Responding to Sexual Abuse of Youth in Custody: Addressing the Needs of Boys, Girls, and Gender Nonconforming Youth Notification of Curriculum Use

April 2014

The enclosed Responding to Sexual Abuse of Youth in Custody: Addressing the Needs of Boys, Girls, and Gender Nonconforming Youth curriculum was developed by the Project on Addressing Prison Rape at American University, Washington College of Law as part of contract deliverables for the National PREA Resource Center (PRC), a cooperative agreement between the National Council on Crime and Delinquency (NCCD) and the Bureau of Justice Assistance (BJA). The Prison Rape Elimination Act (PREA) standards served as the basis for the curriculum’s content and development with the goal of the Responding to Sexual Abuse of Youth in Custody: Addressing the Needs of Boys, Girls, and Gender Nonconforming Youth curriculum being to satisfy specific PREA standard requirements.

It is recommended that the Responding to Sexual Abuse of Youth in Custody: Addressing the Needs of Boys, Girls, and Gender Nonconforming Youth curriculum be reviewed in its entirety before choosing which modules to use. Any alterations to the original materials require either acknowledgement during their presentation or removal of the PRC and Project on Addressing Prison Rape logos.

BJA is currently undergoing a comprehensive review of the enclosed curriculum for official approval, at which point the BJA logo may be added.

Note: Use of the enclosed curriculum, either in part or whole, does not guarantee that an auditor will find a facility “meets standards.” Rather, an auditor will take into consideration the curriculum used as part of their overall determination of compliance.

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Training Curriculum:
Responding to Sexual Abuse of Youth in Custody:
Addressing the Needs of Boys, Girls and Gender Non-Conforming Youth

Module 4:
Adolescent Development

The Project on Addressing Prison Rape
February 2014

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Objectives

Identify and Discuss:

- The components of typical (normal) adolescent development
- Possible barriers to healthy adolescent development
- The ways in which confinement may hinder or support adolescent development
The Growing Science of Adolescent Development

Its relevance to youth in the juvenile justice system, in how they are:

• Judged
• Tried
• Sanctioned
• Treated in confinement
The Tasks of Adolescence

Achieving independence from parents

Developing a unique identity
• “Who am I as an individual?”
• Intellectually, emotionally, spiritually, morally, physically, sexually, ethnically/racially etc.

Assuming an important and valued role in society
• Career, relationships etc.
The Stages of Adolescent Development (A Convenient Fiction)

**Early adolescence**
- 11-13 years old

**Mid adolescence**
- 14-16 years old

**Late adolescence**
- 17-21 years old
Some Beginning Observations

Adolescence is not, for most, a time of “storm, stress and rebellion”

Development occurs at different rates in different areas of development

Stops, starts and regression are typical
Some Beginning Observations

Development occurs at different rates between different individuals.

But the direction of development tends in the same direction among most individuals.
Areas of Adolescent Development

Physical (including the all-important brain)
Cognitive
Behavioral
Emotional
Social
Moral
Spiritual
Sexual
Physical Development

“Puberty”
The attainment of reproductive capacity
Puberty in Girls

- Begins at 7-9 years old (invisible at first, beginning hormonal changes)
- Visible changes begin at 8-11 years old (breasts first)
- Peak height spurt at about age 11-12 (average growth 10-11 inches)
- First menstrual period at about age 11-12
- “Early developers” at higher risk of engaging in risk behaviors.
Puberty in Boys

Begins at 7-9 years old (invisible at first)

Visible changes at age 9-10 years old (testes)

First sperm production: ~ 12-13 years old

Peak height spurt two years later than girls: ~ age 14

“Early developers” increased peer respect, increased self-esteem
Adolescent Brain Development
BRAIN FACTS

Weighs approximately 3 pounds

100 billion neurons and 1 trillion supporting cells

Controls all feelings, thoughts and activities

It and the environment are involved in a very delicate balance

Never stops adapting and changing
MRI studies document both physical and functional changes in the brain from childhood into adulthood.

Decreased “gray matter” (some neurons ‘let go’)

A lot more “white matter” (represents increased sheathing of neurons, which speeds up messaging)

Both are good things.
MORE BLUE = MORE WHITE MATTER
A Teen With a Developed Prefrontal Cortex Can be a Joy to Live With
BUT... there is a catch

During adolescence, some areas of the brain develop before others.

And, unfortunately, the prefrontal cortex isn’t one of them.

This helps explain why it’s often easier to live with a 20 year old than a 15 year old.
The teenage brain and the adult brain are different

- The teen has a fully developed language and spatial ability and can look very mature

- The areas of the brain that regulate emotion, decision making, risk assessment, and rational decision making do not develop until adulthood

- And, although sometimes scary and often frustrating, this is normal.
The Environment and Adolescent Development

Interacts with the brain changes

The world surrounding the teen:
• Family
• Peer groups
• Neighborhood
• Church, temple, mosque, synagogue
• School
• Broader society
Cognition: Thinking, planning, problem-solving . . .
Cognitive Development

Toddlers – Preschool
- Learn language
- Recognize objects
- Stage-related skills

Age 6-12 years old
- Thinking in concrete manner
- Ability to categorize objects
Cognitive Development

Early Adolescence (11-13 years old)

- Use of complex thinking focused on decision-making that is personal (egocentrism) and present-focused
- Increased choices about home, school, peers and relationships
- Beginning to question authority
- Concerns about personal appearance
- Little perception of long-range consequences of actions
Cognitive Development

