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The Relationship between Adverse Childhood Experiences and Disproportionate Minority Contact on Minority Youth within Juvenile Justice in Texas

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Abstract

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MPhil, Walden University, 2020

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Dissertation Submitted in Partial Fulfillment

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Abstract

Disproportionate minority contact (DMC) remains a significant concern within the juvenile justice system, yet its connection to adverse childhood experiences (ACEs) among minority youth is underexamined. Nationally, minority youth, particularly Black youth, are disproportionately represented compared to their White peers, prompting efforts to understand and address racial and ethnic disparities in system involvement. The purpose of this study was to explore the relationship between DMC and ACEs within the Texas Juvenile Justice Department (TJJD). Guided by general strain theory (GST), whether traumatic life experiences contribute to the disproportionate representation of minority youth was examined. The central research question was designed to examine if exposure to ACEs significantly increased the likelihood of disproportionate juvenile justice contact among minority youth in Texas. De-identified, secondary aggregated data from TJJD, including trauma screenings administered to both minority and nonminority youth upon system entry, were used. Data analyses included descriptive statistics and Pearson correlation with a two-tailed significance test to assess the relationship between ACEs and DMC. The key findings demonstrate trauma is experienced and reported differently across racial groups, with system-related ACEs being especially prevalent among Black youth. Recommendations included expanding ACEs screening tools to address structural and racialized trauma to culturally responsive and race-conscious training. Implications for social change included promoting equitable decision-making practices, addressing trauma-related risk factors among minority youth, and reducing the criminalization of Black youth through more informed, trauma-responsive approaches.

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Dedication

First, I dedicate this body of work to my late mother, *Brenda Johnson*—the most brilliant, most beautiful, and bravest woman I have ever known. Your unwavering strength, grit, and love shaped who I am today. Thank you for the rich and resilient legacy you left behind; it continues to guide and inspire me every single day.

Next, I dedicate this work to my late godmother, *Scherryl J. Harrison, Esq.,* a class act, trailblazer, and relentless advocate for child justice. Thank you for your exemplary leadership and the powerful legacy you left behind through your life's work.

Losing these two phenomenal women in 2020, just seven months apart, was one of the greatest heartbreaks of my life. One of my deepest regrets will always be not completing this doctoral journey before they transitioned.

In addition, I am deeply indebted to my late *maternal grandparents*, whose wisdom, unconditional love, and prayers have been the foundation upon which I stand. Thank you for instilling in me the values of perseverance, faith, and family—lessons that have carried me through this journey. Granddaddy, I finally obtained "*one more*," just as you always told me I would.

Lastly, I dedicate this work to the late *Kalief Browder* and *minority youth* everywhere. I honor you. *May your voices echo through this work*.

May this dissertation stand as a testament to their lives, their sacrifices, and the enduring power of resilience and justice that gave me the strength to finish this journey.

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First and foremost, I give honor and glory to *God* for granting me the strength, wisdom, and perseverance to complete this doctoral journey. Every step, every setback, and every small victory along the way was covered by His grace. This dissertation is a testament to His faithfulness and the power of prayer through every high and low.

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To my *family*, especially my *dad*, your love has been my anchor through every season of life. You believed in me even when I questioned myself, reminding me to keep going and never settle for less than what I was called to do. I carry our family legacy with pride, knowing that your sacrifices, wisdom, and encouragement have shaped the person I am today. To my amazing *nieces and nephews*, thank you for being my constant source of motivation. I hope this moment encourages you to dream big and never stop believing in yourselves. To my beloved *godchildren*, each of you holds a special place in my heart. I pray this achievement inspires you to walk boldly in your purpose and always lead with courage and conviction.

And, to the one who stood by me until the very end, my *husband*, words will never be enough. You carried me through countless late nights, missed dinners, and days consumed by research and writing. When I was weary, you reminded me of my strength; when I doubted myself, you never once wavered in your belief. You celebrated every small victory as if it were your own and stood steady through every setback. Your patience, sacrifice, and unwavering faith in me gave me the courage to finish when I thought I couldn't. I am forever grateful to walk through life with you by my side.

This work reflects not just my dedication but the love, faith, and perseverance of every person who stood by me and poured into me along the way. Thank you for helping me see this dream through to reality. *We Did It, Joe!*

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Chapter 1: Introduction to the Study

The overrepresentation of minority youth in the juvenile justice system is widely recognized but remains a persistent nationwide problem (Takahashi & Evans, 2018). This study examined the relationship between trauma, specifically adverse childhood experiences (ACEs), and disproportionate minority contact (DMC) within the Texas Juvenile Justice Department (TJJD). DMC has persisted over the past 20 to 30 years despite legislation intended to reduce the problem (Gillis & Bath, 2016). Youths in care are among the most vulnerable youth in American society, and all youth in care have experienced trauma and sometimes exhibit trauma-induced behaviors, which are perceived by others as disruptive or dangerous (Rampersaud, 2022).

The typical youth at TJJD has experienced significant childhood trauma, often referred to as ACEs (TJJD, 2025). ACEs refer to the traumatic events experienced during childhood and are used to examine trauma that justice-involved youth may have encountered before contact with the system (Felitti et al., 1998). DMC refers to the disparate proportion of contact that minority youth have with the juvenile justice system in comparison to non-minority youth (Dawson-Edwards et al., 2020). Understanding the connection between ACEs and DMC is essential for addressing the systemic injustices that contribute to the persistent overrepresentation of minority youth in the juvenile justice system.

When police are frequently called, it begins a cycle of criminalization for many youths, with minority youth consistently overrepresented and often continuing into adulthood (Rampersaud, 2022). When compared to White youth, Black youth are more

likely to enter the criminal justice system and be tried as adults, in that Black Americans make up 40% of the criminal justice system and are more likely to be incarcerated than any other racial demographic in the United States (Madoshi, 2019). Mendel (2022) highlighted in 2019 a racial disparity in the diversion of delinquency cases in the United States, with White youth being diverted at a rate of 52% compared to 40% for Black youth. Examining the risk factors of juveniles and the criminal justice response to juvenile offenders under the DMC scheme would help identify the areas that need improvement in the juvenile justice system (Takahashi & Evans, 2018).

In this study, I sought to identify the relationship, if any, between minority Black youth and their disproportionate rate of contact in comparison to non-minority White youth within the TJJD concerning their adverse childhood experiences. This study was needed to determine if there was a gap in research between DMC and ACEs in Texas. This study was also necessary to inform justice-involved systems of the impact trauma had on the outcomes for youth, both short and long-term, and the disparities that existed. The positive social change implications of this study included a more trauma-informed juvenile justice system, policy and practice reforms to address biases embedded in the system's critical decision-making points, and, most importantly, a significant reduction in minority youth contact with the justice system, thus decriminalizing them.

In this chapter, I reviewed the background, problem statement, purpose, research question, and hypothesis. I also examined the chosen theoretical framework, the nature of the study, detailed definitions, assumptions, as well as the scope and limitations.

Additionally, I covered the study's significance, social change implications, and ended with a summary.

Background

According to U.S. Census Bureau data, one of every 10 persons under the age of 18 in the U.S. lives in Texas (Garza et al., 2020). Given this substantial youth population, understanding the demographics of various systems, such as the juvenile justice system in Texas, is critical. The TJJD's 2023 report provided racial and ethnic data on youth involved in juvenile probation across the state. It highlighted that Black youth are significantly overrepresented in the juvenile justice system relative to their share of the general population and accounted for a much higher percentage of juvenile referrals, supervision, and detention placements (TJJD, 2024). DMC occurs when the proportion of African American, Hispanic, southeast Asian, Pacific Islander, Native American, and other disadvantaged ethnic minority youth at any given stage in the juvenile justice process exceeds the proportion of their respective group in the general population and exceeds white youth at the same stage in the juvenile justice process (Gillis & Bath, 2016). For example, in 2023, Black youth in Texas made up just 11.3% of the juvenile population but accounted for a disproportionately high 29.3% of referrals to juvenile probation (TJJD, 2024). In contrast, White youth were underrepresented, comprising 31.0% of the population but only 19.1% of probation referrals, while Hispanic youth represented 50.7% of Texas's juvenile population and accounted for 50.0% of referrals to juvenile probation, meaning their referral rate closely matched their population share—

unlike Black and White youth, who were notably over- and underrepresented, respectively (TJJD, 2024).

Every Texan (2024) reported Hispanic youth made up about 48% of the under-18 population, while Non-Hispanic Black youth accounted for 12%, non-Hispanic Asian youth accounted for 5%, and non-Hispanic White youth accounted for roughly 32–35%. These demographic figures highlight the increasing racial and ethnic diversity among Texas youth, providing important context for understanding the state's youth population. However, when comparing this to juvenile probation data, clear disparities emerge. Disparities in system involvement persist, especially for Black youth, who are overrepresented compared to their share of the general population. Though historical, Carmichael et al. (2010) found that when conducting research in Texas on DMC White youth made up 42% of the juvenile population but only accounted for 29% of those on probation, and conversely, Black youth represented just 13% of the juvenile population but made up 25% of probation cases. This nearly twofold overrepresentation of Black youth underlines a pattern of disproportionality in juvenile justice contacts that continues despite their lower population share. These disparities highlight long-standing issues of disparities in minority contact and suggest systemic inequalities still shape youth outcomes, particularly for Black youth.

A youth’s school experience may also contribute in many ways to Disproportionate Minority Contact within the juvenile justice system (Hirschfield, 2018). DMC examines several key decision-making points when determining the rate of minority contact, with arrests being an initial point of contact. The influence of police

decision-making within school settings has changed drastically over the years, with the establishment of placing police in schools and calling them School Resource Officers (SROs). Police officers are often the first point of contact in justice systems, where they have the discretion to detain a youth, regardless of whether they have contact with them in the streets or schools, which is a significant factor in the decision-making process. When schools have police on the premises, misbehavior is more likely to come to police attention, to be defined as a crime, and to precipitate arrest and school exclusion (Hirschfield, 2018). When SROs handle minor incidents, those actions add to the research data that suggest stricter school discipline practices and DMC for minority youths, which were relatively more prevalent in urban areas (Marchbanks et al., 2018).

The racial demographics of police officers across departments could be a causative reason for DMC within justice systems (Dollar, 2014). For example, in Texas, a 2010 study was conducted across five counties examining DMC, and in terms of juvenile justice contact, Black youth were arrested at rates significantly higher than those of White youth in every community studied, and Hispanics were also over-represented, though by a smaller margin (Carmichael et al., 2010). It is an unfortunate fact that Black and Hispanic youth are involved in the criminal justice system at a rate that exceeds their representation in the general population (Carmichael et al., 2010).

