Girls are the fastest growing population in juvenile justice, yet the system has failed to respond to the special needs of this vulnerable group. Girls of color are particularly impacted, disproportionately representing two-thirds of those incarcerated. Girls in the justice system experienced childhood victimization at much higher rates than boys. As a result, girls present with extremely high rates of serious mental health conditions, including post-traumatic stress, psychiatric disorders, attempts at self-harm, and suicide. There is a dire need for the juvenile justice system to develop gender-specific practices that address the unique needs of girls and that protect their health and human rights.

HEALTH CONCERNS AMONG GIRLS IN THE JUSTICE SYSTEM

Physical Abuse
Up to 92% of incarcerated girls have experienced one or more forms of physical, sexual and emotional abuse before entering the juvenile justice system. More than 45% have been beaten or burned at least once; 40% have been raped; 32% have current or past sexually transmitted diseases; and 32% have chronic health problems. Girls exposed to violence on an ongoing basis are prone to self-abusive behavior, depression, mental illness, drug use and suicide.

Fragile Mental Health
In one sample of female juvenile offenders, 70% had been exposed to some form of trauma and 65% had experienced symptoms of post-traumatic stress disorder (PTSD) sometime in their lives. Generally, incarcerated girls are 50% more likely to suffer PTSD than incarcerated boys. Despite the prevalence of mental health problems, diagnosis is rare and girls are left to deal with issues of sadness, isolation, and childhood trauma on their own.

The characteristics of detention, including seclusion, staff insensitivity, loss of privacy, and traditional methods of preserving order and asserting authority, can worsen feelings of negativity and loss of control, resulting in re-traumatization, re-victimization, self-mutilation and suicide attempts.

Substance Abuse Issues
Experiences of trauma are also linked with higher rates of substance abuse. Studies show that 60-87% of female juvenile offenders need substance abuse treatment. 50% also report drug use by a parent.

High-Risk Sexual Behavior
Girls with histories of physical and sexual abuse often engage in high-risk sexual behavior. Early sexual activity, multiple partners and unprotected intercourse often lead to sexually-transmitted infections and other complicated health conditions. These behaviors also contribute to the high rates of pregnancy and parenting among girls entering the system. One study revealed that 14% of girls were pregnant at the time of detention. This is particularly worrisome because most juvenile facilities do not have appropriate prenatal or gynecological services for these young women.

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Girls’ Arrests Tied to Unequal Treatment
The national rate of girls in the justice system increased by 83% during the 1990s. The sharp increase in arrests can in part be traced to changes in policy and practice. Incidents that were previously handled outside the system, such as family conflicts and schoolyard arguments, are now leading to arrests on charges of assault and battery. Changes in domestic violence laws also led to an unintended spike in arrests among girls.

In fact, girls are predominantly arrested for non-violent status offenses, such as truancy and running away, and are 170% more likely to be detained for these acts than boys. Girls are also more likely to be returned to detention for longer periods of time for minor infractions such as contempt and probation violations.

Confinement Exacerbates Girls’ Trauma
Girls are at greater risk than boys of abuse and harm while incarcerated, including such violations as strip searches, body cavity examinations, physical restraints, and isolation punishments. According to the Juvenile Offenders and Victims 2006 National Report, girls were more likely to be sexually victimized in juvenile facilities than were boys; girls constituted only 11% of the total population but were victims in 34% of substantiated cases. They are also 11 times more likely than boys to die while incarcerated.

Gender-Specific Services are Urgently Needed
The 1992 Reauthorization of the Juvenile Justice Delinquency Prevention Act required states who receive federal funding to identify gaps in their services to female offenders and develop gender-specific programs with juvenile justice. However, courts and juvenile facilities continue to lack the necessary training, resources, and services to address gender-specific trauma. Without appropriate intervention, young girls often end up deeply entrenched in the juvenile justice system.

Comprehensive gender-specific programs should provide education, job training, family support services, counseling and health services. Ideally, these programs focus on individual empowerment and competency-building.

Health professionals can play an important role in supporting gender-specific programs that include female-specific health care, prenatal care and parenting skills training, substance abuse prevention and treatment, and mental health services.

Health Professionals, YOU Can Make a Difference!
Health professionals can speak with authority on the physical, mental and emotional health of children and can advocate for developmentally-appropriate services that meet youths’ needs. Take action to support the health and human rights of youth in the justice system:

- Sign up to receive action alerts from PHR
- Arrange Grand Rounds on health issues of incarcerated youth
- Call legislators to support scientific and humane reform
- Write letters to the Editor and Op-Eds that highlight these issues
- Contact your local juvenile court or advocacy group to volunteer
- Monitor local detention facilities to learn first-hand about conditions
- Join PHR and support the Health and Justice for Youth Campaign

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