



Op-Ed: Incarcerating disturbed youth is a flawed response

By: SUE BURRELL | September 22, 2014

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When I heard the news that an abused transgender teenager had been incarcerated in an adult women's prison, I believed that Connecticut – a state renowned for its esteemed universities and its past juvenile justice reforms -- would quickly correct the situation.

It was troubling that the “solution” provided by the system responsible for caring for Jane Doe was to incarcerate her in a boys' facility. The particular facts of Jane's case are unique, but the scenario of incarcerating severely abused children for entirely predictable behavior is all too familiar.

At the outset, we should prevent abused youth from crossing over into the delinquency system. Although the child welfare system supervised her from age 5 on, none of Jane's placements were designed to prevent further abuse or address her extensive exploitation and mistreatment. The underlying goal of child welfare intervention should be to assure that all children have a safe, permanent family. That never happened for Jane.

Incarcerating chronically abused children makes it even harder for them to develop into healthy adults. The National Research Council's landmark study, *Reforming Juvenile Justice: A Developmental Approach* found that what helps young people to move successfully forward in their lives is (1) strong, supportive relationships with parents or other adults; (2) exposure to prosocial activities and peers; and (3) the ability to exercise judgment and build skills.

All of these are difficult when you are locked up. Research indicates that incarceration actually exacerbates criminality.

Incarceration cannot meet the needs of young people like Jane. Most juvenile facilities have limited mental health services and lack staff qualified to address the extensive, complex issues associated with sexual abuse and chronic trauma.

Mechanical and hands-on restraint, strip searches and other procedures common in locked settings re-traumatize youth and frequently make their behavior worse. Also, transgender and gender non-conforming youth are frequently targets of harassment or sexual misconduct. When kids act out in institutions, they are often labeled as dangerous or in need of even more restrictive settings. The reality is that they need a setting where they feel respected, valued and safe.

So what *should* we do with kids like Jane?

First, we should refrain from trying to pigeonhole them into existing programs. We shouldn't be thinking about putting Jane in a place. Instead, we should design a response that addresses the harm she has experienced, recognizes her individual needs and helps her to develop into a healthy adult.

Jane is surely not the only child who has been incarcerated when other responses would be more effective. Although youth crime has been dropping for more than a decade, Connecticut is moving toward more incarceration. As other states closed juvenile prisons, Connecticut opened its second locked girls' facility and is running consistently high censuses at the boys' Connecticut Juvenile Training School (CJTS).

Incarceration is not the only option for kids like Jane. A number of sites in the Annie E. Casey Foundation's Juvenile Detention Alternatives Initiative have worked to eliminate detention of children with mental illness, and the MacArthur Foundation's Models for Change Initiative has an eight-state Mental Health/Juvenile Justice Action Network dedicated to diversion and professional training on community interventions. The entire mission of the [National Center for Juvenile Justice and Mental Health](#) is to serve as a resource on this population of youth.

Individualized justice for young people is a better use of public resources. Studies of cost-effective treatment have found that the top interventions for delinquent juveniles are community-based.

Some of the most effective services, such as one-on-one intensive behavior therapy, are reimbursable through Medicaid. For youth who cannot be placed at home, the service plan could include, for example, placement in treatment foster care with skilled foster parents.

Incarceration is by far the most expensive way to deal with a young person. Six months of incarceration at CJTS is more than ten times as expensive as a year's tuition at the University of Connecticut.

Jane recently ran from custody after seven months of almost constant seclusion. How many of us might have made the same choice in her circumstances? Placement in a caring, supported and safe family environment, augmented with treatment services tailored to her needs would have been more likely to engage Jane and encourage her to commit to her own recovery – a better outcome for Jane and for the community.

Sue Burrell is a staff attorney at the Youth Law Center, a San-Francisco-based public interest, non-profit law firm. She is the author of [Trauma and the Environment of Care](#) (National Child Traumatic Stress Network, 2013), and works nationally to reduce unnecessary confinement, and assure safe and humane conditions for youth in institutional care.