strong-arm robbery and grand theft auto. Response options included 0 = No, not at all, 1 = Yes, just once, and 2 = Yes, more than once. Items were summed across crimes for an index of frequency of criminal involvement post-release. This measure yielded a Cronbach alpha of .897. Because this variable was negatively skewed we transformed it using the square root transformation.

**Covariates.** Child maltreatment was included as a covariate and was assessed using the Initial Trauma Review (Briere & Lanktree, 2008). Using a yes-or-no format, participants indicated whether they have experienced physical abuse and/or sexual abuse during childhood. Physical neglect was assessed using three questions from the Child Trauma Questionnaire (CTQ: Bernstein & Fink, 1998; Scher, Stein, Asmundson, McCreary, & Forde, 2001). These questions asked participants to reference “when you were growing up.” The response options range from Never true to Very often true on a five-point scale. To make the physical neglect scale equivalent to other forms of abuse assessed in the Initial Trauma Review, we dichotomized the physical neglect scale using a conservative scoring system; those who indicated often true or very often true to all three of the questions were classified as physically neglected, and others were classified
as no neglect. Child physical abuse, child sexual abuse, and physical neglect were summed to create a child maltreatment composite score.

Results

Type and Prevalence of Abuse During Incarceration

When all types of abuse (i.e., direct, witnessed, and vicarious) were combined, nearly all youth (96.8%) experienced at least one type of abuse during incarceration. The majority of youth reported some form of direct abuse during incarceration (77.4%); an account by one youth described, “I got my collar bone broken by a staff at camp.” Nearly all youth reported witnessed and vicarious exposure (95.2%; 93.5%, respectively); for example, one youth reported “a staff picked up a kid and slammed him to the ground.” Figure 1 presents the percentage of youth who experienced specific types of abuse during incarceration. Without taking frequency into account, excessive use of solitary confinement (54.8%) and peer physical assault (54.8%) were the most common forms of direct abuse. One youth recounted, “Staff allowing fights or turning their heads” and another stated, “Lots of fights that could have been controlled.” Psychological abuse by staff (45.2%) was third most prevalent, with one youth stating, “Some staff are unfair and use the power of the pen to verbally challenge us. In other words, power tripping.”

For witnessed abuse, exposure to peer physical assault was most common (82.3%), followed by physical abuse by staff (70.5%). For instance one youth simply described, “staff fighting inmates.” Finally, excessive use of solitary confinement (66.1%) was third most common among witnessed abuse. Peer physical assault was the most common type of vicarious exposure (87.1%), followed by physical abuse by staff.
(77.4%), and excessive use of solitary confinement (71%). Other responses that indicated additional abuses or frustrations were: “Many staff members were involved in gangs themselves. Some staff members would have verbal sexual harassment towards minors. Lots of fights that could have been controlled.” and “Some of the staff did extra’s, or made us do unnecessary things.”

**Figure 1.** Prevalence of Abuse During Incarceration by Type of Abuse.
On average, the frequency of abuse youth experienced during incarceration was 4.73 (SD = 4.72, range = 0 – 21) for direct abuse, 7.39 (SD = 5.56, range = 0 - 22) for witnessed abuse, and 10.07 (SD = 7.02, range = 0 - 26) for vicarious abuse. When all questions were summed to create the total frequency score for abuse during incarceration, the average of abuse frequency was 22.18 (SD = 16.12, range = 0 - 66). This summed total score was used in the following analyses.

**Abuse During Incarceration and Post-Release Social and Emotional Functioning**

Child maltreatment (pre-incarceration) was prevalent with 38.7% of youth experiencing at least one type of maltreatment (e.g., physical abuse, sexual abuse, or neglect). Nearly a third (33.9%) of youth indicated mild to significant depression symptoms, and 14.5% of youth indicated clinically significant posttraumatic stress reactions. As shown in Table 1, bivariate correlations revealed that abuse during incarceration was positively associated with child maltreatment (r = .30, p < .05) and all post-release adjustment problems including posttraumatic stress reactions (r = .47, p < .01), depression symptoms (r = .27, p < .05), and criminal involvement (r =.37, p < .01). Gender was not significantly associated with abuse during incarceration, posttraumatic stress, criminal involvement, or depressive symptoms. Posttraumatic stress reactions were positively correlated with depression symptoms (r = .61, p < .01) and child maltreatment (r = .32, p < .05). Posttraumatic stress and depression symptoms were also positively associated with post-release criminal involvement (rs = .42 and .37, ps < .01). Time spent incarcerated was not significantly associated with any of the variables at the bivariate level.
<table>
<thead>
<tr>
<th>Variables</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>6</th>
<th>7</th>
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</thead>
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<td>.00</td>
<td>.17</td>
<td>.32</td>
<td>.09</td>
<td>.18</td>
<td>.14</td>
<td>.09</td>
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<td></td>
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<tr>
<td>3. Time Incarcerated</td>
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<td>.02</td>
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<td>4. PTSD Symptoms</td>
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<td>.32</td>
<td>-.06</td>
<td></td>
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<td></td>
<td></td>
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<tr>
<td>5. Depression Symptoms</td>
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<td>.14</td>
<td>.09</td>
<td>.61</td>
<td>.42</td>
<td>.37</td>
<td></td>
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<tr>
<td>6. Criminal Involvement</td>
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<td>.18</td>
<td>-.25</td>
<td>.42</td>
<td>.37</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7. Abuse During Incarceration</td>
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<td>.11</td>
<td>.47</td>
<td>.27</td>
<td>.37</td>
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<tr>
<td>M*</td>
<td>.25</td>
<td>.55</td>
<td>68.5</td>
<td>20.3</td>
<td>3.6</td>
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<td>60.9</td>
<td>14.7</td>
<td>1.1</td>
<td>1.4</td>
<td>16.2</td>
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</tbody>
</table>

Note. † p < .10; * p < .05; *p < .01.

*Means and standard deviations are based off raw scores.
Results of the hierarchical regression models are shown in Table 2. Child maltreatment, gender, and time incarcerated were included as covariates to control for their potential impact on the dependent variables. In Step 1, child maltreatment was significantly and positively associated with posttraumatic stress ($\beta = .32, p < .05$) but not significantly associated with criminal involvement or depression symptoms. Gender and time incarcerated were not associated with any post-release adjustment indices.

Controlling for child maltreatment, gender, and time incarcerated in Step 2, abuse during incarceration was significantly and positively associated with posttraumatic stress ($\beta = .42, p < .01$), depression symptoms ($\beta = .29, p < .05$), and criminal involvement ($\beta = .36, p < .01$). In Step 2 time incarcerated was also associated with criminal involvement in the negative direction ($\beta = -.27, p < .05$).
Table 2

Hierarchical regression models predicting post-release social and emotional functioning from gender, child maltreatment, time incarcerated, and abuse during incarceration.

<table>
<thead>
<tr>
<th>Predictor</th>
<th>PTSD</th>
<th>R^2</th>
<th>Depression</th>
<th>R^2</th>
<th>Criminal Involvement</th>
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<tr>
<td></td>
<td>β</td>
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<td>β</td>
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<td>0.188</td>
<td>0.233*</td>
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</tr>
<tr>
<td>Step 2</td>
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<td></td>
<td>0.122*</td>
<td></td>
<td>0.269*</td>
<td>0.356**</td>
</tr>
<tr>
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<td>-0.099</td>
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</tr>
<tr>
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<tr>
<td>Incarceration</td>
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<td>0.293*</td>
<td>0.356**</td>
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</table>

Note. †p < .10; * p < .05; **p < .01
Discussion

Findings from this preliminary study reveal that abuse during incarceration is pervasive in that the majority of youth directly experience abuse, witness abuse of others, and vicariously experience abuse by hearing about it happen to others. Importantly, we also found that abuse during incarceration is related to poor post-release social and emotional functioning. Specifically, more frequent reports of abuse exposure during incarceration are positively associated with posttraumatic stress reactions, depression symptoms, and continued criminal involvement post-release. These findings held even after controlling for prior child maltreatment and time spent incarcerated.

Our results also indicate that youth experience various types of abuse while incarcerated. Much of the media and legal attention has focused on sexual abuse and solitary confinement. However, our findings indicate a wide range of abuse types are prevalent among incarcerated youth. In fact, sexual abuse and sexual harassment were the least prevalent type of abuse reported compared to all other types of abuse measured. Although the participant’s responses were anonymous, it is possible that participants were reluctant to disclose sexual abuse which may have impacted our prevalence rates. Nevertheless, the prevalence of sexual abuse/harassment and solitary confinement were lower than or at least equally common to the abuse types that are often neglected in research, i.e., denial of food and psychological abuse. These findings do not, by any means, negate the importance of addressing sexual abuse and seclusion during incarceration, but they suggest that researchers and policymakers need to be aware of the presence of other, more prevalent forms of abuse as well.
According to these data, the most prevalent forms of abuse during incarceration are physical abuse and assault. Physical abuse by staff was reported by approximately one-third of youth who directly experienced physical abuse (34.4%), and more than two-thirds reported either witnessing or hearing about physical abuse happen to others (71.9%, 78.1%, respectively). Although we do not have relevant national prevalence rates to compare this rate to, as it is not explicitly captured in prevalence studies, this rate is alarmingly high. The high prevalence of physical abuse by staff may be due to physical incidents that would be considered legal according to the definition of the use of force (ACA, 2012). Unfortunately, our data are not designed to differentiate the use of force as a way of managing order in facilities vs. physical assault. Nonetheless, it is important to note that physical abuse during incarceration, regardless whether it is legal or not, contributes to poor social and emotional functioning post-release. This suggests that youth’s perceptions of the abuse, or use of force, are related to youth functioning regardless of its legality. Future research should include official incident reports along with self-reports of physical abuse to further disentangle how use of force is perceived by youth and how it impacts their functioning.

Peer physical assault was highly prevalent at each level of exposure (e.g., vicarious, witnessed, and direct). The high exposure to peer physical assault may be related to a lack of staff supervision, as many facilities struggle with adequate staffing – especially in larger facilities such as those in Southern California. Interestingly, however, youth’s qualitative responses revealed that some staff knowingly allowed fights between youth (e.g., “Staff allowing fights or turning their heads” and, “Lots of fights that could
have been controlled.”). This finding has an important implication because youth-on-youth violence statistics may need to be considered in the context of staff supervision and oversight.

In addition, we found a high prevalence of histories of child maltreatment, with two in five youth reporting the experience of child maltreatment outside of juvenile facilities. We also found a positive association between abuse during incarceration and prior child maltreatment, indicating that those incarcerated with histories of maltreatment are more likely to report abuse during incarceration. This may indicate vulnerability to revictimization. Previous research would support this hypothesis as sexual abuse victims have been found to be more vulnerable to sexual abuse in juvenile facilities (Mendel, 2010), and, more generally, a history of victimization is an established risk factor for future victimization (Finkelhor, Ormrod, & Turner, 2007). Incarcerated youth often experience other types of victimization as well, such as community or school violence (Wood et al., 2002). These additional trauma types should be included in future research to examine whether additional victimization experiences further increase youth’s vulnerability to abuse during incarceration.