Middle Adolescence (14-16 years old)

• Initiation of an individual code of ethics
• Increased analysis of issues and concerns
• Awareness of different possibilities for the development of individual identity (including gender orientation)
• Better able to set goals and devise plans to reach them
• Increased ability to think abstractly (for example, the meaning of life)
• “Magical thinking” and “personal fables”
Cognitive Development

Late Adolescence (17 years old+)

- Increased thoughts on more global concepts
- Development of idealistic views
- More sophisticated moral reasoning
- Engaging in debate with peers and parents
- Increased interest in the future: career, relationships, role in family and society
From Early Through Late Adolescence

Increased Abstract Thinking

- Can think about abstract concepts
- Become able to understand "shades of gray" in situations
- Able to examine, reflect on and express their inner experiences
- Begin to consider possible outcomes and consequences of actions
- This type of thinking is important in long-term planning
From Early Through Late Adolescence

Increased Problem-Solving Ability

• The ability to systematically solve a problem in a logical, methodical way emerges:
  o quickly analyze a problem
  o quickly plan an organized approach
  o draw conclusions from the information available.
"Growth consists of a series of challenges... Each successive step is a potential crisis because of a radical change in perspective... Different capacities use different opportunities to become full-grown components of the ever-new configuration that is the growing personality."

~ Erik Erikson, *Identity and the Life Cycle*
Behavioral Development

Goal: To achieve a sense of coherent identity and competence across many domains of life

- Concerned with the question of “Who am I in this world?”, “Who am I when I’m alone?”, “Who will I become?”
- Shaped by life experiences and by those who surround them in their lives: family, peers, teachers, pastors, the broader community and society.
- Facilitated by a desire for independence from parents and caregivers as they achieve physical and cognitive maturity
To Achieve an Identity, Adolescents Behaviorally will:

- Take risks
- Seek novelty and new sensations
- Hang out with friends more than family
- Resist authority
- Question accepted beliefs
- Test limits, break rules
- Engage in arguments and debates
- “Try on” new identities and personas
- Get tattooed, pierced etc.
- Experiment (drugs, sex)
- Exhibit sense of invulnerability

... And all this is normal adolescent behavior!
Social-Emotional Development: Early Adolescence 11-13

- Desire for increased independence from family
- Frustrated/embarrassed by parents’ imperfections
- Increased importance of peers
- Greater desire for privacy (physical and emotional)
- Feeling awkward in a changing body
- Worried: “Am I normal?”
- Increased ability to express feelings
- Crushes, shyness, interest in sex
Social-Emotional Development: Middle Adolescence 14-16

- Sense of achievement in new skills/interests
- Puberty near-complete: “Am I attractive?”
- Examination of inner experiences; intense self-involvement
- Increased independence: resists parental involvement in social life, peers even more important
- Conformity to peers in dress, values and codes of behavior
- More self-direction in studies, activities, setting goals
- Preoccupation with sexuality, feelings of love
- Mood swings
Social-Emotional Development: Late Adolescence 17+

- Greater self-reliance, self-esteem
- Greater independence from and greater acceptance of family
- Greater ability to delay gratification and self-regulate emotions
- Greater concern for others
- Increasingly clear sexual identity
- Greater capacity for mutually loving, caring relationships
- Able to begin to individuate from peers
- Refinement of moral/ethical/religious/sexual values
Challenges to Healthy Adolescent Development

- Familial abuse and neglect
- School/neighborhood harassment and violence
- Other trauma
- “Toxic stress” in childhood and adolescence
- Isolation
- Stigma and discrimination
- Chronic illness / disability
- Mental health issues
- Confinement in detention and/or correctional settings
Youth in Custody and Adolescent Development
Youth in Custody: Common Developmental Issues

- Developing a sense of belonging, based on trust, safety and closeness
- Differentiating self from others
- Self-regulation of behavioral and emotional responses: the ability to delay gratification
- Developing cognitive skills, including adaptive problem-solving
- Moral development
- Sexual development
Development and Youth in Custody

Custody places limits on adolescent development in unique and specific ways:

- Family and family environment
- Opportunities to assert independence, test limits, take risks, pursue interests and talents
- Healthy sexual questioning and experimentation and development of physically and emotionally intimate relationships
In general, the kinds and variety of life experiences that promote growth, self-discovery and self-esteem are often very limited in confinement (almost by definition).
AND...

Many, if not most, youth have significant histories of complex trauma and neglect, both outside and within “the system”.

Many lack any supportive and nurturing adult role models or healthy, trusted adults, either outside or inside “the system”.
Ways to Minimize Limits on Adolescent Development

Custody can provide adolescents with highly-structured environments that can include healthy pro-social adult role models.

In healthy correctional settings, adolescents have an opportunity to develop in ways that are free from high-risk behaviors (drugs, truancy, gang involvement etc) that otherwise interfere with their healthy development.
In healthy correctional settings, policies and programs recognize the developmental needs of adolescents and attempt to create an environment that is provides safe and diverse opportunities to “be adolescent”

In healthy correctional settings, policies and programs address the experience and needs of their diverse population of youth, taking into account issues of gender, ability, language, race/ethnicity, religion, immigrant status, sexual orientation and other important aspects of identity.
Summary

The components of typical (normal) adolescent development

Possible barriers to healthy adolescent development

The ways in which confinement may hinder or support adolescent development