Many public schools nationwide have employed zero-tolerance policies to discipline youth misbehavior (Woods, 2021). Zero-tolerance discipline describes policies that mandate specific punitive penalties for a variety of behaviors and are intended to be applied uniformly regardless of the behavior's circumstance, context, or severity (Noelle,

2019; Woods, 2021). Zero-tolerance discipline policies led to the introduction of police on school campuses and have resulted in a disproportionate number of in-school arrests and referrals of Black students, subjecting them to the school-to-prison pipeline (Woods, 2021). Many of these students are subsequently exposed to the criminal justice system, resulting in them being labeled as delinquent and deviant (Kennedy-Lewis & Murphy, 2016). Currently, these zero-tolerance strategies remain in place in school districts throughout the United States, but the disparate and disproportionate impact is particularly pronounced in the South (Woods, 2021). In a recent study, Woods (2021) studied participants which included 1,303 Black and White middle-school students from a jurisdiction in northwest Georgia who were arrested or referred and subsequently detained by the juvenile justice system. Woods (2021) found that although race was not a significant predictor of arrests and referrals, findings demonstrated that Black students were 89.4% or approximately 1,165 of those arrested or referred, compared to White students, who accounted for 10.6%. The school-related factors most likely to contribute to DMC are suspensions, school-based arrests, and court referrals (Hirschfield, 2018). Student contact with the criminal justice system has increased exponentially as law enforcement replaced discipline to address student misbehavior (Owens, 2017).

Prior research has established a relationship between ACEs and juvenile justice-related outcomes (Zettler & Craig, 2023). ACEs are traumatic, but preventable events; however, refining the conceptualization, definition, and measurement of ACEs is essential for supporting effective and equitable prevention and intervention approaches (Warner et al., 2023). In their seminal study on ACEs, Felitti et al. (1998) defined ACEs

as 10 specific traumatic exposures: emotional abuse, physical abuse, sexual abuse, physical neglect, violent treatment toward mother, household substance abuse, household mental illness, parental separation or divorce, and having a household member with a history of incarceration. The original ACEs questionnaire was developed by Felitti et al. (1998) as part of the Centers for Disease Control and Prevention (CDC) Kaiser Permanente ACEs study. This 10-item instrument is in the public domain and is freely available for public use without restriction or special permission (CDC, 2023).

ACEs, including abuse, neglect, and living in a dysfunctional household environment, can produce an array of negative life outcomes in both the short and long term (Jackson et al., 2023). The ACEs trauma assessment was designed for research purposes and is a useful measure of trauma histories, especially among samples that cannot be followed prospectively, such as justice-involved youth (Zettler & Craig, 2023). The TJJD uses the ACEs trauma exposure assessment as a standardized tool to understand the youths' backgrounds and experiences upon commitment to their system.

According to the TJJD (2025), a consistent set of threats and stress youth have lived through can hamper their brain development, causing them to believe they are under almost constant threat, causing them to react to stress or think through decisions vastly differently than other youths. The Justice Policy Institute (2023) stated that up to 93% of children in the criminal legal system have experienced elevated levels of ACEs, and for every ACEs category that a youth experiences, research shows a 35% to 144% increased risk of violent behavior. The TJJD (2025) reported that 52% of youth in their secure facilities have four or more ACEs in a conservative estimate; and when broken down,

about 50% of boys have four or more ACEs, and 87% of girls have four or more, with 47% of girls having seven or more. According to Substance Abuse and Mental Health Services Administration (SAMHSA), 18.1% of adolescents aged 12–17 experienced a major depressive episode in 2023, with 13.5% reporting severe impairment (SAMHSA, 2024). These high prevalence rates underscore the mental health vulnerabilities that may intersect with exposure to ACEs and contribute to disproportionate contact in the juvenile justice system.

This study was needed to address the gap in the literature regarding the relationship between ACEs and DMC within juvenile justice in Texas. The research could aid in the development and enhancement of services to best serve minority youth who have experienced significant traumatic events. My research could also aid law enforcement and other decision makers in providing better services to justice-involved minority youth with a more informed understanding and compassion in the decision-making process. There have been significant modifications to laws, delinquency, court practices, and national trends since the inception of the juvenile system; however, systematic failures, disparate decision-making, and racial inequalities have remained in its fabric, thus making the need for this study relevant.

Problem Statement

DMC exists in Texas, but its relationship to ACEs of minority Black youth in the juvenile justice system remains unexamined. Specifically, in states like Texas, Black youth are 4.7 times more likely than White youth to be detained in juvenile facilities; however, nationally it's 5.6 times more likely (Rovner, 2025). Carmichael et al. (2010)

conducted research across five Texas counties and found that the single most consistent outcome was that Black youth had significantly higher rates of arrest relative to Whites. The overrepresentation of minority juveniles in the justice system is a problem both nationally and in Texas (Carmichael et al., 2010). Nationally, minority youths have been disproportionally involved in the juvenile justice system, leading to the development of the concept of DMC, which addresses racial and ethnic disparities among justice-involved youth. Although I focused on Texas, similar disparities have been identified in other states. For example, the Tennessee Commission on Children and Youth (2012) found that minority youth in Tennessee had contact with the juvenile justice system at significantly higher rates than their non-minority peers. This reinforces the broader, systemic nature of DMC and supports the need to examine contributing factors, such as ACEs, in Texas and beyond. Rovner (2025) reported that as of 2023, 46% of youth in juvenile placement nationwide were Black, even though Black youth make up only 15% of the overall national youth population. The youth placement rate was 87 per 100,000 nationally in 2023; however, the Black youth placement rate was 293 per 100,000, compared to the White youth placement rate of 52 per 100,000 (Rovner, 2025).

Research has shown that youth of color make up more than 60% of children in juvenile justice systems and are disproportionately represented at every stage of the juvenile justice system from arrest through sentencing, implying that racial bias continues within the nation's justice system today (Feinstein, 2015). It is estimated over 1 billion children—half of all children in the world—are exposed to some form of violence every year (Slutkin, 2017). Many of these young people contend with mental health challenges

stemming from early trauma, which continue to make them more visible to justice system actors and consequently render them more vulnerable to criminalization (Rampersaud, 2022). Research literature has indicated juvenile delinquents with more ACEs are more likely to recidivate (Craig et al., 2020). Many scholars contend that adversity experienced during childhood may exert a long-term influence on developmental patterns of offending across adolescent development (Farrell & Zimmerman, 2017; Obsuth et al., 2017), thus making childhood adversity an important, potentially causal, risk factor for adolescent delinquency (Connolly, 2019).

Over recent years, trauma-informed corrections have become central to the vision of the TJJD to understand how childhood trauma can create triggers, frustrations, anxiety, and other symptoms that are part of a youth's suffering (TJJD, 2025). Experiencing trauma has significant mental, emotional, and physical effects that last long after young people age out of the system (Rampersaud, 2022). Following a trauma, some young people develop survival skills in response to their environments, which become visible as disruptive behaviors (Finlay et al., 2019). When triggered by memories of trauma or in response to overwhelming feelings, some youth behave in ways perceived by those around them as acting out, and these behaviors are met with behavior-management approaches rather than trauma-informed ones (Finlay et al., 2019). This is especially true for minority youths, and abundant literature documents how the behavior of minority youths is regularly perceived as "hostile" or "aggressive" (Konold et al., 2017; Watson & de Gelder, 2017). Black, Indigenous, and other minority youths are overpoliced and overcriminalized (Jiwani, 2019).

Racial disparity, especially among black youth in the juvenile justice system, first gained attention in an annual report to Congress in 1988, which highlighted the need for states to address the racial disproportion in the juvenile justice system and to take effective measures to minimize the gap (Takahashi & Evans, 2018). Sacks and Murphey (2018) identified a key finding from a research study by the National Survey of Children's Health (NSCH) which found, children of different races and ethnicities do not experience ACEs equally; in that, nationally, 61% of Black non-Hispanic children and 51% of Hispanic children have experienced at least one ACEs, compared with 40% of White non-Hispanic children and only 23%of Asian non-Hispanic children. In childhood, children who have experienced ACEs are more likely to struggle in school and have emotional and behavioral challenges; thus, research has found that the risk for negative outcomes increases with the number of ACEs; in other words, children who have experienced multiple ACEs are substantially more likely to be negatively affected than children who have experienced only one (Sacks & Murphey, 2018). ACEs are disturbingly common and consequential; therefore, priority should be given to identifying populations that bear a disproportionate share of the burden of ACEs, but such disparities have received limited attention to date (Mersky et al., 2021). There has been limited research conducted on the relationship between ACEs and DMC within juvenile justice in Texas. I aim to address this research gap through my study.

Purpose of the Study

In this quantitative study, I explored DMC within the TJJD and its relationship with ACEs. The goal was to determine if a relationship existed between minority youths'

disparate contact with the Texas juvenile system and adverse childhood experiences. These concepts have been researched independently of each other; however, to date, no research studies have examined how these concepts interact with one another. What children experience in the first few years of life helps to set the stage for many life course domains, including education, employment, physical and mental health, interpersonal relationships, and prosocial (or antisocial) behavior (Wolff et al., 2020).

I analyzed de-identified secondary aggregated data on youth admissions from the TJJD to investigate disproportionate minority contact. The study used aggregated data from ACEs trauma exposure screenings administered to minority and nonminority youth upon admission to the TJJD, as detailed in Appendix B. The extracted data presented in Appendix B include the variables used for analysis: fiscal year, race/ethnicity, sex, age at admission, and ACEs trauma exposure categories. The dependent and independent variables were proven to have a statistically significant relationship or not. Race/ethnicity, sex/gender, and age at admission were considered as demographic variables. The dependent variable, DMC, was operationalized as the proportion of juvenile justice admissions for each racial/ethnic category. The independent variables representing trauma exposure were the admitted youth with a history of each specific ACEs score and the admitted youth falling within different categories of ACEs exposure. The independent variables were comprised of scores from the 10-question ACEs trauma exposure assessment. The ACEs questionnaire can be found in Appendix A. This 10-item instrument is in the public domain and is freely available for public use without restriction or special permission (CDC, 2023).

Many can speculate regarding the overrepresentation of minority youth that plagues the juvenile system; however, research works to impart credibility to a reliable response to that speculation. A growing body of research has demonstrated the deleterious effects of adverse childhood experiences (Wolff et al., 2020). Changes in policies and practices do not occur in a vacuum, and so demonstrated successes in reducing DMC are unlikely to be attributable to a single change in policy or practice; however, a combination of approaches decreases DMC and each jurisdiction may benefit from a unique confluence of methods to manage their DMC rates and achieve equity in the treatment of all youth (Lieber et al., 2019). This research examined the impact of ACEs on DMC using a quantitative approach.

Research Question and Hypothesis

The following research question and hypothesis were developed from a review of existing literature on disproportionate minority contact and adverse childhood experiences.

RQ: Does exposure to adverse childhood experiences (ACEs) significantly increase the likelihood of disproportionate juvenile justice contact among minority youth in Texas?

$H_0$1: Increased exposure to adverse childhood experiences (ACEs) does not significantly increase the likelihood of disproportionate juvenile justice contact among minority youth in Texas.

H_a1: Increased exposure to adverse childhood experiences (ACEs) significantly

increases the likelihood of disproportionate juvenile justice contact among minority youth in Texas.