Interestingly, time youth spent incarcerated was not associated with the frequency of abuse during incarceration. Though this finding is tentative and requires further investigation, it is possible that the type of facility they were incarcerated in rather than the duration of incarceration may be more important. Unfortunately, we were not able to control for type of facility but future research should consider this variable in evaluating the frequency of abuse incidents during incarceration. However, it is noteworthy that
duration of incarceration was related to post-release criminal involvement in the negative
direction; the longer a youth was incarcerated the less likely they were to be involved in
post-release criminal involvement. This finding is contradictory to the literature on the
criminogenic effects of incarceration (Vieraitis, Kovandzic, & Marvell, 2007). Again,
this may be due to the varying facility types included in the study, as previous research
has shown criminogenic effects can vary by the sanction imposed on youth (Gatti,
Tremblay, & Vitaro, 2009).

Most importantly, we found that abuse during incarceration was associated with
social and emotional maladjustment after release from facilities. Specifically, youth who
experience and/or perceive abuse during incarceration are more likely to recidivate and
experience poor mental health functioning post-release, above and beyond prior child
maltreatment experiences. These findings have implications for policy efforts targeting
the reduction of abuse during incarceration.

Policy Implications

Based on our findings, continued reform is needed in order to improve the safety
of youth during incarceration. The Prison Rape Elimination Act’s (PREA) national
standards provide a useful framework for addressing the safety of incarcerated youth. The
PREA standards state that youth safety will be improved by increasing access and
oversight of facilities, focusing on staff training, and facilitating effective reporting and
grievance policies (DOJ, 2012). While these standards are meant to address sexual abuse
in facilities, our findings reveal that abuse during incarceration expands beyond sexual
abuse, and many of the standards could be applied to prevent other types of abuse.
An efficient system that allows youth to report abuse is critical to improving safety. Currently, standard practice for youth to report abuse is to file a grievance, yet grievances may not always result in action (Burrell, 1999). Proper use and immediate follow-up on filed grievances is imperative in increasing awareness of abuse and creating a safe environment. As noted in the PREA standards, the handling of grievances can be improved through the establishment of an external, unbiased entity devoted to reviewing grievances and ensuring follow-up action. Given that participants in this study were willing to share their difficult experiences with a third party (i.e., the study interviewer), incarcerated youth may be willing to report maltreatment without fear of retaliation if a third party is made available to them. Equally important as the efficiency and transparency of grievance policies is youths’ perception of these policies. In fact, in adult facilities, an increase in prison violence has been linked to inefficient handling of grievances such as late replies or high rates of rejections of complaints (Bierie, 2013). Youth need to feel confident that there will be no retribution, that their report will instigate action, and that they will be informed of the status of their report in order to feel safe.

Creating a safe environment also includes ensuring adequate staff and staff training (Burrell, 1999; DOJ, 2012; Mendel, 2011). The PREA standards for training are focused on sexual abuse, but the emerging framework of trauma-informed juvenile justice practices provides relevant recommendations for staff training (Dierkhising et al., 2013; Griffin, Germain, & Wilkerson, 2012; Marrow, Knudsen, Olafson, & Bucher, 2012; Miller & Najavits, 2012). Trauma-informed juvenile justice practice includes staff
training on trauma and its effects, de-escalation techniques, and the identification of trauma reactions and triggers. This knowledge enables staff to frame youth behavior in context so that they can respond in the least restrictive manner and employ de-escalation techniques that limit the use of seclusion, restraint, and verbal aggression—all techniques that can be considered abusive by youth (Ford & Hawke, 2012; Marrow et al., 2012; Marrow, Benamati, Decker, Griffin, & Lott, 2012). Importantly, implementing trauma-informed practices in a juvenile justice setting has been found to reduce staff injury, youth threats towards staff, use of physical restraints, and seclusion rates compared to treatment as usual (Ford & Hawke, 2012; Marrow et al., 2012). Future research should continue to evaluate the effectiveness of trauma-informed practices on reducing the use of force in juvenile facilities.

While it is important to have administrative policies in place that protect incarcerated youth, it is also important to allow outsiders in to facilities to enhance youth safety. For instance, PREA requires regular audits of facilities by an outside party and also a PREA advocate who can gain regular access to the facility. These advocates could be used to protect youth from abuse beyond sexual abuse. Key stakeholders that govern access to facilities (e.g., juvenile court judges, probation departments, and public defenders) can encourage and streamline access to juvenile facilities for community partners and advocates when appropriate. In doing so, if youth are being harmed during incarceration, this information can be more accessible to ensure a timely response and improve youth’s safety.
Study Limitations

The findings from the current study should be considered in light of its limitations. Primarily, this is a preliminary study with a small sample size that is geographically restricted limiting its generalizability. Because we sampled youth in Southern California, estimates of abuse during incarceration may be higher compared to other regions, as Southern California houses the largest juvenile justice system in the country and has historically struggled with inadequate treatment of youth. Replication in larger and diverse samples is needed. Though we designed the study to be sensitive to the sequence of events, the study is cross-sectional, which does not allow for causal interpretations. It would be ideal to assess youth during incarceration and then prospectively follow up with them post-release.

We were not able to obtain mental health functioning prior to incarceration, which likely contributes to post-release mental health functioning. Additionally, the study includes retrospective self-report data which relies on youth’s recollection of their incarceration experiences. Another related limitation is the problems with accurately recalling the timing of events, particularly given that nearly all the participants recounted events from multiple different stays in facilities. Future research should consider multiple methods, if possible, by including observations of detention centers, data from detention staff, and concurrent self-reports of abuse in the analysis. This would enrich the understanding of the scope of abuse during incarceration. Official records could help determine if youth filed grievances regarding the abuse as well as legal documentation regarding the youth’s history as a perpetrator of abuse. We also believe that there are
additional covariates that will be informative in future research, such as post-release social supports, treatment during and/or after incarceration, and intergenerational incarceration. Despite the limitations of this study, the current findings provide crucial preliminary results on the nature and scope of abuse during incarceration and its relation to post-release functioning in a hard-to-reach population.

**Conclusion**

Preventing abuse during incarceration should be of primary focus for all juvenile justice stakeholders. Abuse during incarceration violates the civil and constitutional rights of youth. Furthermore, in this preliminary study we find that it impacts their post-release functioning, as evidenced by increased criminal involvement and mental health problems post-release. It is hoped that these preliminary findings provide support for continued system reform and a foundation for advocates to call for immediate action at the policy level. Future research should replicate these findings in a large and diverse sample to continue to shed light on the experiences of abuse during incarceration and explore ways to improve safety in juvenile facilities. Finally, we hope that conceptualizing these experiences as abuse allows for a shift in the perception of this problem as nearly everyone in the current study experienced some form of abuse during incarceration.
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CHAPTER 3 – SNAKE OR TURNING POINT? AN EXPLORATION OF CHANGE AND CONTINUITY FOLLOWING JUVENILE INCARCERATION

Abstract

Using a mixed-methods design, the primary aim of the current study was to assess whether the juvenile justice system functions as a potential turning point in offenders’ life course, with special attention to the quality of the incarceration experience and the variability in how one perceives the incarceration experience as a catalyst for change. Participants included formerly incarcerated youth (N = 62, mean age = 18), primarily Hispanic/Latino (82.9%) males (75%). Findings indicated significant variability, from both quantitative and qualitative approaches, in whether youth perceive incarceration as a turning point. In addition, perceptions of incarceration as a mechanism for change had differential effects on psychosocial adjustment post-release. Importantly, the effect of youth’s perceptions of positive change following, and because of, incarceration on depression and criminal involvement depended on the level of incarceration trauma youth experienced. Juvenile justice practices that help youth alter their criminal trajectory following incarceration, such as improved safety during incarceration, may promote incarceration as a turning point.
Snare or Turning Point? An Exploration of Change and Continuity Following Juvenile Incarceration

The concepts of stability and change in criminal behavior have been discussed extensively in the literature. Some scholars focus on developmental continuity, or persistence, in criminal behavior (Farrington, 2006; Loeber, 1982; Nagin & Farrington, 1992) while others emphasize change, or desistance from crime (Farrington, 2006; Laub & Sampson, 2003; Sampson & Laub, 1993). The process of persistence and desistance are both critical in understanding trajectories of criminal behavior; however, much of the empirical work has focused on the examination of continuity in antisocial behavior (Farrington, 2006; Moffitt, 1993) despite the fact that most people do desist from criminal involvement over time (Laub & Sampson, 2003; Laub & Sampson, 2005).

The current study evaluated the process of change following juvenile incarceration using the concept of turning points (Elder, 1998). Turning points are defined as life events that bring significant change in one’s trajectory or direction in life (Elder, Johnson, & Crosnoe, 2003). It is hypothesized that turning points serve as points of potential transition that redirect one’s previous trajectory, bringing a dynamic shift in one’s life course (Elder, 1998). In this study, we consider whether the juvenile justice system functions as a potential turning point in offenders’ life course, with special attention to the quality of the incarceration experience and the variability in how one perceives the incarceration experience as a catalyst for change.
**Life Course Theory, Turning Points, and Criminal Trajectories**

The relation between age and crime shows that antisocial behavior increases from childhood to adolescence, peaks in mid-adolescence, then shows a marked decline in late adolescence and early adulthood (Farrington, 2006; Moffitt, 1993). While it is important to explain who persists and why they continue to engage in antisocial behavior, persistent offenders are in fact *rarer* than limited or non-persistent offenders (Moffitt, 1993). According to Sampson and Laub (1993), with age, individuals are increasingly bounded by informal social control, social ties or bonds to societal institutions (e.g., work, marriage, and school), which functions as the mechanism for desistance from crime in young adulthood. In an age-graded society, like ours, individuals are increasingly committed and tied to these social controls via events and circumstances that are normative in adulthood and these informal ties facilitate the process of breaking away from the criminal trajectory. This work has been pivotal in exploring the process of desistance while drawing heavily from Elder’s (1989) life course theory of development and the concept of turning points (Elder, 1998; Laub & Sampson, 2008).

Turning points are broadly defined as an external event or experience, or as an internal event or realization that brings about a changed sense of awareness (Rutter, 1996). While there are a range of potential turning point events, they are often subjectively defined after the fact by the individual who has experienced the event. Despite the subjective nature in defining an event as a turning point, empirical research on turning points has typically identified a specific event (e.g., joining military) considered to be a turning point then sampled a population that has experienced the event.
(Rutter, 1996). While this research strategy is useful in examining the effect of a researcher-defined turning point, it could potentially ignore individuals’ subjectivity and agentic awareness in construing an event as a turning point. A key feature of a turning point is that it provides an individual with an opportunity for change (Laub & Sampson, 1993; Rutter, 1996). Whether the individual capitalizes on that opportunity varies by individuals, and is related to the agentic role that the individual plays in his or her life trajectory (Elder, 1998).

A growing body of research has sought to identify events that serve as turning points. Much of this research has focused on marriage, school, work, and military service. Social ties to these institutions, which occur frequently at the entry to adulthood, act as a buffer from delinquent or criminal behavior by pressuring individuals to conform to the standards and values of the society. Research has generally supported marriage as a turning point that promotes desistance from crime (King, Massoglia, & Macmillan, 2007; Laub, Nagin, & Sampson, 1998; McGloin et al., 2011). For example, Sampson and colleagues (1998) found a significant reduction in criminal offending among married men (Sampson, Laub, & Wimer, 2006). Gender effects have also been found in the impact of marriage on crime with men typically benefitting more from marriage (King et al., 2007). The process towards getting married (i.e., the relationship years prior to marriage) has also been found to reduce criminal involvement, what has been referred to as the courtship effect (King, Laub, Nagin, & Sampson, 1998; McGloin et al., 2011). In addition, the quality of marriage is important. For instance, compared to those in a marriage qualified as ‘not good’, those in a ‘good’ marriage had a reduction in crime 19%
greater and the difference in the reduction in crime between the good and not good marriages grew from 19% to 68% over the course of approximately 8 years (Laub et al., 1998).

