The Trajectory of a Traumatized Youth: A Three System Perspective

Opportunities to Interrupt a Negative Trajectory

Child Welfare System

Education System

Juvenile Justice System

These graphics are meant to inform, educate and prompt discussions about the specific youth behaviors the child welfare, education and juvenile justice systems may see as a result of trauma. They are also intended to highlight the individual and cross-system policies and practices that can empower systems to improve outcomes for these youth.
How Can Traumatic Stress Contribute to Delinquent Behavior?

**Event**
- Traumatic Event / Pervasive Traumatic Experiences

**Mitigating Protective Factors**
- Age
- Coping skills
- Developmental level
- External supports
- Frequency of traumatic events
- Inherent resilience
- Perception
- Supportive relationships
- Sensitivity

**Experience of Event**
- No Symptoms

**Effect of Event**
- Partial Post-Traumatic Stress Disorder (e.g., shows PTSD symptoms)
- Full PTSD (e.g., PTSD diagnosed)
- Complex trauma
- Displays other traumatic stress symptoms (e.g., depression)

**Possible Symptoms**
- **Biological Processes**
  - Behavioral inhibition
  - Alterations in brain structure and function
  - Alterations in neurochemistry and the HPA System
- **Emotional Process**
  - Emotion dysregulation
  - Emotional numbing
  - Acquired callousness
  - Experiential avoidance
  - Impaired emotion recognition
- **Cognitive Process**
  - Interpersonal processing deficits
  - Alienation
  - Moral disengagement
  - Stigmatization
  - Cognitive immaturity
  - Impaired recognition of and response to risk
  - Futurelessness
  - Impulsivity
  - Hostile attribution bias
- **Interpersonal Processes**
  - Disrupted parent-child relations
  - Disrupted friendships
  - Disrupted romantic relationships
  - Disrupted social/transactional interactions

**Possible Behaviors**
- Academic failure and/or underachievement
- Aggression
- Associates w/ at risk peers in high risk situations
- Bullying
- Chronic running
- Emotional detachment
- Defying authority
- Depressive symptoms
- Destruction of property
- Difficulty paying attention
- Difficulty processing new information
- Disengagement from school
- Distrust of others
- Distrust of authority
- Dropping out of school
- Exacerbation of learning disability
- Failing classes
- Heightened fight, flight or freeze response
- Hypervigilance
- Hypersensitivity to loudness and violence
- Impulsivity
- Inability to be soothed and comforted
- Inability to bond
- Memory challenges
- Moral disengagement and legal cynicism
- Poor problem solving skills
- Physical regulation difficulties
- Rejection sensitivity
- Re-enactment of trauma
- Risk taking / seeking
- Self-harming
- Separation or detachment from pro-social role models
- Sexual acting out
- Social isolation
- Substance abuse
- Suicide threats
- Trauma affected sense of empathy
- Truancy
- Uncontrollable tantrums
- Violence


Please visit rfknrcjj.org/resources for a complete list of references and additional resources.
How can the **Child Welfare** System Respond to a Youth with These Behaviors?

**Cross-System**

- Staff, parents, and substitute care providers receive ongoing training on the impact of trauma and provide more trauma-focused treatment
- Provide cultural competency training on the prevalence and impact of trauma for gender, sexual identity/orientation, racial and ethnic populations, and refugees
- Create a trauma-focused protocol for screening, assessing and serving youth
- Establish a service delivery system of providers that are trauma informed and subscribe to evidence based practices
- Look for opportunities to increase prosocial activities
- Ensure school plans and records (e.g., IEPs) follow the youth through school and placement changes
- Develop and implement an individualized, trauma-informed, cross system plan that addresses the unique needs of the youth
- Assess the child’s environment for safety or support prior to implementing an intervention
- Conduct a physical health assessment
- Engage family in youth’s plan of care

Ensure available support for parents who have experienced their own trauma history

- Establish a system that ensures placement stability and reduce youth exposure to placement disruption
- Ensure youth receives Independent Transitional Living Skills Training and is engaged in pro-social activities
- Develop a collaborative system between child welfare, education, and behavioral health
- All youth’s educational needs are being met by ensuring available access to educational advocacy

**Child Welfare**

- Limitations on criteria for extending voluntary services to families when they are seeking voluntary services
- Fragmented child serving agency that does not always collaborate in ways that address what is in the best interest of the youth, but rather driven by budgetary restraints
- Home removals and placement disruptions due to lack of in-home trauma based supportive services that can be accessed in a timely manner and without being placed on a wait list
- A system that exposes a youth to multiple workers during the different stages of the case history with the Child Welfare agency
- Placement instability leads to a child’s move from school system to school system, causing them further delays
- Placement instability leads to disruption in prosocial contacts/activities and consistent service providers