Theoretical Framework for the Study

The theoretical framework selected for this study was the general Strain theory (GST). GST has become one of the leading theories of crime (Thaxton & Agnew, 2018). Classic strain theory was originally developed by Merton in 1938; however, it was later expanded by Agnew to GST in 1992 (Fontaine, 2019). In response to the narrow construction of Merton's strain theory, Agnew sought to extend the paradigm beyond the economic realm through his general strain theory, which now stands as the predominant strain theory employed in the criminological literature (Fontaine, 2019). GST explains that when people experience strain, they may respond with crime to alleviate the strain and related emotions (Fontaine, 2019). Several theories have explained the relationship between ACEs and delinquency, but this one is particularly adept at explaining why a higher dosage of ACEs is more likely to result in violent rather than nonviolent behavior in adolescence, in that strains are akin to ACEs (Van Wyk, 2023), which is explored more in Chapter 2.

The GST suggests that strains in childhood tend to include parental rejection, child abuse, and neglect (Agnew & Moon, 2018). They can also come from cultural patterns such as poverty or racism, so that Blacks, Hispanics, and Native Americans, who tend to face intersectional oppression, may be more likely than others to experience strains (Van Wyk, 2023). GST explains that people in poverty encounter biases (strains) that may make them angry and reduce inhibitions against violence against others (Agnew

& Moon, 2018). The GST describes DMC matters because select ethnic groups are exposed to indifference and dissimilar forms of tension and traumatic situations (Kaufman et al., 2008). For example, young Black men are often met with a presumption of guilt, simply based on their size and the color of their skin, and young people in the system disproportionately experience mental illness, often stemming from past trauma (Rampersaud, 2022).

Recent applications of the GST continue to support the idea that exposure to adverse experiences can trigger negative emotional responses that increase the likelihood of delinquent behavior. For example, Steele and Durkin (2024) found that rural adolescents experiencing high levels of strain—such as victimization and poor health—were more likely to engage in opioid use, with emotional distress (e.g., depression and anxiety) mediating the relationship between strain and substance use. This supports the theoretical foundation of this study and addresses the research question, in which I explored how ACEs may contribute to DMC in Texas.

Nature of the Study

For the nature of this quantitative study, I used archival de-identified secondary aggregated data on youth commitment admissions from the TJJD to investigate DMC and ACEs. The quantitative research design allowed DMC and ACEs to be examined to determine the relationship, if any. The research included data from trauma exposure screenings related to ACEs, administered to both minority and nonminority youth upon their admission to the TJJD. Quantitative studies generally use large samples to test numerical data by comparing or finding correlations among sample attributes, so the

findings can be generalized to the population (Laureate Education, 2010c). Quantitative research design facilitated the examination of secondary aggregated data on DMC and ACEs to identify any potential relationship between these two factors. The quantitative research design was selected for its ability to quantify findings on a large sample utilizing secondary aggregated data to determine the relationship of DMC to trauma exposure while protecting the identity and integrity of youth.

The dependent and independent variables were proven to have a statistically significant relationship or not. Race/ethnicity, sex/gender, and age at admission were considered as demographic variables. The dependent variable, DMC, was operationalized as the proportion of juvenile justice admissions for each racial/ethnic category. The independent variables representing trauma exposure were the admitted youth with a history of each specific ACEs score and the admitted youth falling within different categories of ACEs exposure. The independent variables were comprised of scores from the 10-question ACEs trauma exposure assessment. The ACEs questionnaire can be found in Appendix A. This 10-item instrument is in the public domain and is freely available for public use without restriction or special permission (CDC, 2023).

The DMC data and ACEs trauma exposure assessments are routinely collected by the TJJD. The selected populations were divided into minority and non-minority categories. The minority population included Black youth involved with the Texas juvenile justice system. The nonminority population consisted of White youth who had contact with the Texas juvenile justice system. To ensure comprehensive population representation, Hispanic and other youth were only mentioned among the demographics

in Table 2 to reflect the ethnic diversity of Texas; however, that data was not included in the statistical calculations. The analyses of data were conducted using Pearson correlation test with a two-tailed significance set within the test parameters. The analyses were performed using the Statistical Package for the Social Sciences (SPSS) software.

Definitions

The following terms were used in this research study:

Adverse Childhood Experiences (ACEs): Traumatic events of childhood that include physical, sexual, and emotional abuse, as well as the experience of household dysfunction, such as divorce/separation, domestic violence, or living with an adult experiencing mental illness, substance use/misuse, or incarceration (Felitti et al., 1998). The independent variables representing trauma exposure were the admitted youth with a history of each specific ACEs scores and the admitted youth falling within different categories of ACEs exposure. The independent variables were comprised of scores from the 10-question ACEs trauma exposure assessment. The ACEs questionnaire/assessment can be found in Appendix A.

Admissions: Refers to the youth at Texas Juvenile Justice Department (TJJD) who have been committed to state-level secure facilities in Texas by juvenile court judges because they committed serious felony offenses (TJJD, 2024, p. 4).

Delinquent Offenses: An act committed by a juvenile that would be a felony or misdemeanor if committed by an adult (Listwan, 2013).

Disproportionate Minority Contact (DMC): The rate of contact with the juvenile justice system among juveniles of a specific minority group (i.e., Blacks) that is

significantly different than the rate of contact for Whites (i.e., non-Hispanic Caucasians) or for other minority groups (Dawson-Edwards et al., 2020). The dependent variable, DMC, was operationalized as the proportion of juvenile justice admissions for each racial/ethnic category.

Institutional racism: The shared disposition of organizations to treat minorities in an inequitable way (Lynch, 2011).

Juvenile: A youth under the age of eighteen years in most jurisdictions (Listwan, 2013).

Minority youth: For this study, minority youth refer to Black American youth to the age of 18 years. To ensure comprehensive data representation, Hispanic and Other youth were mentioned as minority youth only to reflect the diversity of Texas.

Nonminority youth: For this study, nonminority youth refer to White American youth to the age of 18 years old.

Petition: A charging instrument in juvenile court filed by the prosecuting attorney, intake officer, or other official that brings the juvenile within the court's jurisdiction (Office of Juvenile Justice and Delinquency Prevention [OJJDP], 2019).

Recidivism: Refers to a person's tendency to re-offend after a criminal conviction (Hilotin-Lee, 2023).

Secure Facility: The TJJD facility is designed and operated to ensure all entrances and exits are under the exclusive control of the facility's staff, thereby not allowing a youth to leave the facility unsupervised or without permission (TJJD, 2024, p. 41).

Status Offenses: Any offense that only a child can be charged with, but not an adult, such as truancy, runaway, loitering during school hours (skipping school), and curfew violations (Listwan, 2013).

Assumptions

According to Green and Salkind (2010), researchers must be cautious when forming assumptions, as unexamined or biased assumptions can lead to flawed interpretations and threaten the validity of a study. For instance, some may assume that minority youth engage in more delinquent behavior than their nonminority peers, influenced by media portrayals and their disproportionate involvement in the juvenile justice system. Others might assume that minority youth experience higher levels of trauma, such as ACEs, than non-minority youth. While these assumptions may reflect broader patterns in existing research, they should not be accepted without critical examination.

This study required several key assumptions to guide its design and scope. First, I assumed that the data provided by the TJJD was accurate, complete, and representative of the broader juvenile population. Second, I assumed that the racial and ethnic classifications used by TJJD aligned with the operational definitions of minority youth in this study. Third, I assumed that the available sample size would be sufficient to conduct meaningful statistical analyses. These assumptions were necessary to focus the research on specific variables and to ensure the study remained methodologically sound, valid, and manageable.

Scope and Delimitations

The scope of social research helps ensure that a study remains focused, manageable, and aligned with its objectives. As Akanle et al. (2020) emphasized, defining the scope early in the research process is essential to achieving clarity and feasibility. In contrast, delimitations reflect the boundaries intentionally set by the researcher, acknowledging potential limitations in coverage or focus. According to Theofanidis and Fountouki (2018), delimitations involve critically examining a study's assumptions and making transparent the aspects that fall outside its parameters.

The scope of this study was limited to minority youth in Texas, with a specific focus on minority Black youth and non-minority White youth, to explore the relationship between ACEs and DMC within the TJJD. This focus was selected to examine whether the presence and severity of childhood trauma are associated with increased system involvement among minority Black youth. The study also mentioned the demographics of Hispanic and other racial/ethnic groups in Table 2 to reflect the ethnic diversity of Texas, which helped to provide a broader understanding of racial disparities within the juvenile justice system.

The delimitations of this study included the decision to examine only youth who had an ACEs questionnaire administered at the time of admission to TJJD. Additionally, the analysis was limited to Black youth, male and female, with White nonminority youth, male and female, included as a comparison group. Factors outside the scope of this study—such as socioeconomic status, educational attainment, or family structure—were not analyzed but may be relevant for future research. These boundaries were intentionally

set to maintain a focused inquiry on trauma exposure and racial disparity between Black and White youth.

The findings from this study are intended to inform juvenile justice stakeholders and community leaders about the importance of trauma-informed practices. By understanding how ACEs may contribute to the overrepresentation of Black youth in the juvenile justice system, this research can guide more equitable interventions and help reduce the criminalization of minority youth.

Limitations

Limitations represent challenges and constraints that can affect the accuracy, interpretation, and generalizability of research findings (Akanle et al., 2020). The primary limitation of this quantitative research study was its reliance on secondary, aggregated data sourced from the TJJD. These data were routinely collected during youth admissions and included ACEs trauma exposure screenings and measures of DMC. However, I had no direct control over data collection methods or data accuracy.

The use of secondary data limits the ability to verify the completeness and consistency of datasets, as well as to ensure uniform measurement standards. Missing data and variations in data collection procedures across fiscal years posed potential risks for bias or error. While the datasets were carefully screened and incomplete records were excluded, if found, this reliance on available data reduced control over data quality.

Moreover, the aggregate nature of the data restricted more nuanced individual-level analyses, such as logistic regression or moderation models, which could account for intersecting identities such as socioeconomic status that may mediate the relationship

between trauma exposure and juvenile justice involvement (Creswell & Creswell, 2018). The study's coverage of 5 fiscal years (2020–2024) limited the ability to detect long-term trends or account for external temporal influences, such as policy shifts or public health events like COVID-19.

Finally, the traditional ACEs framework employed may not fully capture race-specific or structural adversities—such as racial profiling, neighborhood violence, or school policing—that disproportionately affect minority youth and contribute to DMC (Elkins et al., 2019). As a result, the study may underestimate the full scope of trauma experienced by Black youth within the juvenile justice system.

Despite its limitations, I conducted the study thorough data screening and situated its findings within the context of its methodological boundaries, providing information regarding the relationship between trauma, race, and juvenile justice involvement. These findings highlight the need for improved data collection, expanded trauma frameworks, and future research incorporating individual-level and intersectional analyses.

Significance

This study contributes to the growing body of research examining the relationship between ACEs and DMC among justice-involved minority youth. As DeLisi et al. (2017) note, the study of ACEs provides a vital framework for criminology, yet there remains a need for greater specificity regarding the mechanisms through which trauma influences delinquent behavior and system involvement. By focusing on how trauma disproportionately affects minority youth, particularly Black youth, I addressed a critical gap in juvenile justice research and policy.