Another well-studied potential turning point is military service (Elder, 1989; Elder, 1998). Elder (1989) found that men who entered into the military service immediately following adolescence had greater social competence outcomes later in life as indexed by more successful and stable marriages than those who joined later. Military service has also shown to be beneficial for financial well-being, job stability, and occupational status in the middle age years for delinquents compared to their non-delinquent counterparts, above and beyond pre-service individual differences (Sampson & Laub, 1996). Work or employment has also been found to serve as a turning point. The effect of work on recidivism among criminal offenders was evaluated in the National Supported Work Demonstration Project (Uggen, 2000). In this project, over 3,000 criminal offenders were randomly assigned to the treatment condition in which they were offered minimum wage jobs. Uggen (2000) found that outcomes were age-graded, in that the program significantly reduced recidivism among participants who were 27 years or older but not for the younger counterparts.

A less-studied turning point is the effect of education on desistance. One study takes a life course perspective in its evaluation of high school graduation as a turning point in young offenders’ lives (Natsuaki, Ge, & Wenk, 2008). Using a longitudinal sample of male offenders who spent time in the California Youth Authority during adolescence, Natsuaki and colleagues (2008) found that receiving a high school diploma
was found to be a positive turning point for those who had shorter offending trajectories (i.e., late-starters), while its benefit was not salient for those who had been offending for a longer period of time (i.e., early-starters).

Involvement in the juvenile or criminal justice system has been referred to as a potential turning point (Laub & Sampson, 2003), though scant empirical research has confirmed this possibility. Similar to military service, justice involvement could be considered a total institution (Elder, 1998) where individuals are cut off from their deviant lifestyles in hopes of redirecting their paths. In Laub and Sampson’s (2003) qualitative work on the Glueck Study, some men reflected on their time in reform school (the juvenile justice system of their time) as a potential turning point. Those who referred to their time in reform school as a turning point reasoned that the experiences at reform school made them realize that they simply did not want to return, or that they benefitted from the structure of the institution (Laub & Sampson, 2003).

The particular reform school that the Glueck men were incarcerated in was especially violent and used physical punishment as well as sadistic styles of torture to punish the youth, though not all youth experienced the violence. Interestingly, even men who recalled the abuse in the reform school still saw their time spent there as a turning point. For example, one man who was subject to abuse during incarceration recalled, “I didn’t learn anything up there, except not to go back.” (Laub & Sampson, 2003, p.131). Similarly, another desister who suffered severe beatings remembered, “There was people who ran these cottages and they beat the devil out of you and beat on the bottom of your
feet with a stick…I was only, cripes, a young kid then. And I remember these points vividly in my mind…” (Laub & Sampson, 2003, p.131).

While Laub and Sampson’s (2003) qualitative work is the only study we are aware of that has evaluated the justice system as a potential turning point from a life course perspective, there are a number of studies in the field of criminal justice that have examined the impact of incarceration, in general, on recidivism. While not specifically evaluating turning points, some studies have shown that incarceration, in the juvenile or criminal justice system, has criminogenic effects with very few studies showing incarceration reduces crime (for review, Nagin, Cullen, & Johnson, 2009). In a review of this literature the authors concluded, “it is remarkable that so many democratic societies, most especially the United States, incarcerate so many people without good estimates of the effects of this very expensive sanction on macro-level and individual-level crime rates.” (Nagin et al., 2009, p.187).

From a life course perspective, the inconsistent findings regarding the impact of incarceration on recidivism speak to the issues of developmental continuity and discontinuity. Perhaps, those who construe the incarceration experience as a turning point are able to capitalize on its benefits while others simply do not see it as a turning point. As shown in Laub and Sampson’s (2003) qualitative data, incarceration plays a varying role for different individuals. Further, if the experience of incarceration is in fact a turning point for an individual, then the salience of the experience for its impact on criminal trajectories is heavily reliant on how one perceives their incarceration experience as a catalyst for change.
Justice Involvement: Snare or Turning Point?

Juvenile incarceration can be a turning point, as noted earlier, but it may also be a potential snare for offenders. In considering the inconsistency in the effects of justice involvement, we hypothesized that what happens during incarceration and how one makes meaning out of the incarceration experience likely play a role in whether or not the experience acts as a turning point. Indeed, the impact of a turning point has been shown to depend on the quality of the experience (e.g., Laub, Nagin, & Sampson, 1998; Laub & Sampson, 2003).

What happens during incarceration, specifically exposure to potentially traumatic events, likely affects whether youth identify incarceration as a salient turning point. Indeed, incarceration is not often a positive experience for youth. National prevalence studies reveal that one in eight incarcerated youth experience sexual victimization (Beck, Harrison, & Guerino, 2010), 28% of youth experience some form of restraint (e.g., restraint chairs, or chains), and 55% of youth report excessive stays in solitary confinement (Sedlak & McPherson, 2010). While these findings are particularly disturbing, it is important to remember that not all incarcerated youth experience these abuses; there is significant variability in the quality of the experience of incarceration (Dierkhising, Lane, & Natsuaki, 2014; Laub & Sampson, 2003). Thus, it is expected that how one perceives change following incarceration contributes to reentry outcomes; however, perceptions of the experience will likely depend on the quality of the experience.
**Aims and Hypotheses**

Using a mixed methods design, we examined the effect of incarceration by exploring the following three issues: 1) how much youth who had been previously incarcerated perceived change in their lives following (and because of) incarceration; 2) if and how perceived change following incarceration was related to post-release adjustment; 3) whether the relation between perceived change and post-release adjustment depended on the experience of trauma during incarceration; and 4) whether youth subjectively identified incarceration as a turning point. We hypothesized that there would be variation in how much one perceived change as a result of juvenile incarceration, and that higher levels of perceived change would be associated with improved post-release adjustment. However, we expected that incarceration trauma would moderate the association between perceived change and post-release adjustment, such that those who experienced high levels of abuse would not see the experience as a mechanism for change. Finally, we expected that there would be significant individual differences in whether youth freely identified juvenile incarceration as a turning point in their lives.

The current study consists of two parts. First, we addressed perceptions of positive change following incarceration and its effects on post-release psychosocial adjustment using a quantitative approach (Issues 1-3). Post-release psychosocial adjustment included depression, posttraumatic stress, social supports, self-esteem, and criminal involvement. We then evaluated whether perceived change following incarceration depends on the level of trauma experienced during incarceration. Next, we
examined youth’s turning point narratives to explore whether they subjectively identified incarceration as a turning point (Issue 4). This qualitative approach is novel because this is one of the first studies to test the assumption that a researcher-defined event (e.g., incarceration) is in fact perceived as a turning point by the participant.

Methods

Participants

Participants were recruited from a volunteer reentry program in Southern California and were eligible to participate if they were at least 18 years old and had been incarcerated in a juvenile justice facility within the last year. Once participants consented, they completed a survey in the presence of the first author. Length of the assessments ranged from forty-five minutes to two hours; however the majority took an hour and fifteen minutes. Participants ($N=62$) were mostly male (75%), 18 years old ($SD=0.57$), and Hispanic/Latino (82.9%) with 10.9% of the sample identifying as African-American and 6.2% as Mixed/Other. The majority of the sample had extensive experience with the juvenile justice system. Participants were first arrested (regardless of adjudication) early in life with the mean at 13.77 years old ($SD=1.75$). Participants reported institutional stays in a variety of types of facilities (e.g., juvenile halls, probation camps, and corrections), and were incarcerated 4 times on average ($SD=2.41$). Across all times incarcerated, the average time they spent incarcerated was 17.19 months ($SD=15.57$), ranging from 2 weeks to 6.25 years.
Measures

**Perceived Change.** Perceived change following incarceration was measured using the Posttraumatic Growth Inventory (PTGI; Tedeschi & Calhoun, 1996), a 21-item self-report inventory that assesses how much one perceives changes in their thoughts and behaviors since a major life event. For the current study, the prompt was altered to refer to incarceration specifically (e.g., “When thinking about the your experiences in detention/camp when you answer the next set of questions indicate how much the change reflected in the question is true in your life as a result of your experience.”). Question examples included; “I changed my priorities about what is important in my life” and “I established a new path for my life.” Six response options ranged from 0 (*I did not experience this change as a result of being incarcerated*) to 5 (*I experienced this change to a very great deal as a result of being incarcerated*). The perceived change scale had a Cronbach alpha of .962.

**Posttraumatic Stress Symptoms.** Posttraumatic stress symptoms were assessed using the UCLA Posttraumatic Stress Disorder Reaction Index (PTSD-RI; Steinberg, Brymer, Decker, & Pynoos, 2004; Steinberg et al., 2013) which provides a continuous measure of posttraumatic stress symptoms with a suggested clinical cutoff score of 38 and above. Participants reported how often they experienced the symptom during the past month using a Likert scale; 0 (*Never*), 1 (*A little, about two times a month*), 2 (*Sometimes, one to two times a week*), 3 (*A lot, 3 to 4 times a week*), and 4 (*Most of the time, Almost everyday*). For the current study the PTSD-RI yielded a Cronbach alpha of .943.
Depressive Symptoms. Depressive symptoms were assessed using the Center for Epidemiological Studies Depression (CES-D) Scale (Radloff, 1977). The CES-D includes 20-items that assess symptoms within the last week with five response options of 0 (Rarely or none of the time), 1 (less than 1 day), 2 (Some or a little of the time, 1-2 days), 2 (Occasionally or a moderate amount of time, 3-4 days), and 4 (Most or all of the time, 5-7 days). The CES-D has shown high reliability with a Cronbach alpha of .85 on average in community samples (Radloff, 1977) and .772 in the current sample. The CES-D is considered a screening tool for depression symptoms, not to be used for diagnostic purposes, and provides a continuous symptom severity score with a cutoff score of 16 and above indicating mild to significant depression symptoms (Radloff, 1991). We transformed the score using a square root transformation to adjust the positive skew of the variable.

Criminal Involvement. Criminal involvement post-release was assessed using a questionnaire adapted from the RAND Adolescent Outcomes Project (Morral, McCaffrey, & Ridgeway, 2004), which covered a broad range of illegal activities including aggravated assault, armed robbery, burglary, DUI, theft, simple assault, stealing, drug sales, vandalism, strong-arm robbery and grand theft auto. Response options included 0 (No, not at all), 1 (Yes, just once), and 2 (Yes, more than once). Items were summed across crimes for an index of frequency of criminal involvement with a Cronbach alpha of .897. The summed score was transformed due to a positive skew using a square root transformation.
**Self-Esteem and Social Support.** Self-esteem was measured using the Rosenberg Self-Esteem Scale (Rosenberg, 1989) which includes ten questions such as, “I feel that I’m a person of worth, at least on an equal plane with others” and “I feel that I do not have much to be proud of.” The Multidimensional Scale of Perceived Social Support (MPSS; Zimet, Dahlem, Zimet & Farley, 1988) assessed post-release social supports. Example items include: “There is a special person who is around when I am in need” and “I have a special person who is a real source of comfort to me.” Response options for both scales are rated on a four-point scale ranging from 0 (*Strongly disagree*) to 3 (*Strongly agree*). Cronbach alphas indicated good internal consistency for both measures (Self-Esteem = 0.851; MPSS = 0.869).