**Positive Outcomes for Youth**

- Youth is not re-traumatized due to harmful and ineffective system practices
- Low-risk youth are diverted from the system and given the services they need to ameliorate their individual needs
- Youth stays in school and graduates from alternative educational or vocational training programs that lead to a living wage job and career
- Youth receives appropriate mental health services
- Youth receives appropriate substance abuse services
- Parents will enhance their ability to care for their children when addressing their own trauma histories
- Youth is able to maintain a consistent home and school setting, thus allowing youth the ability to stabilize, connect, and attach to caretaker(s) while also reducing their chances of losing personal items/belongings as a result of moving from home to home
- Youth are able to successfully live independently when necessary, have positive social connections, and engage in pro-social activities that allow them to become successful/productive adults
- Youth receives culturally relevant treatment and supervision services that take into account the youth’s history of maltreatment and assist the youth in identifying triggers, protective strategies, and coping skills
- Youth is provided with prosocial opportunities that enhance their protective capacity
- Youth does not move into the juvenile justice systems
- Restoration of trust in the social contract

**Negative Outcomes for Youth**

- Families who could benefit from early intervention do not get it due to lack of clear policies and available resources
- Lack of ongoing staff training and expertise around trauma leads to inability to accurately assess the right behaviors and access the right intervention for youth
- Missed opportunity to keep families intact while providing intensive in-home behavior services; if services cannot be easily accessed, long wait list, or is unable to accommodate bilingual capacity
- Child gets further and further behind academically

**Interrupts Negative Trajectory**

- Positive Outcomes for Youth

**Perpetuates Negative Trajectory**

- Negative Outcomes for Youth
### Education System Response to a Youth with These Behaviors

**Cross-System**

- Provide annual training to all professional and support staff to recognize the signs and symptoms of trauma.
- Provide cultural competency training on the prevalence and impact of trauma for gender, sexual identity/orientation, racial and ethnic populations, and refugees.
- Create a trauma-focused protocol for screening, assessing, and serving youth.
- Establish a service delivery system of providers that are trauma informed and subscribe to evidence-based practices.
- Look for opportunities to increase prosocial activities.
- Ensure school plans and records (e.g., IEPs) follow the youth through school and placement changes.
- Develop and implement an individualized, trauma-informed, cross-system plan that addresses the unique needs of the youth.
- Assess the child's environment for safety or support prior to implementing an intervention.
- Conduct a physical health assessment.
- Engage family in youth's plan of care.
- Provide universal mental health screens at registration.
- Consistently implement Positive Behavioral Intervention Strategies.
- Ensure Child Find protocols are identifying and serving youth with educational deficiencies.
- Create in-school policies for dealing with truancy.
- Create in-school policies for dealing with low level infractions or offenses (bullying, physical altercations, etc.).
- Offer in-school alternatives to suspension.
- Offer re-engagement programs (e.g., credentials, apprenticeships) for students who will not graduate.

**Education**

- Zero tolerance policy.
- Suspension.
- Expulsion.
- Profiling and labeling troubled youth and families.
- Delaying or avoiding IEP or 504 assessments.

### Positive Outcomes for Youth

- Youth is not re-traumatized due to harmful and ineffective system practices.
- Low-risk youth are diverted from the system and given the services they need to ameliorate their individual needs.
- Youth stays in school and graduates with the assistance of appropriate academic interventions (e.g., IEP) or youth transitions to alternative educational or vocational training programs that lead to a living wage job and career.
- Youth receives appropriate and individualized mental health services.
- Youth receives appropriate substance abuse services.
- Parents will enhance their ability to care for their children when addressing their own trauma histories.
- Youth is able to maintain a consistent home and school setting, thus allowing youth the ability to stabilize, connect, and attach to caretaker(s) while also reducing their chances of losing personal items/belongings as a result of moving from home to home.
- Youth are able to successfully live independently when necessary, have positive social connections, and engage in pro-social activities that allow them to become successful/productive adults.
- Youth receives culturally relevant treatment and supervision services that take into account the youth's history of maltreatment and assist the youth in identifying triggers, protective strategies, and coping skills.
- Youth is provided with prosocial opportunities that enhance their protective capacity.
- Youth does not move into the child welfare or juvenile justice systems.
- Restoration of trust in the social contract.