The significance of this research lies in its potential to recommend reforms at both the local and state levels. Findings from this study can support a systematic review of current policies and practices among key juvenile justice decision makers—from law enforcement to the courts—and highlight areas where racial bias may contribute to disproportionate outcomes. Insights gained may guide the development of trauma-informed, equitable interventions that ensure all youth receive fair treatment within the juvenile justice system, regardless of race or background.

The broader implication for social change is the elevation of DMC as not just a policy concern, but a human rights and public health issue. By drawing attention to the intersection of trauma and systemic inequity, this study calls on stakeholders—legislators, agency administrators, and juvenile justice practitioners—to confront the realities of a deeply flawed system. Ultimately, this research advocates evidence-based reforms, including the implementation of trauma-informed practices, strategic accountability measures, and policies that mandate consistency and fairness in how youth of color are treated upon contact with the justice system. Through these efforts, the findings of this study have the potential to contribute to meaningful change at the regional and national levels.

Summary

In Chapter 1, I introduced the current study by presenting the key concepts of ACEs and DMC. The chapter outlined the background of the problem, stated the purpose of the study, and presented the research question and hypothesis. It also discussed the

theoretical framework, nature of the study, key definitions, assumptions, scope and delimitations, limitations, significance, and implications for social change.

In Chapter 2, I provide a comprehensive literature review, including the research strategy, theoretical foundation, and historical context of the juvenile justice system. It explores critical decision-making points within the DMC framework, the role of ACEs, and additional topics such as juvenile risk screening and changes to juvenile age legislation to offer further context and depth.

Chapter 2: Literature Review

Texas is growing fast, and unlike many other states, its young population is growing as well and becoming increasingly diverse (Garza et al., 2020). A remarkable amount of scholarship concerning race and ethnicity in the criminal justice system has acknowledged the cumulative disadvantage of minorities, especially the overrepresentation of African American men in the system (Takahashi & Evans, 2018). An extensive line of research has found that children exposed to multiple forms of early life adversity are more likely to engage in high levels of delinquent behavior during adolescence (Connolly & Kavish, 2019). In 2020, over 300 million youth across the United States were reportedly involved with the juvenile justice system (National Center for Health Statistics, 2021).

The focus of this study was to identify the relationship among minority youths and their disproportionate contact within the TJJD and their ACEs. The purpose of this quantitative study was to determine if a relationship exists between minority youths' disparate contact with the Texas juvenile system and their adverse childhood experiences. The research literature related to racial disparity in the juvenile justice system concentrated on Black youth experiences dealing with differential treatment during arrests, processing of the youths after detention, and transferring youths to outside facilities at the diversion stage (Paige, 2022). This study was needed to inform the justice systems about the impact trauma has on the outcomes for minority youth, both short and long-term, and the disparities that exist.

In this chapter, I examine the literature research strategy implemented to gather pertinent research for this study. A theoretical foundation is examined to provide a theoretical perspective regarding DMC and trauma. A historical background of the concepts and details of the critical decision-making points within DMC is provided. Institutional racism is discussed to reveal longstanding embedded systemic disparities. ACEs are presented to expose the impact of trauma on youth and the Texas Model for Intervention. Lastly, to further provide depth and understanding to this research study, risk screening among juveniles and raising the juvenile age legislation are presented.

Literature Search Strategy

The literature research strategy included a comprehensive search of the Walden University Library databases. Comprehensive research was conducted using scholarly databases and search engines for this study to include, but were not limited to: ProQuest Central, EBSCOhost, Criminal Justice Periodicals, SAGE Premier, Academic Search Complete, and Legal Trac. Searches were also conducted via Google Scholar. These databases provided the resources needed to locate credible, peer-reviewed journal articles, scholarly books, reputable policy reports, and government publications. In addition to these tools, queries were conducted through the Office of Juvenile Justice and Delinquency Prevention, the National Center of Juvenile Justice, as well as the National Criminal Justice Reference Center, and like sources to further locate viable and credible resources within juvenile justice, mental health, and public health to link ACEs and DMC. During these queries, various keywords were utilized to include, but not limited to, *disproportionate minority contact, adverse childhood experiences, mental health,*

childhood trauma, juvenile justice, racism, strain theory, general strain theory, institutional racism, implicit bias, systemic discretion, juvenile delinquency, juvenile court history, and *racial disparities*.

The scope of the literature review included both seminal works and current peer-reviewed research relevant to juvenile justice, DMC, ACEs, and related theoretical frameworks. Literature published within the past 5 to 10 years was emphasized to ensure that recent trends, policy developments, and practical findings were captured; however, foundational studies and landmark texts were also reviewed to provide necessary historical context and to support the study's theoretical groundworks.

In areas where current research was limited—such as studies examining the intersection of ACEs and DMC within the context of Texas—national studies, landmark government reports, and relevant doctoral dissertations were used to supplement the literature base. When few recent dissertations or conference proceedings were available, older but still relevant research was critically analyzed and incorporated to ensure that the literature review remained robust, comprehensive, and aligned with APA (7th ed.) standards for evidence-based scholarship.

Theoretical Foundation

The theoretical framework involves ideas pertinent to intellectual literature and must validate theories appropriate to the focus of your research and relate to the wider range of information being reflected (USC Libraries, n.d.). The primary theoretical framework selected for this research study was the GST by Agnew (1992). Additionally,

Bronfenbrenner's ecological systems theory (EST), intersectionality theory, and differential treatment theory were used to complement and expand upon GST.

Classic strain theory was originally developed by Merton in 1938, focusing on macrolevel structural inequalities; however, it was later expanded by Agnew to GST in 1992 by shifting the focus from structural inequality to microlevel social–psychological factors that create strain and lead to delinquency (Agnew, 1992; Fontaine, 2019). Bronfenbrenner's EST was developed to explain how nested systems shape individual development (Lansford et al., 2017). Intersectionality theory originated from the work of scholars such as Crenshaw and Hill Collins to examine overlapping systems of oppression (Hill Collins, 2019). Differential treatment theory is grounded in research showing that system actors treat minority youth differently, whether intentionally or unintentionally (Morrison, 2019).

GST has become one of the leading theories of crime (Thaxton & Agnew, 2018). DMC has been linked to the GST, in that it suggests disproportionation may exist within the juvenile justice system because minority youth are more likely to experience strained living situations, and they cope with strain through crime (Piquero & Sealock, 2010). This theory assumes that strains produce negative emotions—such as anger or frustration—that may lead youth to cope through delinquent behavior (Agnew & Moon, 2018). An important proposition for this study is that minority youth face disproportionate exposure to strains, including ACEs, structural racism, and intergenerational poverty, which increase their risk of involvement with the juvenile justice system (Van Wyk, 2023).

In comparison, EST assumes that individual behavior is shaped by multiple nested systems, emphasizing the importance of viewing ACEs and DMC within a broader socioecological context (Lansford et al., 2017). Intersectionality theory assumes that overlapping identities (e.g., race, gender) create unique pathways for bias and disproportionate treatment (Hill Collins, 2019). Differential treatment theory assumes that justice system actors apply discretion unevenly based on race, contributing to DMC (Morrison, 2019). Several theories have explained the relationship between ACEs and delinquency, but GST is particularly adept at explaining why a higher dosage of ACEs is more likely to result in violent rather than non-violent behavior in adolescence, in that strains are akin to adverse childhood experiences (Van Wyk, 2023).

General Strain Theory

GST has been widely used in criminology to explain delinquency among adolescents exposed to ACEs and structural disadvantages. GST provides a framework for understanding how strains—such as poverty, parental rejection, child abuse, and neglect—generate negative emotions that may lead to delinquent behavior (Agnew & Moon, 2018). The GST explains how stressful events encountered throughout adolescence can negatively affect health and behavior across the lifespan, particularly for youth at risk of involvement with the juvenile justice system. Considering the high frequency of adverse experiences for marginalized youth, these effects must be understood through multiple developmental phases and contexts (Altakhayneh, 2023). Importantly, GST recognizes that cultural patterns such as structural racism or

intergenerational poverty expose certain groups, Black, Hispanic, and Native American youth, to greater and more persistent strains (Van Wyk, 2023).

Building on Merton's original strain theory, Agnew expanded the paradigm beyond economic barriers to include social–psychological stressors, which now stands as the predominant strain theory employed in the criminological literature (Fontaine, 2019). Agnew significantly redefined the concept of strain as "relationships in which others are not treating the individual as he or she would like to be treated" (Moon et al., 2008, p. 48). According to Kaufman et al. (2008), GST helps explain why DMC persists because select ethnic groups face disproportionate exposure to social and structural traumas while navigating the justice system. By highlighting the link between ACEs and delinquent coping strategies, GST underscores the importance of addressing systemic inequalities that produce and amplify these strains.

While GST focuses on individual-level strains and coping mechanisms, it does not fully capture how these strains operate across multiple social and environmental layers; therefore, Bronfenbrenner's EST serves as a valuable complementary framework (Lansford et al., 2017). EST emphasizes how youth development is shaped by nested systems—including family (microsystem), schools and peer groups (mesosystem), community resources and parent workplaces (exosystem), and broader cultural and policy environments (macrosystem; Lansford et al., 2017). Integrating EST with GST helps illustrate how individual strains (e.g., household ACEs) are compounded by structural forces like institutional racism, neighborhood disinvestment, or punitive school policies enforced by School Resource Officers (SROs). For example, while GST explains how

parental incarceration or family substance abuse can directly strain youth, EST situates these factors within a broader social ecology, showing how policy, policing practices, and community disinvestment perpetuate cycles of trauma and justice involvement. This integration strengthens the study's foundation for examining how ACEs, DMC, and systemic inequities intersect.

In addition, related theories such as Intersectionality and differential treatment further explain how overlapping identities and biases influence system contact (Hill Collins, 2019; Morrison, 2019). The Intersectionality theory recognized that complex identities give rise to multiple and overlapping oppressions (Hill Collins, 2019). The differential treatment theory suggested that DMC is caused by different actors in the juvenile justice system treating minority youth differently than White youth, whether it was intentionally or unintentionally (Morrison, 2019).

A recent qualitative study focused on the Intersectionality Theory, demonstrated the interconnectedness of trauma, mental illness, race, and criminalization (Rampersaud, 2022). Qualitative evidence showed that youth of color often face harsher responses from system actors than their White peers, even when experiencing similar mental health crises or trauma histories (Rampersaud, 2022). Drawing on data from qualitative interviews with 25 young adults (ages 18 to 24) who encountered the child welfare and criminal justice systems, as well as ten practicing lawyers in Ontario, the analysis revealed race-based differences in justice system actors' responses to mental illness showing how discriminatory perceptions of race and mental health influence their decision-making (Rampersaud, 2022). While many youths shared stories of being arrested while in

distress, the stories of several illustrated race-based differences in treatment by justice system actors through an intersectional framework revealing that White youths were met with more protective responses from police, while Black youths were met with more punitive responses; providing the appearance of officers' split-second interpretations of behavior are filtered through a lens of preexisting racial bias (Rampersaud, 2022).