**Turning Point Narrative.** Turning point narratives were prompted in an open-ended format using the following question from Nelson et al.(2011): “In looking back on your life, you may be able to identify certain key ‘turning points’ – episodes through which you experienced an important change in your life. A turning point can be an event, and experience, or even a realization. Please choose one key turning point in your life and describe it in detail. Please tell me about what comes to mind. What led up to it, what happened, where and when it happened, who may have been involved, and what you were thinking and feeling.”

**Moderator.** *Incarceration trauma* was measured using a scale developed for a prior study (see Dierkhising, Lane, & Natsuaki, 2014). Nine items were included to assess exposure to a variety of trauma types perpetrated by staff and peers such as physical abuse or assault, sexual abuse, assault, or harassment, emotional abuse, long
stays in solitary confinement, and being denied food. Participants reported whether they experienced each type of trauma themselves, whether they saw it happen to another youth, and whether they heard it happening to someone else. Response options were 0 (Never), 1 (Once), 2 (A couple times), and 3 (Often). All types of exposure were summed to create a frequency scale of incarceration trauma that was transformed using a square root transformation due to a negative skew. The scale yielded excellent reliability with a Cronbach alpha of .945.

**Covariate.** In considering experiences prior to incarceration, child maltreatment exposure stands out as a potential correlate of post-release adjustment as well as whether one identifies incarceration experience as a turning point. Rates of child maltreatment among justice-involved youth are strikingly high (Dierkhising, Ko, Woods-Jaeger, Briggs, Lee, & Pynoos, 2013; Widom & Maxfield, 1996). Therefore, childhood maltreatment was included as a covariate.

The measure of child maltreatment exposure included physical abuse, sexual abuse, and physical neglect. Exposure to physical and sexual abuse was measured using the Initial Trauma Review (Briere & Lanktree, 2008) which included two questions in a self-report yes/no format on childhood exposure to sexual and physical abuse. Physical neglect was measured using three questions from the Child Trauma Questionnaire (CTQ: Bernstein & Fink, 1998; Scher, Stein, Asmundson, McCreary, & Forde, 2001). Responses to these three questions were dichotomized into two groups, neglected and not neglected. Those who indicated *often true* or *very often true* to all three of the neglect
questions were coded as neglected. The three maltreatment types were then summed to create an index of child maltreatment with a possible range of 0 to 3.

Results

Quantitative Analysis

Descriptives. Table 1 presents the means, standard deviations, and bivariate correlations among the study variables. About one-third of youth (33.9%) reported depression symptoms ($M = 14.00, SD = 8.18$) and 14.5% of youth reported PTSD symptoms ($M = 19.73, SD = 14.18$) in the clinical range. More than one-third of youth indicated prior child maltreatment histories (38.7%). Nearly all youth reported some form of incarceration trauma (96.8%) with an average frequency score of 22.18 ($SD = 16.12$, range = 0 – 66). Perceived change scores were highly variable with an average score of 70.58 ($SD = 24.25$, range = 8 – 105).
Table 3.
Summary of Intercorrelations, Means, and Standard Deviations for Perceived Change, Incarceration Trauma, Psychosocial Adjustment, and Covariates

<table>
<thead>
<tr>
<th>Variables</th>
<th>1</th>
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<th>7</th>
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<th>9</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Gender</td>
<td>-</td>
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<tr>
<td>2. Maltreatment</td>
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<td></td>
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<td>3. Perceived Change</td>
<td>.281*</td>
<td>0.05</td>
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<td></td>
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<tr>
<td>4. Incarceration Trauma</td>
<td>-0.193</td>
<td>.299*</td>
<td>-0.006</td>
<td></td>
<td></td>
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<tr>
<td>5. Self-Esteem</td>
<td>0.047</td>
<td>-0.055</td>
<td>.336**</td>
<td>-0.021</td>
<td></td>
<td></td>
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<tr>
<td>6. Social Supports</td>
<td>0.051</td>
<td>-0.189</td>
<td>.334**</td>
<td>-0.063</td>
<td>0.235</td>
<td></td>
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<tr>
<td>7. Depression Symptoms</td>
<td>0.163</td>
<td>0.141</td>
<td>-0.195</td>
<td>.268*</td>
<td>-.505***</td>
<td>-.305*</td>
<td></td>
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<tr>
<td>8. PTSD Symptoms</td>
<td>-0.115</td>
<td>.320*</td>
<td>-0.045</td>
<td>.472***</td>
<td>-.393**</td>
<td>-.270*</td>
<td>.610***</td>
<td></td>
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<tr>
<td>9. Criminal Involvement</td>
<td>-0.211</td>
<td>0.181</td>
<td>-0.193</td>
<td>.370**</td>
<td>-.393**</td>
<td>-0.156</td>
<td>.370**</td>
<td>.421**</td>
<td></td>
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<tr>
<td>M</td>
<td>.24</td>
<td>.52</td>
<td>70.58</td>
<td>22.18</td>
<td>20.42</td>
<td>24.16</td>
<td>14.00</td>
<td>19.73</td>
<td>4.68</td>
</tr>
<tr>
<td>SD</td>
<td>.43</td>
<td>.74</td>
<td>24.25</td>
<td>16.12</td>
<td>4.64</td>
<td>5.63</td>
<td>8.18</td>
<td>14.18</td>
<td>5.30</td>
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</table>

* Means and standard deviations are based off raw scores.
* *p < .05, ** p < .01, *** p < .001
**Perceived Change and Psychosocial Adjustment.** In a series of hierarchical regression models, we evaluated whether perceived change following incarceration was associated with post-release psychosocial adjustment (i.e., criminal involvement, PTSD symptoms, depression symptoms, social support, and self-esteem). In Step 1, child maltreatment and gender were included as control variables. In Step 2, perceived change and incarceration trauma were added to the model and, finally, in Step 3, the interaction term for incarceration trauma and perceived change was included. Five separate models were run for each post-release adjustment outcome (i.e., criminal involvement, PTSD symptoms, depression, self-esteem, and social support). All variables were centered.

In the final models, the inclusion of the interaction term resulted in a significant change in the proportion of variance explained (i.e., $\Delta R^2$) for criminal involvement, posttraumatic stress, and depression. Specifically, the interaction term accounted for an additional 9% of the variance in criminal involvement, 12.8% of the variance in depression symptoms, and 6.4% of the variance in posttraumatic stress symptoms. The interaction term did not significantly contribute to the proportion of variance explained for self-esteem and social support. Perceived change had a main effect on self-esteem and social support ($\beta = .369, p < .01; \beta = .364 \ p < .05$, respectively) with higher levels of perceived change associated with higher levels of self-esteem and social support (see Table 2). There was also a main effect on depression in the negative direction ($\beta = -.303 \ p < .05$), indicating that higher levels of perceived change were associated with lower levels of depression symptoms. Results also revealed significant interaction effects of perceived change and incarceration trauma with criminal involvement, depression
symptoms, and PTSD symptoms ($\beta = -.308, p < .05; \beta = -.368, p < .01; \beta = -.260, p < .05$, respectively), but not with self-esteem and social support.
Table 4.
Hierarchical Regression Analysis Models Predicting Psychosocial Adjustment from Perceived Change, Incarceration Trauma, and the Interaction Between them Controlling for Gender and Child Maltreatment

<table>
<thead>
<tr>
<th>Predictor</th>
<th>Post-release Psychosocial Adjustment</th>
<th>Criminal Involvement</th>
<th>Depression Symptoms</th>
<th>PTSD Symptoms</th>
<th>Self-Esteem</th>
<th>Social Supports</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Δ $R^2$</td>
<td>β</td>
<td>Δ $R^2$</td>
<td>β</td>
<td>Δ $R^2$</td>
<td>β</td>
</tr>
<tr>
<td>Step 1</td>
<td>.078</td>
<td>.046</td>
<td>.116*</td>
<td>.005</td>
<td>.039</td>
<td></td>
</tr>
<tr>
<td>Gender</td>
<td>-.214</td>
<td>.161</td>
<td>-.119</td>
<td>.047</td>
<td>.054</td>
<td></td>
</tr>
<tr>
<td>Child Maltreatment</td>
<td>.184</td>
<td>.139</td>
<td>.321*</td>
<td>-.055</td>
<td>-.190</td>
<td></td>
</tr>
<tr>
<td>Step 2</td>
<td>.111*</td>
<td>.148**</td>
<td>.145**</td>
<td>.115*</td>
<td>.118*</td>
<td></td>
</tr>
<tr>
<td>Gender</td>
<td>-.104</td>
<td>.300*</td>
<td>-.026</td>
<td>-.054</td>
<td>-.049</td>
<td></td>
</tr>
<tr>
<td>Child Maltreatment</td>
<td>.095</td>
<td>.060</td>
<td>.201</td>
<td>-.069</td>
<td>-.204</td>
<td></td>
</tr>
<tr>
<td>Perceived Change</td>
<td>-.166</td>
<td>-.280*</td>
<td>-.045</td>
<td>3.55**</td>
<td>3.58*</td>
<td></td>
</tr>
<tr>
<td>Incarceration Trauma</td>
<td>.320*</td>
<td>.306*</td>
<td>4.07**</td>
<td>-.009</td>
<td>-.009</td>
<td></td>
</tr>
<tr>
<td>Step 3</td>
<td>.090*</td>
<td>.128**</td>
<td>.064*</td>
<td>.049</td>
<td>.007</td>
<td></td>
</tr>
<tr>
<td>Gender</td>
<td>-.033</td>
<td>.385**</td>
<td>.034</td>
<td>-.106</td>
<td>-.068</td>
<td></td>
</tr>
<tr>
<td>Maltreatment</td>
<td>.093</td>
<td>.058</td>
<td>.200</td>
<td>-.068</td>
<td>-.203</td>
<td></td>
</tr>
<tr>
<td>Perceived Change</td>
<td>-.186</td>
<td>-.303*</td>
<td>-.062</td>
<td>3.69**</td>
<td>3.64*</td>
<td></td>
</tr>
<tr>
<td>Incarceration Trauma</td>
<td>.357**</td>
<td>.350**</td>
<td>.437**</td>
<td>-.036</td>
<td>-.019</td>
<td></td>
</tr>
<tr>
<td>Perceived Change x</td>
<td>-.308*</td>
<td>-.368**</td>
<td>-.260*</td>
<td>.226</td>
<td>.085</td>
<td></td>
</tr>
<tr>
<td>Incarceration Trauma</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Note. * $p < .05$; ** $p < .01$; *** $p < .001$
The significant interactions are graphically illustrated in Figures 1-3. Using Modgraph (Jose, 2013), we conducted post hoc analyses to test the simple slopes. High and low levels of the variables were calculated by using one standard deviation above and below the mean, respectively, and medium levels were at the mean of the variable. These results indicated that a high level of incarceration trauma coupled with a low level of perceived change was significantly associated with increased levels of criminal involvement and depression symptoms ($\beta = -.028, p < .01; \beta = -.031, p < .001$; respectively), but only marginally associated with PTSD symptoms ($\beta = -.183, p = .06$). For depression symptoms, the simple slope representing a medium level of incarceration trauma was also significant ($\beta = -.014, p < .01$). These results indicated that low levels of perceived change were associated with increased levels of criminal involvement when the level of incarceration trauma was high. Similarly, youth who perceived little change after incarceration and experienced high and/or medium levels of incarceration trauma showed increased depression symptoms.
Figure 1. Perceived Change and Criminal Involvement Moderated by Incarceration Trauma

Figure 1. Post hoc analyses of the simple slopes for the significant interaction effect of perceived change and incarceration trauma on criminal involvement. Figure displays the unstandardized coefficients.