### Negative Outcomes for Youth

- Drop out of school permanently.
- Unsupervised time at home leads to delinquent acts and involvement in the Juvenile Justice (JJ) system (go to the JJ trajectory).
- Setbacks in academic achievement due to separation from structured classroom instruction which leads to potential negative self-concept, frustration, aggression, and potential school drop out.
- Family tensions rise with youth at home—possible domestic violence, runaway situations, increase in substance use (go to JJ trajectory).
- Youth experiences educational deficits and delays which leads to eventually dropping out.
- Youth's negative behavior possibly results in suspensions, expulsions, alienation from peers and school staff, suicide, violence, involvement in the JJ system (go to JJ trajectory).
- Missed opportunity for learning before brain maturity results in loss of plasticity which may lead to long-term vocational and educational consequences.
- Youth progresses into the Child Welfare and/or Juvenile Justice System.
Provide annual training to all professional and support staff to recognize the signs and symptoms of trauma.
Provide cultural competency training on the prevalence and impact of trauma for gender, sexual identity/orientation, racial and ethnic populations, and refugees.
Create a trauma-focused protocol for screening, assessing and serving youth.
Establish a service delivery system of providers that are trauma informed and subscribe to evidence-based practices.
Look for opportunities to increase prosocial activities.
Ensure school plans and records (e.g., IEPs) follow the youth through school and placement changes.
Develop and implement an individualized, trauma-informed, cross system plan that addresses the unique needs of the youth.
Assess the child’s environment for safety or support prior to implementing an intervention.
Conduct a physical health assessment.
Engage family in youth’s plan of care.

Establish a continuum of community-based services to provide treatment, support, and psycho-social rehabilitation.
Incorporate evidence-based practices like TARGET, Trauma-Focused Cognitive Behavioral Therapy, Mode Deactivation Therapy, Aggression Replacement Training, etc.
Ensure that youth programs targeting criminogenic needs are trauma-informed.
Use secure detention only as a last resort to protect others from violent delinquent acts.
Eliminate the use of seclusion as a disciplinary action in secure detention.
Add comprehensive Mental Health/Behavioral Health Wraparound service array that includes diversion options.
Trauma screening & assessment.
Employ developmentally appropriate & trauma-informed probation practices.
Undertake family finding for all youth prior to receiving aftercare.
Address underlying impacts of trauma and not just the criminogenic needs.
Judges utilize the National Child Traumatic Stress Network benchcard.

Mandatory detention or other restrictive sanctions for technical violations or other minor offenses.
Inappropriate use of secure detention (for status offenses or non-violent delinquent acts).
Abusive & overly restrictive institutional measures: physical, chemical, or mechanical restraints, or seclusion as a disciplinary action.
Probation practices that focus only on compliance and fail to establish strength-based, goal directed case plans that address needs.
Inadequate or inappropriate response to youth needs (failure to provide services or failure to provide the correct type or level of service).
Direct Commit statutes.
Lack of screening & assessment.
Under-investing in treatment resources.

**How can the Juvenile Justice System Respond to a Youth with These Behaviors?**

**Positive Outcomes for Youth**
- Youth is not re-traumatized due to harmful and ineffective juvenile justice practices.
- Low-risk youth are diverted from the system and given the services they need to ameliorate their individual needs.
- Youth receives appropriate and individualized mental health and/or substance abuse services.
- Youth receives culturally relevant treatment and supervision services that take into account the youth’s history of maltreatment and assist the youth in identifying triggers, protective strategies, and coping skills.
- Youth is provided with prosocial opportunities that enhance their protective capacity.
- Restoration of trust in the social contract.
- Terms and length of Probation are individualized & specific to the unique needs of the youth.

**Negative Outcomes for Youth**
- Missed opportunities to address the underlying issues that contribute to the negative behavior. Results in the youth feeling more disaffected and untrusting of adults & authority.
- Missed opportunity for healing before brain maturity results in loss of plasticity.
- Overly restrictive & punitive responses result in low and moderate risk youth interacting with high risk youth increasing their risk of behaviors and attitudes conducive to recidivism.
- Treatment needs left unaddressed can result in recidivism & deeper penetration into the system.
- Youth experience more traumatic events (incarceration, violence, sexual abuse, etc.) thereby compiling their trauma-related risks noted in columns 2 & 3.

**Cross-System**

- Positive Outcomes for Youth
- Negative Outcomes for Youth

**Juvenile Justice System**

- Positive Outcomes for Youth
- Negative Outcomes for Youth