The rationale for using GST as the primary framework was its well-documented utility in explaining how adverse childhood experiences create strains that lead to delinquent coping behaviors. Because DMC is linked to structural and social stressors disproportionately affecting minority youth, GST is highly appropriate for examining this intersection (Piquero & Sealock, 2010). Bronfenbrenner's EST complements GST by situating individual-level strains within larger systems, acknowledging how family, school, community, and societal factors reinforce ACEs and DMC (Lansford et al., 2017). Intersectionality and differential treatment theories provide additional depth by clarifying how overlapping identities and biases shape system responses, which is essential to understanding the racial disparities targeted in this study (Hill Collins, 2019; Morrison, 2019).

Together, GST and related theoretical frameworks underscore how multiple, compounding forms of strain—ranging from family disruption to structural racism—intersect to shape the lived realities of youth who encounter the juvenile justice system. The research question—examining whether exposure to ACEs significantly increases disproportionate juvenile justice contact—builds upon existing GST literature by focusing on a specific population (minority Black youth in Texas) and integrating

systemic and contextual factors through EST. This study also extends GST by highlighting how institutional racism and intersectionality aggravate strains, reinforcing the need for multilevel interventions. By applying this integrated framework, the study seeks to expand the theoretical understanding of how individual, structural, and institutional forces intersect to shape DMC. Understanding pathways to system involvement requires considering them within a wider historical and institutional context. To build on this theoretical foundation, it was important to examine how the juvenile court developed as a distinct institution intended to address the unique needs of youth. A historical perspective revealed how early reformers envisioned a system centered on rehabilitation and child welfare, yet over time, competing social, political, and racial forces have influenced how that vision has been implemented and perpetuated longstanding inequities, particularly for minority youth.

Historical Development of the Juvenile Court

The juvenile justice system in the United States was established more than a century ago with the belief that children and adolescents are fundamentally different from adults in their capacity for change, accountability, and rehabilitation. A better understanding of child development called for a more compassionate approach, which led to the creation of the juvenile justice and delinquency system (Hilotin-Lee, 2023). The first juvenile court was created in Cook County, Illinois in 1899 and the premise was to constructively intervene in the lives of young people through punitive punishment and towards rehabilitation based on the youth's needs (Puzzanchera et al., 2022). This foundational principle recognized that young people are still developing cognitively,

emotionally, and socially, and that their behaviors could be redirected through appropriate interventions. The juvenile justice system provides levels of intervention that are graduated based on the offender's risk levels and developmental needs (Menon & McCarter, 2021). Over the decades, however, the juvenile justice system has undergone significant shifts in response to political, social, and cultural pressures. From the rehabilitative ideals of the early 20th century, the system shifted during the latter half of the century toward a more punitive approach, driven by rising crime rates and public fear (Rovner, 2014).

During the Progressive Era (around 1890-1920), the United States experienced significant social change, especially in major cities like New York and Chicago, which led to an increased number of youths on the streets below the age of majority (generally 18 years of age) became involved in juvenile crime, which naturally led to higher numbers of juvenile offenders found guilty of delinquent acts (Hilotin-Lee, 2023). In the early years, children of a certain age were not separated from the punitive adult court system and would often receive harsh penalties. Initially, law enforcement authorities detained juveniles with adult offenders, regardless of their crime; however, local authorities realized that children institutionalized with adults started learning adult criminal behaviors, and recidivism rates increased (Hilotin-Lee, 2023). Lawmakers established a set of processes and procedures to govern juvenile courts, as well as institute distinct secure and non-secure placements for young offenders. Though rules vary depending on each state, today, a juvenile offender can still be transferred to an adult court. The juvenile courts also worked under the doctrine of *parens patriae*, which

meant the state could act "as a parent" to the juveniles, so juvenile court judges could intervene when it was in the child's best interest (Hilotin-Lee, 2023). Parens patriae initially focused on criminal acts, but intervention by the government in juvenile cases became increasingly broad, and juvenile court jurisdiction was constantly debated in court (Hilotin-Lee, 2023). Several pivotal cases ensued, which helped to shape the juvenile justice system, and the broad interpretation of this doctrine led to many landmark court decisions (Hilotin-Lee, 2023).

The U.S. Supreme Court made its mark on juvenile justice over the years, though issues arising from delinquency proceedings rarely come before the Supreme Court; however, beginning in the late 1960s, the court decided a series of landmark cases that dramatically changed the character and procedures of the juvenile justice system (Puzzanchera et al., 2022). For the next several decades, the court maintained its goals and practices through the creation of federal statutes, U.S. Supreme Court decisions, and individual state children's codes. Key U.S. Supreme Court decisions in juvenile justice established various case precedents, which are still referenced in today's justice system. Towards the end of the 20th century, a shift in society's perspective toward juvenile offenders changed from an emphasis on rehabilitation to a "tough on crime" stance. This "tough on crime" era led to increased incarceration rates for youth, the widespread use of transfer laws moving juveniles to adult court, and a deepening entrenchment of racial and ethnic disparities at every decision-making point (Piquero, 2008).

As research evolved, it became increasingly clear that youth of color are disproportionately impacted by these punitive practices. Despite representing a smaller

share of the general population, Black and Hispanic youth are significantly more likely than their White peers to be arrested, detained, and incarcerated (Hockenberry & Puzzanchera, 2020). These disparities, referred to as DMC, have spurred federal mandates, community-based reforms, and new research exploring the intersection of systemic racism and juvenile justice decision-making. The juvenile justice system works in concert with multiple agencies that participate in the decision-making process. For example, law enforcement, prosecutors, intake staff, defense attorneys, probation officers, and judges all contribute to decision-making in the life of a youth in the system. The multiple stages in the juvenile justice process involve various decision-makers who have the power to determine a child's future and utilize a level of discretion at every step of the process in deciding how youth are processed (Paige, 2022). Therefore, the decisions made on behalf of the youth affected their future regarding whether they revisited the juvenile justice system repeatedly or stayed out indeterminately (Gann, 2018).

Judges may hear a series of mixed cases in a day that can provide challenges; for example, a juvenile delinquent case, a status offender case, or an adult case, all in one day. A delinquent offense is an act committed by a juvenile for which an adult could be prosecuted in criminal court; however, some behaviors are law violations only for youth because of their juvenile status called “status offenses” which include behaviors such as running away from home, truancy, alcohol possession or use, incorrigibility, and curfew violations (Puzzanchera et al., 2022). The sole decision-making power is in the hands of the judge for the adjudication and disposition processes for youth. Judges must follow

legal rules in the fact-finding process of adjudication, and they rely heavily on reports from probation officers, prosecutors, defense counsel, and community providers. The federal JJDPA mandates that jurisdictions must not detain status offenders in secure juvenile facilities, a practice known as deinstitutionalization of status offenders (Puzzanchera et al., 2022). There is an exception to the general policy known as the valid court order exception: whereas a status offender may be confined in a secure juvenile facility if they have violated a valid court order, such as a probation order requiring the youth to attend school or observe a curfew (Puzzanchera et al., 2022). The system has a case flow interchanging from one group to the other. The filtering process begins at intake, following arrest, and ends with adjudication and judicial disposition. These multiple groups tend to operate in silo regarding process and goals with little collaboration, which can have negative consequences on the youth due to different rules, processes, and mandates for each individual group.

To reduce DMC in the juvenile justice system, there must be a change in thought, practice, and training of staff. Puzzanchera et al. (2022) examined the developmental approach, balanced and restorative justice, due process, and parens patriae. In the *developmental approach*, these states retained elements of other categories but have purpose clauses that mention the use of adolescent development or other research and/or require evidence-based practices or data to assist the juvenile justice system (Puzzanchera et al., 2022). In the *Balanced and Restorative Justice (BARJ)* approach, juvenile justice systems gave balanced attention to three primary interests: public safety, development of skills to help youth live law-abiding and productive lives, and individual accountability to

victims and the community for harm caused (Puzzanchera et al., 2022). The *due process* era referred to the period of reform of the 1960s and 1970s where federal laws, model acts, and U.S. Supreme Court cases influenced the addition of due process protections (Puzzanchera et al., 2022). The *parens patriae* approach applied to state clauses that reflected the juvenile court judge's earliest role as the state's designated protector of children (Puzzanchera et al., 2022). DMC is a multi-layered problem and reveals itself at each stage of the juvenile justice process, and the effects compound over time.

In recent decades, growing evidence about adolescent brain development and the impact of trauma has reshaped how scholars and practitioners view youth behavior and delinquency. GST (Agnew, 1992) provides a relevant framework for this study, highlighting how social and structural strains — including ACEs, contribute to behaviors that may lead to justice involvement. By examining the historical context, DMC, ACEs, and systemic biases, this study seeks to expose the pathways through which institutional inequities persist and to inform strategies for creating a more just, developmentally appropriate juvenile justice system.

This historical context shows how the juvenile court system evolved from a well-intentioned rehabilitative model grounded in the doctrine of *parens patriae* to a complex system shaped by multiple decision-makers, policy shifts, and competing philosophies about youth accountability and care. Despite decades of reform, these layered processes have not fully addressed the enduring racial and ethnic inequities embedded within the system's structures and practices. As juvenile courts have grown and changed, so too has awareness of how minority youth continue to experience disproportionate system contact

at every decision point. Understanding this history provides essential context for examining how disproportionate minority *confinement* emerged as a policy focus, how it broadened into the concept of disproportionate minority c*ontact*, both referred to as DMC, and how the field has since evolved to address racial and ethnic disparities (RED) more comprehensively.

The Evolution of Disproportionate Minority Confinement to Contact (DMC) to Racial & Ethnic Disparities (RED)

Building on this historical foundation, the juvenile justice system's well-meaning commitment to rehabilitation did not shield minority youth from systemic bias. There are persistent racial and ethnic disparities in the juvenile justice system (Leiber et al., 2019). DMC refers to the overrepresentation of racial and ethnic minority youth at every stage of the juvenile justice system compared to their White peers (Dawson-Edwards et al., 2020). This phenomenon has been documented extensively and remains a critical challenge for policymakers, practitioners, and communities alike (Justice Policy Institute, 2017). The roots of DMC are multifaceted, encompassing systemic racism, implicit bias, and structural inequalities embedded within social institutions and decision-making processes (Lacey, 2013). Several individual, family, community, institutional, and sociolegal factors explain the presence and persistence of DMC (Gillis & Bath, 2016).

The recognition of DMC first brought national attention to the troubling overrepresentation of minority youth in secure detention facilities. Over time, as research and advocacy highlighted that disparities occur at every decision-making point, not just during confinement, the framework expanded from c*onfinement* to *contact*. Research has

shown that youth of color, particularly Black and Hispanic youth, are more likely to be arrested, detained, and transferred to adult court than white youth for comparable offenses (Hockenberry, 2021). This disparity is compounded by factors such as poverty, limited access to quality education, and neighborhood conditions marked by violence and economic deprivation — all of which disproportionately affect minority communities (Teigen, 2018). The intersection of race, socio-economic status, and community environment contributes to the recurring nature of minority contact with the justice system.