Figure 2. Perceived Change and Depression Symptoms Moderated by Incarceration Trauma

Figure 2. Post hoc analyses of the simple slopes for the significant interaction effect of perceived change and incarceration trauma on depression symptoms. Figure displays the unstandardized coefficients.
Qualitative Analysis: Turning Point Narratives

A thematic analysis was conducted on the open-ended responses to evaluate whether youth freely identified incarceration as a turning point. Thematic analysis is a qualitative method for identifying patterns (e.g., themes) in data (Braun & Clarke, 2006). An inductive method was used to extract themes of turning points based on our theoretical framework (i.e., life course theory) and related hypotheses. Initial themes were identified for each participant’s response. At this point, each response had one to seven initial themes. The responses were then analyzed again in order to generate a number of subthemes, which resulted in zero to six subthemes across the dataset. The initial themes and the subthemes were then reviewed and one overarching theme was extracted for each response based on whether (1) it was clear that the theme was the referent turning point; and (2) the theme appeared in more than one participant’s
response. These primary themes were then classified into ten types of turning points (see Table 3).

Approximately one-quarter (25.8%) of youth identified being incarcerated as a turning point. For example, “I was 17 years old when I first went to juvi. I was feeling very alone, sad, and very mad. After being in juvi [sic] I was sent to placement, there I spent 6 months of my life and I was very frustrated. All these frustrations made me realize this was not the life I wanted or need. I’m looking to better myself and hope one day I can say I’m happy the way my life turned out.” Another youth said, “Being in jail changed me because I wasn’t really doing anything with myself. I was drinking, partying, fighting, & using drugs and not going to school. After I came out of camp I realized that I had to do something positive with myself. So I did. I stopped being around with bad influences & got my act together & found a job.”

The next most common theme, identified by ten participants (16%), was losing someone they cared about. For instance one participant wrote, “My turning point was when one of my close friends was murdered over gang related issues. It actually woke me up into realizing its honestly not worth gangbangng. And I also realized there is much more to see in the world other than gangbangng. My friend was about the same age as me, which is why it hit me pretty hard. It has impacted me immensely even to this day regarding in how I live my life and in how I see the world.” Turning points did not always represent a positive change. One youth who reported losing someone as a turning point recalled, “I was at the age of 12 when I witnessed the death of my cousin that changed my life. The change wasn’t a good change. Things after that became worse. I
joined a gang and started my drug life. This change got me to where I’m at right now I’m struggling in school, and because of my drug use I’m unemployed.”

The third most common theme was child-related. Specifically, participants identified becoming a parent as a turning point. One youth commented, “I had my kid, it was the best moment in my life knowing that I had someone to live for. I now had a reason to do better in life. I know I have to change because I want my son to look up to me.” Another youth remarked, “My daughter, she changed my life completely. I graduated High School planning to go to college. I stop drinking being out of the streets haven’t gone to jail over a year, so I think having my baby was a very important change in my life.” Other themes included events related to crime, peers, drugs, being shot or shot at, poverty, and having a realization. Additional examples are illustrated in Table 3.
Table 3. Thematic Categories of Turning Points and Response Examples

<table>
<thead>
<tr>
<th>Thematic category</th>
<th>n</th>
<th>Response Examples</th>
</tr>
</thead>
<tbody>
<tr>
<td>Incarceration</td>
<td>16</td>
<td>When I was locked up in [place extracted] I was facing 53 years to life for something I didn’t do, now I beat my case and now that I’m out I think a lot about the better things in life I got now.</td>
</tr>
<tr>
<td>Death</td>
<td>10</td>
<td>The day my friend [name extracted] died. It happened at the park as he was walking to the baseball field. I was kickin it near the bathrooms and he was coming from the homie’s pad. A white escalade was on ditman [sic] and busted a drive-by on my homie and he got shot in the leg, head, and arm. The homeboy [name extracted] ran to him I stood in shock we called the staffs they called the ambulance and that was it. He was gone and since then I thought twice about what I wanted to do.</td>
</tr>
<tr>
<td>Child-Related</td>
<td>7</td>
<td>My son’s birth, since I’ve seen it I felt happier, it was amazing. The best feeling ever. He’s my pride and joy, not one day goes by that I regret my son. I will forever love him and try my best to give him a better life. Better than mines [sic], and simply be there for him.</td>
</tr>
<tr>
<td>Family-Related</td>
<td>6</td>
<td>What comes to mind when they say “turning point” is when my family and I got separated. It was Horrible, the worst feeling ever, especially seeing my little brother get taken to a foster home. But I got through it and so did my family. I’m glad we were strong enough to get through this tragedy.</td>
</tr>
<tr>
<td>Peer-related</td>
<td>6</td>
<td>I felt my life hit a turning point when I got involved in gangs. I started getting deeper and deeper in it. The money was looking good so that’s what I started pursuing. Then I went to jail then things begun to get bad.</td>
</tr>
<tr>
<td>Shot or shot at</td>
<td>4</td>
<td>In [date removed], a couple a years ago I was chilling with my brothers and we were walking it home and I guess my brothers rivals seen my brother and they started shooting at us luckily my brother got away I got stuck because I was young so I seen the gun point at me and I ran he started shooting at me and got on both my legs. But I can still walk thanks to god.</td>
</tr>
<tr>
<td>Crime-related</td>
<td>3</td>
<td>I experienced people robbing and it made me want to try it I was with a group of friends. I was feeling scared and excited at first.</td>
</tr>
<tr>
<td>Realization</td>
<td>3</td>
<td>A turning point in my life was the day I finally realized that life made no promises. Everything that I do would have an effect whether it was positive or negative. When I finally understood the definition of insanity, that no matter how many times I do the same thing I will always get the same result. With that came forgiveness, understanding, love, happiness &amp; a positive outlook on life.</td>
</tr>
<tr>
<td>Drug-Related</td>
<td>2</td>
<td>There is an important change in my life. Is that I don’t do drugs no more. I realize that drugs is [sic] only going to take me to the wrong way. To death, jail or take my family away.</td>
</tr>
<tr>
<td>Poverty</td>
<td>2</td>
<td>When I was young my family and I were homeless and had to sleep in a public restroom. I was about 10 years old.</td>
</tr>
</tbody>
</table>

*Note.* Three responses were uncodable due to incoherence or inability to identify a turning point.
Discussion

Findings from the current study revealed that there exists wide variation in how youth perceive change in their lives following incarceration and that this perceived change is related to post-release psychosocial adjustment. Specifically, the more positive change one perceived following incarceration, the more social support and self-esteem youth experienced post-release. However, the association between perceived change with depression, PTSD symptoms, and criminal involvement depended on the amount of trauma youth were exposed to during incarceration. In other words, the quality of the incarceration experience significantly moderated the effect of perceived change on criminal involvement and depression, and marginally so for PTSD symptoms. Finally, when youth were asked to identify a turning point in their lives, ten different events (i.e., themes) were identified with incarceration being the most commonly identified turning point, although by only one-quarter of youth.

Youth who perceived more positive change following incarceration were more likely to have more social support and higher levels of self-esteem post-release. In addition, perceived change was negatively associated with depression symptoms post-release. Prior research has shown that youth’s mental health problems, including depression, can persist up to five years following incarceration (Teplin, Welty, Abram, Dulcan, & Washburn, 2012). These findings suggest that framing the incarceration experience as a mechanism of change can buffer against depression and improve self-esteem and social support. However, perceived change, depression, and self-esteem all have a cognitive component to them, which may mean that it is a person’s ability to
utilize cognitive coping strategies that is potentially related to improved psychosocial adjustment. Nevertheless, these findings are important in identifying potential protective factors to improve psychosocial adjustment post-release.

We found partial support for our hypothesis that the association between whether one perceives incarceration as a mechanism for change and psychosocial adjustment post-release depends on the quality of the incarceration experience. Incarceration trauma moderated the impact of perceived change on post-release depression and criminal involvement. Lower levels of perceived change along with high levels of incarceration trauma were associated with increases in criminal involvement and depression symptoms. In addition, low levels of incarceration trauma along with low levels of perceived change were not associated with changes in criminal involvement or depression. These findings are in line with prior research on turning points and marriage in that the impact of marriage on desistance from crime depends on the quality of the marriage (Lau et al., 1998). Future research on incarceration as a turning point should include positive experiences (i.e., treatment services, mentoring, and other programming) during incarceration as a potential moderator of post-release outcomes as well.

In contrast, when youth experienced higher levels of incarceration trauma and also perceived incarceration as a mechanism for change had lower levels of post-release depression and criminal involvement than those who perceived incarceration as an event that did not bring any changes to their life. This finding indicates that perceiving incarceration as a mechanism for change can buffer against depression and criminal involvement in the face of high levels of incarceration trauma. However, this finding
should be interpreted with caution. Enhancing perceptions of change should not be used as an intervention for youth who experience trauma during incarceration; rather, youth should be protected against trauma during incarceration in the first place (Dierkhising et al., 2014; Mendel, 2011). As discussed, prior qualitative work has also found that some men who recounted their experiences in juvenile institutions as traumatic or abusive still identified them as a turning point (Laub & Sampson, 2003). It is also possible that the experience of trauma during incarceration provoked the need to find benefit from the experience in order to heal for some individuals.

In evaluating turning points, we took two approaches; we utilized a continuous measure of perceived change (i.e., quantitative) and an open-ended question where youth freely identified a turning point (i.e., qualitative). Both measurement techniques revealed wide individual differences in whether youth perceive incarceration as a mechanism for change. The continuous measure had a large standard deviation and a wide range. When youth freely identified a turning point in their lives, incarceration was the most common theme among the 10 identified turning points but it was only reported by one-quarter of the youth as a turning point. The variability in youth identifying incarceration as a turning point is especially important for future research because, as the current findings reveal, participants may not always construe a researcher-defined event as a turning point. Whether and how one identifies an event as a turning point is subjective and can be colored by the quality and details of the event.

Theoretically, considering incarceration as a turning point is well-founded given that it removes a youth from their prior antisocial circumstances and provides them with
an opportunity for change (Laub & Sampson, 1993; Rutter, 1996). The turning point narratives give us insight into potential reasons why incarceration was not identified by all participants as a turning point. Some youth reported experiencing extremely traumatic or other significant events in their lives such as becoming a parent, being shot, or seeing their friends or family members murdered. The salience and impact of these types of life events, particularly for young persons, may in fact not even be comparable in scope and/or impact on youth’s lives to their stay in a juvenile facility. In addition, nearly all of the participants reported numerous stays in juvenile facilities, which may have desensitized youth to the significance of the incarceration experience.