Today, the field continues to evolve toward addressing RED more holistically, acknowledging that entrenched inequities extend beyond detention to all points of system involvement, from arrest and charging to adjudication and reentry (Leiber et al., 2019; Puzzanchera et al., 2022). RED in juvenile justice refers to the disproportionate representation of youth of color in the justice system, often resulting in harsher consequences for them compared to White youth (McCarter & Durant, 2022). The shift from DMC to RED reflects a deeper understanding that disparities are not simply about overrepresentation in numerical terms, but about systemic inequities embedded in the policies, practices, and discretionary decisions that shape youth outcomes at every stage. RED calls for more than counting youth; it calls for uncovering the root causes that drive unequal treatment and disparate outcomes (OJJDP, 2023). Regrettably, young Black males remain especially vulnerable to these disparities, often facing a presumption of guilt and punitive responses rooted in implicit bias, while underlying issues like mental illness and trauma go untreated (Rampersaud, 2022). Understanding how the

conceptualization of DMC has changed over time helps illustrate why addressing RED today requires both policy change and culturally responsive, trauma-informed practice at every level of the juvenile justice system. This study's findings contribute to this dialogue by illustrating how ACEs are deeply intertwined with DMC/RED, especially for Black youth whose higher ACE scores often reflect systemic and intergenerational trauma (Elkins et al., 2019).

Over the past 30 years, research has documented racial disparity in the treatment of Black youths who are housed in the juvenile justice system (Robles-Ramamurthy & Watson, 2019). In 2019, White youth were less likely to have their cases handled formally (48%) as compared to Black youth (60%), Hispanic/Latinx youth (52%), American Indian youth (56%), or Asian youth (52%); and for that same year, cases involving Black youth and Hispanic/Latinx youth were more likely to result in out-of-home placement (31% each) than cases involving Asian youth (21%), White youth (22%), or American Indian youth (25%) (McCarter & Durant, 2022). To assume that a youth's behavior is the sole cause of disparity in the juvenile justice system is unreasonable. Disproportionate inequalities persist, not just in the number of arrests, but deeper into the juvenile justice system as well (Teigen, 2018). Unfortunately, over time, minority youth have been disproportionately represented at various stages of the juvenile justice systems across the United States.

Federal mandates, including the Juvenile Justice and Delinquency Prevention Act (JJDPA), have sought to address DMC by requiring states to identify and reduce minority overrepresentation. Federal funding has supported DMC initiatives to address the

overrepresentation of racial and ethnic minority youth, but this issue continues to exist within several juvenile justice systems (Claus et al., 2018). Progress has varied, with inconsistent data collection and differing definitions of DMC across jurisdictions contributing to these differences (Rovner, 2014). For example, in St. Louis, Missouri, from January 1 to June 3, 2017, their Juvenile Center had delinquency referral rates of 86.4% Black and 11.8% White in the initial or intake stage of the juvenile justice process with 91.1% of the referrals originating from law enforcement officers and 4.5% from school resource officers (Wing, 2019). In 2018, that same Juvenile Center received delinquency referrals from 1,870 Black youths and 572 White youths (Wing, 2019). In Florida, data obtained for juvenile court referrals revealed that for Black youth, specifically males, there was a greater likelihood of receiving punishment than was the case for White males, who were more likely to receive treatment interventions (Vergara et al., 2016).

In Tarrant County, Texas, Black youth had a *referral* rate that was more than double the referral rate for White youth, whether they were informal or formal. Both Black and Hispanic youth were referred to Tarrant County Juvenile Services at a significantly higher rate than White youth for all years (2015-2019) in the study (Morrison, 2019). The primary decision-makers at the *referral* contact point are law enforcement agencies, schools, and the juvenile probation department itself, depending on the offense and the location where the offense was committed. Furthermore, in Tarrant County, Texas, in 2015-2019, except for 2017, Black and Hispanic youth were *arrested* at a significantly higher rate than White youth; however, in 2017, there was no

statistically significant difference between any of the racial categories (Morrison, 2019). The primary decision maker at the "*arrest*" contact point is law enforcement, which is a critical DMC point of contact. For youths who have experienced trauma and who have significant difficulty trusting others, contact with the police can be devastating and re-traumatizing (Rampersaud, 2022). Studies have clarified that the reasons racial disparity existed were due to selective enforcement, race differences in offending, biased risk assessment instruments, and different administrative practices (Dawson-Edwards et al., 2020). Racial and ethnic disparities associated with school discipline practices and juvenile justice contacts add to the number of juveniles referred to the juvenile justice system (Marchbanks et al., 2018).

The JJDPA serves as a national juvenile justice and planning system, provides federal funding for delinquency prevention and juvenile justice reform, and guides the Office of Juvenile Justice and Delinquency Prevention (OJJDP, 2019). The JJDPA, first enacted in 1974, was last reauthorized in 2002 but expired in 2007 and was reauthorized with broad bipartisan support for 5 years on December 21, 2018 (Menon & McCarter, 2021). The JJDPA was modified in 1988 to incorporate disproportionate minority confinement to promote fair access to justice for minority youth, as well as unbiased treatment (OJJDP, 2019). The JJDPA further required jurisdictions to provide data and implement approaches to significantly reduce issues related to DMC (OJJDP, 2019). The current efforts and examination of DMC portray an evident lack of responsiveness to the impact law enforcement has in the juvenile justice system, particularly the limited review of DMC at the time of initial law enforcement contact, such as arrest (OJJDP, 2019).

The U.S. Congress revisited the disproportionate minority confinement issue during the 1992 reauthorization of the act, substantially strengthening efforts to address the issue by elevating it to the status of a "core requirement" (OJJDP, 2019). The JJDPA of 2002 broadened the concept from disproportionate minority "*confinement*" to disproportionate minority "*contact*" to emphasize racial differences at all levels of the juvenile justice system (Majumdar, 2017). The reason for this change was that the first contact with the system was a key entry point from which youth further penetrated the juvenile justice system, and decisions made at the first contact could have a profound impact on disproportionality throughout the system (OJJDP, 2019). Both aggregate national and individual state data showed racial disparities increased at every stage of the juvenile justice process, and it was hypothesized that if disparities at the first contact with the system could be reduced, the subsequent disparities should also decline (OJJDP, 2019). Disparities exist across racial and ethnic groups, with the starkest contrasts between Black and White children (Teigen, 2018).

There have been other contributors that negatively impacted DMC, such as the actions and insights of the individuals working within the juvenile justice system, specifically as it relates to decision-making. Black youth were defined by their personal characteristics, but White youth were defined by their family difficulties or peer influences (Vergara et al., 2016). Over the years, nationwide best practices were introduced to close the gap regarding DMC throughout the juvenile justice system. These included an extensive review of data and decision point mapping, cultural competency professional development for key juvenile justice decision makers (i.e. judges, intake

staff, detention staff), enhancement of community-based options focused on restoration, enhancement of parental involvement by providing assistance to overcome barriers they are facing personally, enhancement of the decision-making process with more objectivity to eliminate biases, and incorporating top-down policy changes to DMC matters (Vergara et al., 2016).

According to the sentencing project's analysis of data comparing youth commitment rates with youth representation in the United States population, "Black juveniles were more than four times as likely to be committed as White juveniles, American Indian juveniles were more than three times as likely, and Hispanic juveniles were 61% more likely, which prompted questions about the equality of treatment of youth by police, prosecutors, judges and other justice system personnel (Teigen, 2018). Data from OJJDP suggest in 2019, the delinquency case rate for Black youth (53.9 per Black youth in the U.S. population) was still nearly triple the rate for White youth (18.3), Hispanic youth (17.6), and American Indian youth (21.5), and was almost 12 times the rate for Asian youth (4.6) (Hockenberry & Puzzanchera, 2021).

According to the OJJDP (2019), in December 2018, the Juvenile Justice Reform Act of 2018 (JJRA) was signed into law, reauthorizing and substantially amending the JJDPA of 1974. The recent re-authorization includes strengthening the decarceration of status offenders, extending sight and sound separation to justice-involved youths tried as adults, changing DMC to RED, and requiring action from states to reduce the overrepresentation of children of color in the juvenile justice system (Menon & McCarter, 2021). These efforts are actively implemented within the juvenile justice

system, yet there is little mention of these efforts within the criminal justice system (McCarter, 2018). The JJRA of 2018 set forth the following, “states and territories must implement policy, practice, and system improvement strategies at the state, territorial, local, and tribal levels, as applicable, to identify and reduce racial and ethnic disparities among youth who encounter the juvenile justice system, without establishing or requiring numerical standards or quotas (OJJDP, 2019). The reduction of DMC should be an organizational objective, a priority for all staff and stakeholders. There is much to consider as to who the policymakers and decision-makers are at each stage of contact with youth, and with all factors considered, the organization must be assigned a certain level of accountability.

On January 20, 2021, President Joseph R. Biden signed *Executive Order 13985*, titled “Advancing Racial Equity and Support for Underserved Communities Through the Federal Government” (Sullivan et al., 2021). This landmark executive order directed all federal agencies to examine their existing policies and programs to identify whether they perpetuate systemic barriers to opportunities and benefits for people of color and other underserved populations (Sullivan et al., 2021). It also required agencies to develop concrete plans to advance equity and deliver resources and benefits equitably. This executive order additionally demonstrated President Biden’s ongoing commitment to addressing racial injustice and structural inequities in both the legal and correctional systems. For the juvenile justice context, this means increased federal support for reforms that aim to reduce youth incarceration, address racial disparities in system involvement,

and expand access to mental health care and substance abuse services for system-involved youth (Menon & McCarter, 2021).

Understanding how the concept of DMC/RED has evolved illustrates that unequal treatment in the juvenile justice system is not simply a matter of policy but is deeply rooted in structural inequities. These disparities persist because the system's key decision points — from arrest and intake to adjudication and placement — reflect historical legacies of institutional racism and ongoing bias. Still, critics argue that without addressing the underlying social determinants of crime and systemic inequalities, efforts to reduce DMC risk being superficial and unsustainable (Lacey, 2013). To fully address DMC/RED, it is necessary to recognize how these entrenched forms of institutional racism influence not only who encounters the system but also how they are treated at each stage. The following section further examined how institutional racism manifests within the juvenile justice system and interacts with other systemic factors that perpetuate DMC.

Institutional Racism

Racial-ethnic inequality in the criminal justice system is well-documented and has gained widespread attention in sociological, criminological, and legal literature (Dollar, 2014). To frame race as a risk constitutes discrimination; yet race remains of paramount concern in the early stages of the legal process (Rampersaud, 2022). A critical lens through which this study examined DMC was institutional racism — the systemic, often hidden policies and practices embedded within institutions that create and perpetuate inequitable outcomes for marginalized groups (Lacey, 2013). While overt discrimination

has declined over the decades, structural racism persists through deeply ingrained decision-making practices and biases that shape how youth of color interact with the juvenile justice system (Rovner, 2014). Race is a social construct that permeates many institutions and contexts in U.S. society. Better (2008) defined institutional racism as the policies or procedures within institutions that consistently result in unequal treatment for particular groups. Blalock's racial threat theory is perhaps one of the most frequently examined explanations for racial disparity in criminal justice outcomes which proposes that racialization occurs when Whites use their disproportionate power to implement state-control over minorities and, in the face of a growing minority population, encourage more rigorous, racialized practices in order to protect their existing power and privileges (Dollar, 2014).

Institutional racism in the juvenile justice context can be seen in discretionary decision points, such as arrest, detention, charging, adjudication, and sentencing, where youth of color are disproportionately more likely to receive harsher penalties or be transferred to adult court compared to their white peers for similar offenses (Puzzanchera et al., 2022). These disparities are often compounded by implicit bias and risk assessment tools that, without careful oversight, can reinforce inequities (Viljoen et al., 2019). Despite claims that race is no longer a contributing factor, the evidence shows it persists in subtle but deeply embedded ways. For example, a minority person's neighborhood and appearance are often associated with risk, danger, and criminality — assumptions that begin to shape outcomes early in the justice process (Rampersaud, 2022).

Institutional racism has been examined through the lens of DMC in the juvenile justice system for decades through studies on race and its implications within justice systems. A Pew Research Center (2017) poll found that 88% of Black Americans believe the country still needs significant changes to ensure equal rights, an increase from 79% in 2014. In contrast, more than half of White Americans (54%) believe that Black people who cannot get ahead are mostly responsible for their condition, rather than attributing it to racial discrimination (35%) (Pew Research Center, 2017). When viewed historically, these attitudes mirror a long legacy of segregation, discrimination, and the mistaken belief that youth of color are culturally predisposed to delinquency (Lacey, 2013).

Research indicates that historical legacies of segregation, underinvestment in communities of color, and limited access to protective resources contribute to higher rates of ACEs among Black youth and other youth of color (Fang et al., 2016). These structural disadvantages intersect with institutional practices that fail to adequately address trauma, leading to deeper system involvement (Baglivio et al., 2014). The Jim Crow era (1865–1965) is a stark example of overt institutional racism, with legalized segregation in communities, schools, hospitals, and public spaces. Violations of these unconstitutional laws could result in arrest, violence, or worse. The Civil Rights Movement demanded reforms to dismantle explicit institutional racism, and since the 1960s, social scientists have used critical perspectives to expose how racialized outcomes persist (Dollar, 2014). Race remains a powerful force in shaping U.S. social institutions and the extent of state-sanctioned control (Dollar, 2014). This is relevant to the current study because it provides

in-depth context to best explain the longstanding and embedded systemic racial disparities that impact DMC.

Despite decades of reform efforts, institutional racism continues to be embedded within the policies and discretionary practices of the juvenile justice system, shaping how minority youth are disproportionately policed, detained, and adjudicated (León & Gómez Cervantes, 2023; Rampersaud, 2022). Recent data from the OJJDP (2022) found Black youth are more than four times as likely to be detained or committed as their White peers, a stark reminder that racial bias persists at every stage of the system. Spohn and Cederblom (2006) found that a defendant's race had a direct effect only on the decision to incarcerate yet also exerted indirect effects on both incarceration and sentence length. Dollar (2014) posits race is not only a predictor of who will be policed but also how harshly they will be treated once inside the system. These entrenched disparities illustrate how institutional racism contributes directly to DMC.

Understanding institutional racism as a root cause of DMC underscores the need for policies that go beyond individual-level interventions and instead target structural change. This includes training practitioners to recognize and counteract implicit bias (Teigen, 2018), implementing culturally responsive risk screening tools (Vincent et al., 2012), and promoting diversion programs that empower communities to address youth needs outside the system (Teigen, 2018). Research by Spohn and Cederblom (2006) found evidence supporting the liberation hypothesis, showing that race was a factor in incarceration decisions primarily in less serious cases where judges had more discretion. Shifting away from punitive models to trauma-informed, developmentally appropriate

approaches that consider the historical and social contexts in which youth live has been suggested as a strategy for addressing institutional racism. By recognizing these patterns, this study underscored the urgency of dismantling structural barriers and biases that magnify trauma for minority youth. The next section examines how these inequities unfold at key decision-making points in the juvenile justice process, where the collective effects of institutional racism become most visible and consequential.

DMC: Contact Points of Decision Making

Understanding where and how institutional racism manifests within the juvenile justice process requires a closer look at the specific contact points of decision-making that contribute to DMC. DMC remains one of the most persistent challenges within the U.S. juvenile justice system, as youth of color experience higher rates of system involvement at every decision point compared to their white peers (Puzzanchera et al., 2022; Rovner, 2014). Understanding these decision-making points is critical for identifying where disparities occur, how they compound, and what evidence-based interventions might reduce their impact. At each stage of system involvement—such as arrest, referral, detention, adjudication, and disposition—racial biases and discretionary judgments can compound inequities for youth of color (Puzzanchera et al., 2022). Research shows that disparities often begin at the initial point of law enforcement contact, where discretionary policing practices disproportionately target youth of color for behaviors that might otherwise be addressed in community or school settings (Rovner, 2014).

Decades of research show that these decision points are not neutral but are shaped by historical legacies of discrimination, embedded institutional practices, and implicit bias (León & Gómez Cervantes, 2023). In 2021, 60% of cases involving Black youth were handled formally compared with 48% for White youth (Hockenberry & Puzzanchera, 2024). In the context of this study, examining the DMC contact points sheds light on system-level decisions that increase DMC for Black youth. By connecting the study's correlation findings to these key decision-making junctures, this chapter demonstrates the urgent need to address systemic factors that drive racial disparities in juvenile justice and to develop targeted, equity-focused interventions at every stage of the process.

Fifty years after the U.S. Supreme Court's *In Re Gault* decision, Black youth continued to be disproportionately suspended and expelled, arrested, processed in courts rather than diverted, detained in juvenile justice facilities, and transferred to adult facilities (Dawson-Edwards et al., 2020). Juvenile diversion programs can play a crucial role in reducing racial disparities within the justice system, but only if they are designed to avoid replicating punitive practices (Schlesinger, 2018). Over time, things change. This is normal in any sphere. However, when those changes bring about disparities among specific groups, we must act. DMC was brought to national attention by the Coalition for Juvenile Justice (formerly the National Coalition of State Juvenile Justice Advisory Groups) in its 1988 annual report to Congress, *A Delicate Balance* (OJJDP, n.d.).

The Office of Juvenile Justice and Delinquency Prevention instituted DMC across states in 1991 to address issues with disparity in contact with the criminal justice system for minority youth across states. In 2001, states were required by the JJDPA to gather race and ethnicity information at nine different juvenile justice points of contact to include arrest, referral, diversion, detention, petitioned/charges filed, delinquency findings, probation, confinement in secure correctional facilities, and transfer to adult court (Robles-Ramamurthy & Watson, 2019). They were to report how they addressed DMC in identifying racial disparities; however, despite those mandatory requirements, there was a significant lack of attention to the system's front end (Robles-Ramamurthy & Watson, 2019). Contributing states were mandated to implement prevention efforts and organizational enhancements to decrease the overrepresentation of minority youth.

There are many factors surrounding the arrest, detention, and adjudication of youth in the juvenile justice system. Law enforcement agencies refer the most youth entering the juvenile justice system for law violations (Puzzanchera et al., 2022). In 2022, law enforcement referred approximately 85% of all delinquency cases to juvenile courts, a rate nearly identical to 2005 levels (Hockenberry & Puzzanchera, 2024). Police officers routinely make discretionary judgment calls about whether they should take a juvenile into custody under an order of the juvenile court or according to the laws of arrest applicable to adults regarding delinquent offenses (Claus et al., 2018). The entry point of detention upon arrest is especially critical regarding DMC. This is a front-end decision point with few checks and balances. Decision-making points and practices within some juvenile systems are questionable and lack much-needed diversity in their key

stakeholders. According to Hockenberry & Puzzanchera (2024), cases involving Black youth (31%) and Hispanic youth (31%) were more likely to result in out-of-home placement than cases involving White youth (22%).

Police officers' perceptions of race are significant and have material consequences in the legal process: police assessments influence the course of action taken, which affects the trajectory of youth through the legal process (Rampersaud, 2022). The overrepresentation of minority groups at every stage of the criminal justice system is a direct result of—and evidence of—the over-policing and differential treatment of minority groups (Jiwani, 2019). Black youth continue to be arrested at rates significantly higher than their proportion in the youth population (Hockenberry & Puzzanchera, 2024).

The OJJDP (2019) committed to working with states to reduce RED, hence renaming DMC to RED. In 2018, OJJDP implemented a new, outcome-based approach to assessing states' efforts to address racial and ethnic disparities among minority youth within the juvenile justice system. The revised RED mandate aims to address the issue of unwarranted entry into the juvenile justice system and the disparate outcomes experienced by racial and ethnic minority youth in the United States (McCarter & Durant, 2022). Data is now collected on five research-supported points of contact in the court system where DMC most often occurs as follows: arrest, diversion-filing of charges, pretrial detention-both secure and nonsecure, disposition commitments-secure and nonsecure, and adult transfers (OJJDP, 2019). According to Schlesinger (2018), diversion should move beyond simply redirecting youth from formal court processing and instead

offer supportive, community-based interventions that address underlying structural inequalities.

By focusing states' reduction efforts on these five pivotal points of contact, and by enhancing technical assistance to states aimed at reducing disproportionate contact of minority youth with the juvenile justice system, they hoped to see significant reductions in racial and ethnic disparities (OJJDP, 2019). For instance, for adult transfers of youth from juvenile courts, the courts have always had mechanisms for removing youth charged with the most serious offenses from the juvenile justice system (Puzzanchera et al., 2022). There have been numerous advances over the years concerning transfer laws. From 2004 to 2019, 30 states made changes to their transfer laws, many narrowing the path to criminal court. Puzzanchera et al. (2022) found that the net effect is that more states rolled back provisions, narrowing the criteria enabling youth to end up in criminal court, and, in 2019, there were an estimated 53,000 youth younger than 18 tried in criminal court; that figure was down 64% from the 2005 estimate. Although the number of cases judicially waived to adult court has decreased overall, racial disparities persist: Black youth continue to be waived at higher rates than their White peers (Hockenberry & Puzzanchera, 2024). The hard truth we continue to face within the juvenile justice system is the ongoing need for massive DMC reform efforts. In an October 2019 by the OJJDP, it was reported that for every 100,000 White youth in the U.S., 22 were in detention; for every 100,000 Hispanic/Latinx youth, 41 were in detention; and for every 100,000 Black youth, 139 were in detention (Hockenberry & Puzzanchera, 2024). Optimistically, with restructuring, the system can restore the goal for which the system was intended:

rehabilitation and restoration of young people within their families and communities, as well as within themselves.

These persistent patterns of DMC at each key decision-making point make clear that the juvenile justice system too often overlooks the deeper trauma histories that shape youth behavior and system involvement. Without intentional safeguards, diversion initiatives risk reinforcing systemic biases by disproportionately benefiting White youth while continuing to criminalize youth of color (Schlesinger, 2018). The findings from this study reinforced that Black youth, in particular, experience higher rates of household-related ACEs — including parental incarceration, separation, and substance abuse — that significantly correlate with increased system contact.