**Policy Implications**

As the findings from this study show, incarceration does not consistently function as a life-changing event that alters youths’ views and behaviors related to crime. Juvenile justice stakeholders must work to ensure that incarceration is in fact a turning point since what happens during incarceration and youth’s perceptions of the experience are associated with post-release outcomes. Fortunately, a number of juvenile justice reform efforts are based on this premise and aim to improve the system’s response to youth so that they can lead healthy lives following incarceration (e.g., Defending Childhood Initiative; National Research Council: NRC, 2012).

Recent juvenile justice reform efforts encourage a developmentally-informed approach to justice administration (e.g., due process, sentencing, etc.) and detention practices (e.g., evidence-based programming, etc.) so that the justice system’s policies and practices build on the robust knowledge of adolescent development in relation to
adolescent offending and desistance from crime (NRC, 2012). This approach encourages juvenile justice staff and its affiliated stakeholders to cultivate an environment that can positively contribute to adolescent development post-release, while still holding youth accountable for their actions. Importantly, this approach highlights the salience of incarceration for later developmental outcomes as well as providing a framework for a consistent approach to working with youth in juvenile facilities in order to reduce the variability in outcomes. This is important given the discrepant treatment of youth during incarceration across jurisdiction and settings.

It is also necessary for juvenile justice policies to protect youth from high levels of incarceration trauma so that youth’s experiences during incarceration do not undermine their potential for healthy psychosocial adjustment post-release. In line with the current study, prior research has also found that post-release outcomes, such as desistance from crime and positive expectations for the future, among previously incarcerated youth were related to perceptions of the incarceration experience, including whether they were treated fairly (Schubert, Mulvey, Loughran, & Losoya, 2012) and the presence of prosocial relationships with detention staff (Marsh & Evans, 2009). Justice practices that help youth alter their criminal trajectory following incarceration, such as improved safety during incarceration, evidence-based programming, and connecting with prosocial mentors, may promote incarceration as a turning point.

Limitations

Findings from the current study must be interpreted in light of its limitations. Primarily, the current sample is small and geographically limited. Future research should
validate the current findings in larger and more diverse samples. The data is also cross-sectional, making it difficult for us to evaluate the temporal order of events. It is possible that, over time, participants’ perceptions and meaning-making of the incarceration experience as well as their turning point events change. In addition, those that indicate desistance may, down the line, recidivate. Future research should strive for longitudinal methods when evaluating the process of change among formerly incarcerated youth.

The data is based on self-reports, which is vulnerable to memory inaccuracies particularly when recalling a number of specific events such as when and how long youth were incarcerated for. Future research should consider integrating official arrest records and/or case records from probation departments to minimize common-method variance and improve accuracy in the measurement of timing of the events. Nevertheless, self-report crime data has been found to be robust when compared to official records (Thornberry & Krohn, 2000).

We assessed perceived change using an inventory developed for posttraumatic growth. The original measure has been found to have diverse associations (e.g., both positive and negative) with psychological outcomes (Kleim & Ehlers, 2009; Zoellner & Maercker, 2006). One criticism of the measurement technique is its inconsistency in which traumatic event is being studied as the inventory typically lets the participant choose which events they want to refers to. However, we adapted the measure to refer specifically to the incarceration experience. In addition, we included the narratives to complement our investigation of change, and we found consistencies between the measurement of perceived change and the narratives. Future research should consider
alternative evaluations of perceived change after incarceration. The turning point narratives in the current study were also relatively short. This is likely because youth had to write out their responses and many youth struggled with grammar and spelling, making it difficult for them to detail the turning point events. Future research could obtain more detailed stories by audio recording youth recounting their turning points.

**Conclusion**

The current study took a life course perspective in evaluating the potential of juvenile incarceration to function as a turning point for formerly incarcerated youth. Findings indicated significant variability in whether youth perceive incarceration as a turning point and that perceptions of incarceration as a mechanism for change had differential effects on psychosocial adjustment post-release. Importantly, the effect of youth’s perceptions of positive change following, and because of, incarceration on depression and criminal involvement depended on the level of incarceration trauma youth experienced. These findings support efforts for a developmentally-informed approach to juvenile incarceration (e.g., NRC, 2012) so that youth do not become ensnared in the justice system and instead find their experience to be a turning point in their criminal trajectories.
References


 CHAPTER 4 – GENERAL DISCUSSION

The overall purpose of the current studies was to evaluate the impact of incarceration on formerly incarcerated youth’s post-release psychosocial adjustment from two approaches. First I evaluated the impact of abuse during incarceration on post-release psychosocial outcomes (i.e., posttraumatic stress, depression, and criminal involvement) while exploring the prevalence and types of abuse that youth experienced. Second, I evaluated whether youth considered their time spent incarcerated as a turning point in their lives using two methods (i.e., quantitative and qualitative). The main findings of these studies are presented below.

What types of abuse do youth experience during incarceration and how prevalent are these experiences? Results from Study 1 indicated that youth experienced a broad range of abuses during incarceration including direct, witnessed, and vicarious abuse experiences. When these forms of abuse experiences were combined, nearly all youth experienced some type of abuse (97%). The most commonly reported type of abuse was vicarious exposure to peer physical assault and staff physical abuse and the least prevalent reported form of abuse was direct sexual abuse by staff and peers.

How is abuse during incarceration associated with mental health problems and criminal involvement post-release? As shown in Study 1, the more frequently youth were exposed to abuse, all types combined, the more likely they were to have higher rates of post-release criminal involvement, depression, and PTSD symptoms even while controlling for child maltreatment and time spent incarcerated. These findings indicate that how the system and its staff treat youth during incarceration impacts their
outcomes post-release. These findings are also in line with prior research showing that the more negatively youth perceived their incarceration experience the more likely they were to recidivate both officially or by self-reported delinquent involvement (Schubert et al., 2012).

Along with the findings from the study by Schubert et al., (2012), the findings from Study 1 highlighted the role of subjective viewpoint of incarceration. A prime example of this point is whether the experience of physical abuse during incarceration would have been considered legal use of force or not. According to results from Study 1, it might not matter to youth if the physical abuse was legal; what makes it relevant for youth outcomes seems to be the perception of the experience as abusive. This is a grey area in justice settings as the use of force is legal and, in some facilities, common. Future research on these routine practices and youth’s perception of them would illuminate physically and psychologically safe ways in which staff can manage youths’ behavior. In addition, these findings indicate that future intervention and prevention efforts should target training of staff so that they are equipped to work with extremely vulnerable, and sometimes dangerous, youth.

How much do previously incarcerated youth perceive change in their lives following (and because of) incarceration? How is this related to post-release adjustment? Results from Study 2 indicated that there was large variability in how much change youth perceived in their lives as a result of their incarceration experience. The finding that individuals reacted to and made meaning of their incarceration experience differently suggests that juvenile incarceration may not be a universal turning point for all
youth. This finding raises additional questions about how important subjectivity is when evaluating turning points, particularly when the majority of the literature on turning points utilizes researcher-defined turning points (i.e., a researcher chooses a particular event and samples a subpopulation that has experienced the event). Future research should strive to include participant’s viewpoint, as in the current study, when evaluating the impact of turning points.

Importantly, different types of psychosocial outcomes were affected differently from the amount of change one perceived following incarceration. As expected, the amount of perceived change was positively associated with social support and self-esteem, and negatively associated with depression. However, in contrast to my hypotheses, it was not associated with PTSD symptoms or criminal involvement. In fact, I expected perceived change following incarceration, conceptualized as a continuous measure of turning point effects, to have the largest impact on criminal involvement. In contrast, it was not associated with criminal involvement either in the final regression model or at the bivariate level. This finding provides further support for the importance of the subjective nature of turning point events and how one makes meaning from it. Perhaps, the effects of some turning points may be domain-specific; some turning points, such as incarceration, may not necessarily instigate change for overt behavioral outcomes (e.g., criminal behavior). Future research should identify types of turning points that are potent in altering criminal trajectories compared to turning points that may alter other psychological and behavioral processes and explore why this might be the case.
Does the relation between perceived change in one’s life after incarceration and post-release adjustment depend on the experience of trauma during incarceration? As shown in Study 2, the effect of perceived psychosocial benefits following, and because of, incarceration (i.e., perceived change) on depression, criminal involvement, and PTSD symptoms was moderated by incarceration trauma. This interaction effect did not hold for self-esteem and social support. Those who reported high levels of incarceration trauma coupled with high levels of perceived change reported lower levels of depression and criminal involvement. On the other hand, low levels of perceived change coupled with high levels of incarceration trauma predicted increases in criminal involvement and depression. These associations were similar for the outcome of PTSD symptoms but the simple slope was only marginally significant. Therefore, the relation of perceived change on adjustment outcomes depended on incarceration trauma, but only for those who experienced higher levels of incarceration trauma.

Interestingly, however, the interaction effect was, in part, in the opposite direction than expected. I expected that those who experienced high levels of perceived change coupled with high levels of incarceration trauma would have worse outcomes, but found the opposite. In addition, I expected that those who experienced high levels of perceived change coupled with low levels of incarceration trauma would have the best outcomes; while this was in fact true, the simple slope for this group was not significant, suggesting those who had low levels of incarceration trauma had better outcomes regardless of the level of perceived change. Thus, perceiving benefits from the incarceration experience was most meaningful, and possibly necessary, among those who experienced high levels
of incarceration trauma because they needed to make meaning of the abusive experiences in order to recover. This interpretation is in line with the research on posttraumatic growth and is discussed in more detail below.

Do youth subjectively identify incarceration as a turning point? When asked to identify a turning point in their lives, nearly one-quarter of the sample listed incarceration. However, other turning point themes were also identified, including traumatic loss (e.g., sudden death of a parent or family member), parenthood, gunshot injury, and events related to crime, peers, drugs, poverty, and having a realization. Indeed, participants indicated a variety of turning point events in their lives that may be related to youth’s psychosocial outcomes following incarceration including desistance.

The current studies illustrate how complex turning point events and their subsequent impact are. Altogether, findings suggest that the conceptualization of turning point events and their outcomes were variable, and the quality of the turning point experience moderated the turning point effect. Ultimately, the answer to whether the juvenile justice system (or incarceration) is a snare or a turning point for youth is: it depends on who you ask. Much like many developmental phenomena, the impact of a potential mechanism for change depends on the level of another variable and/or individual differences within the population under study. However, it seems that the subjective nature of turning points, the variability of turning points, and the effect of trauma during incarceration are all important aspects related to the influence of turning point events on post-release adjustment, which warrants further discussion.
Turning Points as a Mechanism for Change

The current study illustrates that there may be a difference between researcher-defined turning points and what youth subjectively identify as a turning point. It seems that the definition of turning points, at least from the eyes of participants, is about whether the event has brought significant changes in their lives and how important or major the life event was. Youth in the current study had experienced a number of major life events and adversity beyond incarceration in their lives, and thus the incarceration experience may not have been the most salient life event that turned their lives around. Many of them were teenage parents, had maltreatment histories, were in the foster care system, had been arrested and incarcerated multiple times, and experienced significant traumatic loss. It is possible that among a less vulnerable population the incarceration experience may stand out as a more commonly reported turning point given it would be a more unique experience.

Given the broad range of major life events youth experienced, another consideration is that studying the impact of just one event may in fact be capturing only part of the picture. In a recent study of the effect of marriage, employment, and high school graduation on adult arrest among adults who were maltreated as a child, these three potential turning points had a cumulative effect in reducing adult arrest (Allwood & Widom, 2013). Specifically, those who experienced all three events were 89% less likely to be arrested as an adult and those who experienced only one event were less likely to be arrested as an adult by 32%. Importantly, the protective effects of these turning points were similar for both maltreated and non-maltreated children (Allwood & Widom, 2013).
Instead of focusing on a single turning point event, examining the cumulative effects of multiple turning points, similar to the studies of cumulative risk factors, may be more fruitful way to unravel the impact of turning points on criminal trajectories.

If turning points are indeed a mechanism for change, it is important to explore what is actually changing. In the current study, I focused on not only criminal offending, but also psychosocial adjustment. Generally, I expected changes in psychosocial adjustment brought by turning points to be in the positive direction; that the identified turning points and perceptions of change would improve psychosocial adjustment. This hypothesis was consistent with previous work on turning points, which has generally focused on recovery and resilience after turning point events (e.g., Natsuaki, Ge, & Wenk, 2008; Sampson & Laub, 1993). However, it is also possible that turning points can contribute to decreases in psychosocial adjustment instead, especially when the event is negative. Indeed many youth discussed traumatic loss as a turning point and one youth said specifically that, “the change was not a good change”. The fact that changes following a turning point can be either positive or negative makes it even more important for future research to explore which outcomes (e.g., psychosocial change) should be theoretically linked with specific turning point events. Study 2 was a step in this direction as both positive (e.g., self-esteem and social support) and negative outcomes (e.g., depression and criminal involvement) were included.

While turning points can instigate both positive and negative psychosocial change it is still unclear how best to evaluate when the change is occurring. Psychosocial changes can happen in a gradual process occurring over a long period of time or they can happen
more suddenly. It is possible youth were experiencing psychosocial changes following incarceration but the improvements (or maladaptation) in the outcomes were occurring at different rates. Thus, the one year post-release time frame may not have been long enough for some of the youth to actualize any noticeable changes in their psychosocial adjustment due to the turning point event. Future research on turning points should consider the rate of change in criminal trajectories through longitudinal methods in order to tease apart those who may be in the process of change (e.g., slow but gradual shifts in psychosocial adjustment) from those who did not experience any change associated with their incarceration experiences.

**Turning Points vs Traumatic Events: An Integrative Framework**

Considering the types of turning points discovered in the current study as well as their outcomes, a question arises: are traumatic events inherently turning point events? Since turning point events can be a negative or positive experience, it does leave the door open for the possibility of stressful or potentially traumatic events to also be considered a turning point. This question is especially important to consider when evaluating the findings from this study for two reasons. First, in this study, the construct of perceived change after incarceration was assessed by an adapted version of an inventory that was designed to measure change following a traumatic event. Second, I conceptualized, incarceration to be a potential turning point for incarcerated youth, but what I observed in Study 1 was that the incarceration experience youths underwent in facilities was characterized by abusive (and thus potentially traumatic experiences) treatment.
According to Rutter (1996), stressful life events and turning points are not the same constructs. In fact, many turning points events that are studied are not inherently stressful (Rutter, 1996). However, turning points and traumatic events share some characteristics. Both the turning points and trauma literature reveal potential for change following a significant event and that the impact brought by the event can be either positive (improvement) or negative (aggravation). The growing literature on posttraumatic growth can shed light on this point. Posttraumatic growth is the process of positive adaptation following a traumatic event (Tedeschi & Calhoun, 2004). It can be thought of as benefit finding or thriving following, and because of, a traumatic event (Tedeschi & Calhoun, 2004). It is often also considered a coping strategy where an individual can find meaning in their experience in order to grow from it (Park, Aldwin, Fenster, & Snyder, 2008). On the other hand, there is also a substantial body of work that shows the negative effects of traumatic events such as posttraumatic stress disorder, depression, suicide, and drug abuse (Flannery, Singer, Wester, 2001; Ford, Elhai, Connor, & Freuh, 2010; Thornberry, Henry, Ireland, & Smith, 2010). In this conceptualization, traumatic events are similar to turning points because both events trigger dramatic changes in the life course.

There are, however, differences between these concepts. For instance, the valance of events is an important distinction. The nature of a traumatic experience is always negative and turning point events can be either positive or negative. In fact, the majority of turning points that have been identified in previous work are positive experiences (e.g., marriage, employment, graduation, etc.; Rutter, 1996). Likewise, one of the common
turning point events described in Study 2 was that having a child was a transformative experience that positively impacted their life. For instance, one youth stated; “My son’s birth, since I’ve seen it I felt happier, it was amazing. The best feeling ever. He’s my pride and joy, not one day goes by that I regret my son. I will forever love him and try my best to give him a better life. Better than mines [sic], and simply be there for him.” This is not a typical statement to hear from someone who experienced a traumatic event. An individual may feel that s/he has become a stronger person following a traumatic experience (e.g., posttraumatic growth) but it is extremely rare that s/he would be glad that the traumatic event happened in their life.

Most importantly, trauma does not always change a person’s developmental trajectory but, by the definition, turning points do. Traumatic events are experiences that many people hope to, and try to, forget. While some people do experience significant change in their lives following trauma, the clinical response to trauma is, in fact, to aid a person in reducing the impact the event has on their life. This response is in stark contrast to many turning point events where people may work to strengthen the impact it has on their lives.

In light of their differences and similarities, it follows that turning point events can be traumatic events but not all traumatic events are turning points. Perhaps, turning points represent a more broadly defined experience; Traumatic events can fall under the umbrella of turning points but do not always do so. If one believes the experience of a traumatic event has altered his/her life course in some way, then the traumatic event becomes a turning point through meaning making of the experience or restructuring of
his/her life. This speculation is partially supported by the interaction effect that I observed in Study 2: there was a group of individuals who experienced high levels of incarceration trauma that also had lower levels of depression and criminal involvement post-release if they perceived the incarceration experience to be a significant influence on their life trajectories. It is likely that these individuals who experienced both high levels of incarceration trauma as well as high levels of perceived change considered their negative incarceration experiences to be a turning point and thus perceived more change and benefits because of it. Therefore, trauma is not always a turning point, but it can be for some people.

Regardless of whether or not youth viewed their incarceration experience as a turning point, being abused and victimized during incarceration is against youth’s constitutional rights and warrants increased prevention efforts. Considering the juvenile justice system as a context for adolescent maltreatment prevention is one strategy that can transform the treatment of incarcerated youth.

Unfortunately, juvenile justice systems, specifically juvenile facilities, are rarely targeted for maltreatment prevention. This is particularly surprising given the fact that adolescents – in and outside of the juvenile system - have similar or higher rates of maltreatment experiences when compared to younger children who receive more attention in maltreatment prevention efforts (Finkelhor, Ormrod, Turner, Hamby, 2005; Raissian, Dierkhising, Geiger, & Schelbe, 2013). Ryan and colleagues (2013) aptly state that; “young children are often viewed as troubled and older children are more often viewed as troublesome” (Ryan, Williams, & Courtney, 2013, p. 462). Youth in the justice
system are undoubtedly viewed as “troublesome”; however, they are still minors and legally afforded a higher level of protection. The fact that they are also perpetrators of crime does not negate their right to be safe while incarcerated.

**Future Directions**

Moving forward, there are a number of questions surrounding the concept of turning points that could be explored in future research. Most importantly, the refinement of the conceptualization of a turning point is needed. In line with the current findings, a turning point can be a variety of experiences or events. These experiences can be internal or external, positive or negative, and they often include a subjective component in that the person perceives the event as important in their life course. However, the event is only a turning point if it instigates and produces some type of change in a person’s daily life, often through behavioral or psychological changes, and these changes can be either positive or negative to one’s life course. Because of the dynamic nature of turning points it remains unclear as to what it is about the turning point that instigates the change. In addition, the impact turning points have on later outcomes likely depends on the type of turning point as well as the quality of the turning point experience. As we continue to explore these questions we can further discover how best to measure turning points and their associated change processes.

Findings from the current study reveal that there is a subjective component to turning points. The remaining question is whether there *has to be* a subjective component to a turning point event. Many of the turning points that have been explored in the social bonding and life course literature (e.g., marriage, military service, etc.) have a turning
point effect despite evaluating the potential subjective nature of those experiences. It may be that these types of experiences, many of which are more related to social institutions (e.g., living with a spouse), redirect one’s trajectory by imposing a new structure in one’s daily activities and expectations for behavior. Turning point events that are more subjective, particularly those that are internal experiences (e.g., realizations), may function differently from turning points that are more clearly tied to social institutions in terms of how they impact a person’s life and which outcomes they influence (e.g., criminal trajectories vs. self-esteem).

However, restructuring of one’s daily life does not necessarily have to come from external mechanisms such as social institutions. Consider alcoholics who often refer to “hitting bottom” as their turning point. In a study by Dunlop and Tracy (2013) they found that recovering alcoholics who told their stories about becoming sober with a redemptive quality, conceptualized as benefit finding from an adverse experience, were more likely to stay sober. Redemptive stories are a way to restructure how one thinks about their experience, and it is this cognitive restructuring that seems to be the mechanism for change. For instance, Dunlop and Tracy (2013) work examined how alcoholics told the story of their experience. This narrative approach bears resemblance to the concept of turning points in that those that were able to see their experience as transformative in some way exhibited behavioral and psychological change. This approach may be fruitful in further exploring what it is about the turning point experience that instigates, and maintains, the change following a turning point.
Further exploring the intricacies of turning points and their effects will illuminate how we can best measure turning point events and their effects. The current study provides an example of the dynamic nature of turning points by measuring turning points from multiple perspectives. While the traditional approach of researcher-defined turning points has made significant progress in understanding the impact of turning points, there is still a lot to learn. Clarifying the meaning of turning points and expanding assessments of turning points can hopefully continue to advance our knowledge of turning points – and ultimately the process of developmental change.
References


of posttraumatic, depressive, and substance use disorders and involvement in delinquency in a national sample of adolescents. *Journal of Adolescent Health, 46*, 545-552.


Appendix A

Thematic Categories and Turning Point Responses

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<th>Themes</th>
<th>Responses</th>
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<td>Incarceration</td>
<td>The turning point in my life was going to Jury because I was hearing a lot of different cases where people were never getting out of being incarcerated. Getting locked up was the turning point for me because it’s no fun having to be what other people tell you to do or getting into fights with people cause of what you say or getting off was my time to change because I don’t ever want to go back there. I was 17 years old when I first went to Juvi [sic]. I was feeling very alone, sad. And very mad. After being in juvi [sic] I was sent to placement there I spent 6 months of my life and I was very frustrated. All these frustrations made me realize this was not the life I wanted or need. I’m looking to better myself and hope one day I can say I’m happy the way my life turned out. Rehab because I met people who actually cared about me, and cared about what I had to say. They showed me the real reasons why I was doing what I was doing, and how it was pointless. I think Being in Juvenile Hall changed me Because I used to not care a lot about stuff or people and now I do Because when you’re in there you find out that you miss things and people that try to help you. Being sent to the rehab center as part of my detention time was my turning point. When I stepped in through those doors I didn’t take the program seriously and that I could have fun with my stay there. As time passed, I became aware of my behavior and negative actions once I became aware I opened up to the program and worked on the areas I was going wrong in. I can say I had an attitude adjustment because of that program, and since then I’ve been striving for nothing but accomplishments. Being in jail changed me because I wasn’t really doing anything with myself. I was drinking, partying, fighting, &amp; using drugs and not going to school. After, I came out of camp I realized that I had to do something positive with myself. So I did. I stop being around with</td>
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bad influence & got my act together & found a job here at [xxx].

Not want to go to jail anymore and experience what I don’t wanna [sic] go through in life.

While being incarcerated I realized my way of thinking was inappropriate. I realized how ignorant some people are. So many politics, so many rules. And it’s not voluntary no more, it’s mandatory. Life is precious, god blessed me with my way of thinking. Now I’m living life.

Being incarcerated change my old ways, for example looking at things different, my thinking change. I don’t know how to explain it but everything about me change into a positive way.

Change itself. This thought came to mind the first time I was incarcerated. I was facing to go to CYA. The thought was that I wasn’t going to get out in time. Thoughts came flowing there in my head thinking I’m going to miss out on a lot of things. And if I don’t change, I’m going up in worst situations. So little by little I have to make a change.

There’s no really no turning point in my life that I could think of except getting incarcerated was at least one thought.

Well by being incarcerated help me realize what is really happening in life you go through ups and down and everybody is bright in their own way if you put your mind to it. You can say being looked up was my down fall but now happy off probation well educated going to be a RA.

When I was locked up In “the Compound” in [xxx] I was facing 53 years to life for something I didn’t do, now I beat my case and now that I’m out I think a lot about the better things in life I got now.

It made me change the way I am when I got locked up that change the way of me being with others and also stop from being in the wrong crowd. Now I am a different type of person.

It was a day in camp when I realize I don't want to live like this. Looking around and just thinking about life my using and criminal record. I'm hurting others.
Death

When I was just recently in camp I was supposed to get released [xxx] 3 days before my birthday but because of all the fighting I did my judge gave me 6 more months to do which in total would make one whole year. I got a phone call a couple of days later saying that my great-grandmother the one who raised me was on her death-bed it made me change because I saw that my actions made me miss out on my last days with someone important.

It was at the age of 12 when I witness the death of my cousin that changed my life. The change wasn’t a good change. Things after that became worse I joined a gang and started my drug life. This change got me to where I’m at right now I’m struggling in school, and because of my drug use I’m unemployed.

The day my friend [xxx] died. It happened at the park as he was walking to the baseball field. I was kickin it near the bathrooms and he was coming from the homie’s pad. A white escalade was on ditman [sic] and busted a drive-by on my homie and he got shot in the leg, head, and arm. The homeboy [xxx] ran to him I stood in shock, we called the staffs they called the ambulance and that was it. He was gone and since then I thought twice about what I wanted to do.

The passing of my close homie which did wake me up. It gave me that push to take a step back and see the importance of life.

This last time I was locked up, one of my friends mom passed away while he was also locked up. It made me realize that I need to stop going back to jail and theres better things out there that need to be cherished and gangbanging is not of those things.

When I was at camp I had gotten a phone call by my RO. When I called my friend he didn’t answer his phone was off and I called his mom and she told me he had passed away 2 weeks ago and that he had been shot three times in the head around the corner of his house. When I first heard everything I couldn’t believe it, but as the days went by I realized that no one is safe in this game anyone could be killed

My turning point was when of my close friends was murdered over gang related issues. It actually woke me up into realizing its honestly not worth gangbanging. And I also realized there is much more to see in the world other than gangbanging. My friend was about the same age as me, which is why it hit me pretty hard. It has impacted me
immensely even to this day regarding in how I live my life and in how I see the world.

When I was in and out of juvenile halls and my father was sick. It has changed my life!!! I was too busy gangbangng in the streets, I really never paid attention that my dad was sick. He ended up passing away while I was in placement! It made me realize a lot of things… And I have become a different person towards my family. I Have more time and bond with my mom and family as much as I can.

My grandma told me that when my mom passed away at the age of 3 I had to start taking mood disorder medicine and I feel like that has changed my life.

When my mom got ran over by a drunk driver and died in front of my eyes when I was young. It was me, my sister, & my mom walking to the market and my mom was about to cross the street when a truck came really fast and hit her and the bumper of the car kept dragging her around the street onto the sidewalk and she died instantly. This happened in [xxx], when I was 10 years old in South Central around 7:00 PM.

Child-Related

My daughter, she changed my life completely. I graduated High school planning to go to college. I stop drinking being out of the streets haven’t gone to jail over a year, so I think having my baby was a very important change in my life.

My son’s birth, since I’ve seen it I felt happier, it was amazing. The best feeling ever. He’s my pride and joy, not one day goes by that I regret my son. I will forever love him and try my best to give him a better life. Better than mines [sic], and simply be there for him.

I found I was going to have a baby and I’ve been trying to turn my life around ever since.

My son. Well I was In the street gangbangng hurting people and doing mean things when I had him everything change and I have a different perspective in life.

When I was in the halls the staff gave me a Phone call. Then I called my girlfriend and she told me that she was pregnant and from that day I been try to become a better person so I can set an example to my son.
When I was 17 I was in camp when my daughter was born. It was a turning point because it made me never want to get locked up again. I have had some bumps on the road, but she will be the reason for my success.

I had my kid, it was the best moment in my life knowing that I had someone to live for. I now had a reason to do better in life. I know I have to change because I want my son to look up to me.

I feel like when my sister was born it was a turning point because we moved to a different house and grew up in a different community.

I would say catching a case with the D.C.F.S and having to get my Daughter removed from home and get put in a foster home. It made me stop doing drugs getting in trouble with the law and become more responsible in life. In order to get my kid back home.

After I got out my mom got sick. I haven’t lived with my parents since I was 16 yrs and now my goal was to switch the game and make my parents proud of me. So I went on a little vacation after my incarceration. I went to Mexico. 1. I needed to take a break from this fastlane life in Cali. 2. I was tired of these fucken [sic] cops always trying to bust someone and 3. My family needed me. So I left to Mexico where my family lives at. I left on my own and came back on my own. Undocumented! But deep inside me I knew destiny had taken place when I left. Now, at Mexico is where life did its magic. At Mexico is where I became who I am now. Living that life style, being in the real poorness of my Puebla made me realize a lot and made me open my mind. At Mexico I found out what life was really about. I wasn’t about money and guns and bitches no more. It was about tradition, value of life, appreciating this beautiful life that we have. I could tell you more but I’ll catch you another day Karly :p… Anyways my life has been fun. I learned to LOVE my life. I learned to look at my life like a journey, and it just feels great to be alive. Thanks to my trip to Mexico, and thanks to god for giving me another chance. I will continue striving forward and keep reaching 4 the stars. I’m outs…..

An important event for me that helped me to change my life was when my mom graduated from law-school. It made me change the way I think because if she reach her dreams at an old age I’m able to do the same.
What comes to mind when they say “turning point” is when my family and I got separated. It was Horrible, the worst feeling ever, especially seeing my little brother get taken to a foster home. But I got through it and so did my family. I’m glad we were strong enough to get through this tragedy.

Well my mom came to see me she had Just moved back out here it changed a lot because i hadn’t seen her in 6 years and I was very nervous when she told me she wanted to come see me the next day so I was gonna flack on her but I didn’t and when I seen her it put my heart at rest and all the nervousness went away. Now I feel better about my life.

Peer-Related Once upon my life I hit a turning point of my life. That other older gang members are liars. They tell me so many things, but they don’t even follow. What I learned that in this life It’s all lies and deception. I realize that it just about survival. So I made my own rules and ways, lately they been working for me I have been out of trouble since and in peace.

I felt my life hit a turning point when I got involved in gangs. I started getting deeper and deeper in it. The money was looking good so that’s what I started pursuing. Then I went to jail then things begun to get bad.

When I was in elementary and middle school, I was always the smart kid. Always completing all my assignments and homework. But when I started high school that is when everything changed. Something unexpected to me. That is where it all started. I started hanging around the wrong people always getting into trouble, abusing drugs and alcohol, and tagging. My grade in class started going down, except math, since I loved that class. I realize why this was a big change to me and why it happen. During those times I felt alone, very little friends. I just felt out of place. Once I got in my crew I felt I belonged there. Even though things I did weren’t right.

Meeting New friends. I seen [sic] that I started changing. Started hanging out late and sometimes not coming home.

Hanging around with negative peers.

I feel like that the friends I had back then were not really my friends. So I made new friends.
Shot or Shot at  

The day I was shot at was an eye opener because I seen that life is too short and I want to be here on earth to raise my son.

For standing there homie got shot, for no reason. – And not to do what we did (big change).

In October 21, a couple a years ago I was chilling with my brothers and we were walking it home and I guess my brother’s rivals seen my brother and they started shooting at us luckily my brother got away I got stuck because I was young so I seen the gun point at me and I ran he started shooting at me and got on both my legs. But I can still walk thanks to god.

Walking up the street with a friend and a cop pulled up on us and quickly drew his gun at us, by the time the cop was out we had ran and the cops shot twice at us. It made me realize that every day we Latinos get harassed by cops for fun.

Crime-Related  

I experienced people robbing and it made me want to try it. I was with a group of friends. I was feeling scared and excited at first.

So one turning point in my life was last year when I was seventeen. In January I was dealing with this break up. I was all heart broken and depressed. So I drowned my sorry in alcohol. Me and my two friends were drinking liquor and using. So I don’t remember much. The things I remember doing is that we were trying to steal a car to go to the block but the owner caught us. So he hit me and we all get mad and rush at him inside his job. We start fucking that foo [sic] up then we here sirens and we run… The fact that he was hurt bad and that the detectives were looking for me two days changed my life b/c poor guy was in the hospital, luckily didn’t press charges. And that’s why I’m here today trying to better myself for the community and me.

Got a gun taken away from, like they say in the movies. “My life was flashing before my eyes”.

Realization  

The most important change I did in my life is to realize that in this world no one is going to care about you. So you gotta be on your toes
and be ready to do something for your life. Cause no one is going to be there for you. Only yourself.

I have realized I need to remove my tattoo from my face because I believe I can do better things for myself and my family.

A turning point in my life was the day I finally realized that life made no promises. Everything that I do would have an effect whether it was positive or negative. When I finally understood the definition of insanity, that no matter how many times I do the same thing I will always get the same result. With that came forgiveness, understanding, love, happiness & a positive outlook on life.

### Drug-Related
There is an important change in my life. Is that I don’t do drugs no more. I realize that drugs is only going to take me to the wrong way. To death, jail or take my family away.

Looking back in my life of how I used to be. Was a terrible mistake using drugs and alcohol. I was really in bad and wrong paths. Ever since I got out of camp. I look at things different you don’t necessary need drugs and alcohol to have a Great time [sic].

### Poverty
When I was young my family and I were homeless and had to sleep in a public restroom. I was about 10 years old.

Once upon a time in my life me and my family was poor and really didn’t have no place, no money no nothing we were really poor and that had an impact on my life because I used to get teased about it. But now my life has changed because I’m living a great life.

### Unable to Code
I can’t think of anything.

The attention as a kid that was not there. So there in search of it by myself. Not know where to be found.

[no response]