Addressing DMC at these critical points aligns with this study's focus on the intersection of institutional racism, trauma exposure through ACEs, and the need for equitable, trauma-responsive practices like the Texas Model. By pinpointing where disparities occur, stakeholders can better design interventions that reduce DMC, promote accountability, and support positive youth development. Without recognizing and addressing these underlying ACEs, discretionary decisions at arrest, detention, adjudication, and placement can continue a cycle of system involvement and compounded trauma. The next section highlights how ACEs intersect with DMC, underscoring why any meaningful reform must acknowledge the role of trauma in shaping youth outcomes, especially for minority youth disproportionately impacted by systemic inequities.

Adverse Childhood Experiences (ACEs)

Most young people in the juvenile and criminal legal systems are also crime victims themselves and have suffered what are called "Adverse Childhood Experiences," or ACEs, such as physical or sexual abuse or having a parent who suffers from mental illness (Justice Policy Institute, 2023). ACEs are major but frequently overlooked contributors to juvenile justice involvement, particularly among Black youth affected by structural and generational trauma. Decades of research have shown that youth with high ACEs scores, such as exposure to family substance abuse, incarceration, or community violence, are significantly more likely to exhibit behaviors that lead to arrest, detention, and deeper system involvement (Justice Policy Institute, 2023).

Understanding the role of ACEs is essential to breaking the cycle of DMC and designing interventions that prioritize healing, resilience, and community support. Within juvenile justice populations, the prevalence of ACEs is alarmingly high: studies consistently show that upwards 70% of system-involved youth have experienced at least one ACE, and many have suffered multiple, overlapping traumas (Justice Policy Institute, 2017). Stressful situations and traumatic events in adolescence both have a role in predisposing young people to engage in criminal behavior (Fang et al., 2016). An expanding body of research suggests that childhood trauma and adverse experiences can lead to a variety of negative health outcomes, including attempted suicide among adolescents and adults (Dube et al., 2001). Childhood sexual and physical abuse have been strongly associated with suicide attempts (Dube et al., 2001).

The original ACE study was conducted between 1995 and 1997 by researchers in a partnership between the federal CDC and the Department of Preventive Medicine at Kaiser Permanente San Diego (Felitti et al., 1998). This first-of-its-kind, 17,000-participant study looked at the relationship between ten categories of adverse childhood experiences on health outcomes in adulthood and there were 10 factors studied that occurred before age eighteen (Felitti et al., 1998). These factors are as follows physical abuse, sexual abuse, verbal abuse, physical neglect, emotional neglect, family member diagnosed with mental illness, family member addicted to alcohol or another substance, a mother treated violently, and a family member who is imprisoned; however, have been expanded over the years with research. Each of the ten ACEs was assigned a score of "1" if it was associated with the traumatic experience. This resulted in a maximum possible score of 10 points on the assessment tool, indicating that a higher score reflects greater exposure to trauma. The ACEs trauma exposure assessment can be found in Appendix A. This 10-item instrument is in the public domain and is freely available for public use without restriction or special permission (CDC, 2023).

Efforts to integrate trauma-informed practices into the juvenile justice system have been blocked by historical and bureaucratic barriers, even though many adolescents in the system have experienced trauma (Goshe, 2019). In recent years, research has identified adolescent delinquency as an important negative repercussion of greater ACEs exposure, highlighting the importance of ACEs prevention programs, proactive screening, and early childhood interventions in developmental crime prevention efforts (Jackson et al., 2023). Although ACEs exposure occurs during all stages of childhood, it

is most common during early (5 years or younger) and middle childhood (6 to 12 years) compared to adolescence (Crouch et al., 2019). Moreover, about 70% of young people in the juvenile legal system meet the criteria for mental health disorder, and 30% of these subsets meet the criteria for Post-Traumatic Stress Disorder (PTSD) (Justice Policy Institute, 2023). Efforts have been made to make facilities developmentally appropriate and supportive for all youth, including caring for those who have suffered trauma (Teigen, 2018).

ACEs impair behavioral control, with higher ACEs predicting greater impairment in both children and adults (Shin et al., 2018). A study utilizing data from 3,444 participants in the Fragile Families and Child Wellbeing study revealed that an increase in ACEs correlates with a decrease in self-control among both male and female children (Chapple et al., 2021). A study of youth in Florida's juvenile legal system revealed that over 50% had four or more ACEs, compared to only 13% in the original CDC-Kaiser study (Baglivio et al., 2014). The Florida researchers concluded that higher ACEs scores correlate with an increased risk of serious, persistent, and chronic criminal offending in adolescence and throughout the lives of the youth (Folk et al., 2021). Texas data mirrors this trend, with the TJJD (2025) reporting that 52% of youth in secure facilities have four or more ACEs, and when broken down, about 50% of boys have four or more ACEs, and 87% of girls have four or more, with 47% of girls having seven or more.

A review of research on ACEs, family functioning, and adolescent mental health found a significant link between ACEs and mental health (Scully et al., 2020). The prevalence of trauma histories in youth within the juvenile legal system has led to the

development and implementation of evidence-based policies, practices, and cross systems-based approaches focused on identifying ACES and helping young people heal from their past adverse experiences called, “Trauma-Informed Care,” or TIC and at its core, TIC begins by asking, “What has happened to this child?” rather than traditional responses to delinquency which focus on “What is wrong with this child” (Justice Policy Institute, 2023). Trauma-informed care is a treatment framework that involves understanding, recognizing and responding to the effects of all types of traumas and is especially important for justice-involved youth, who often report high levels of trauma (Teigen, 2018). Trauma-informed care can include policies and programs that screen youth for trauma exposure; use evidence-based assessment and treatment of trauma-related symptoms; make relevant resources available to children, families, and service providers; and maintain an environment that recognizes and decreases the effects of trauma (Teigen, 2018). To be trauma informed as a system is to be culturally competent, objective, data-driven, and collaborative in all efforts to best serve system-involved youth and their families (Lacey, 2013).

The ACEs framework has contributed to advances in developmental science by examining the interdependent and cumulative nature of adverse childhood environmental exposures on life trajectories; however, missing from the ACEs framework, is the role of pervasive and systematic oppression that afflicts certain racialized groups and that leads to persistent threat and deprivation (Barajas-Gonzalez et al., 2021). Despite the clear evidence, efforts to integrate TIC into juvenile justice settings has historically been inconsistent and hindered by bureaucratic barriers (Goshe, 2019). Yet, studies show that

trauma-informed policies—when grounded in cultural competence and community support—can significantly reduce recidivism and promote resilience (Jackson et al., 2023).

Understanding ACEs is essential for this study because trauma exposure does not occur in isolation—it intersects with broader structural inequities, including institutional racism and DMC. Without addressing the root causes of trauma and its disproportionate impact on youth of color, reforms will fail to deliver equitable outcomes. This section demonstrates the necessity of designing interventions and risk assessments that account for ACEs while reducing their compounding effect on justice-involved youth. This sets up an examination of how the TJJD created and applied its trauma-responsive framework, the Texas Model. The following section reviews the TJJD's Texas Model, which represents a shift toward recognizing and addressing the cumulative trauma that many youths bring with them into secure facilities.

The Texas Juvenile Justice Department (TJJD): Texas Model

The TJJD plays a central role in shaping how youth who experience ACEs and DMC are served within the state's juvenile legal system. This research study examined commitment and admission data from TJJD. To provide appropriate context, it is essential to analyze the implementation of their Texas Model within secure facilities once a youth has been committed by a judge.

After the 82nd Texas Legislature merged with the Texas Youth Commission and Texas Juvenile Probation Commission in 2011, the TJJD was formed to unify juvenile justice oversight and ensure consistent rehabilitative practices across the state (Texas

Office of the Attorney General, 2020). The TJJD is now designated as the sole state agency responsible for overseeing supervision and rehabilitation services within the juvenile justice system.

Recognizing the need for a trauma-responsive framework, the TJJD launched the Texas Model in 2019 as a comprehensive approach to reform its secure facilities. The guiding principle is clear: youth cannot develop needed skills or achieve meaningful behavioral change without first feeling physically and psychologically safe (TJJD, 2025). This marked Texas's adoption of TIC within secure facilities by implementing principles that guide agency operations through evidence-based strategies to promote lasting behavioral change and skill development (TJJD, 2025). The Texas Model's goal is to implement data-driven, research-based initiatives that help the agency achieve the following: physical and psychological safety for all youth and staff, a structured rehabilitative environment in which staff have the tools to shape behavior and reinforce treatment goals, and observable behavior change showing youth can regulate themselves and respond appropriately to their environment (TJJD, 2025).

A key strength of the Texas Model is its emphasis on shifting direct-care staff from an authoritarian approach to an authoritative, relationship-based one. This shift aligns with evidence that supportive, developmentally appropriate interactions help youth learn self-regulation skills and transition more successfully back into their communities (Teigen, 2018). To enhance facility safety, the TJJD introduced integrated training programs aimed at fostering appropriate adult-youth relationships which were designed to build rapport and connection, which in turn facilitate the correction of youth behavior

(TJJD, 2025). As a result, the Texas Model initiatives are grounded in Trust-Based Relational Intervention (TBRI), an evidence-based approach to help youth build positive connections and correct negative behaviors before they escalate, based on Bath's Three Pillars of Trauma Wise Care: Safety, Connection, and Coping (TJJD, 2025).

In 2023, TJJD began expanding upon the early development of the Texas Model by introducing a milieu-based implementation of Dialectical Behavior Therapy (DBT) (TJJD, 2025). Research shows DBT can reduce self-harm and suicide behaviors in adults and adolescents, and pilot studies demonstrate that dorm-based DBT can reduce recidivism, self-harm, and aggression and increase employment in adolescents treated in juvenile justice settings (TJJD, 2025). The TJJD has evolved and offers more TIC to justice-involved youth than most other states, particularly for youth in secure facilities, which are typically high-risk.

While the Texas Model represents progress toward a more trauma-responsive and rehabilitative juvenile justice system, ensuring that youth receive equitable treatment also depends on the quality and consistency of the tools used to assess their risks and needs (Teigen, 2018). Risk and needs assessments play a pivotal role in determining how youth are processed, treated, or diverted within the system. However, the effectiveness of the Texas Model depends on the consistent application of risk and needs assessments that guide placement, supervision, and treatment plans. Research shows that without attention to equity in how these tools are applied, disparities can persist or even widen (Viljoen et al., 2019). Ensuring that screening and intervention processes are culturally competent, trauma-informed, and responsive to each youth's developmental stage is critical for

minimizing DMC and promoting positive outcomes. The next section explores how risk screening among juveniles' shapes case outcomes, highlighting the strengths and persistent gaps in current practices that affect decisions about detention, placement, and services.

Risk Screening Among Juveniles

Effective risk and needs assessment are a foundational practice in modern juvenile justice, intended to ensure that youth receive services matched to their level of risk while promoting rehabilitation and community safety (Teigen, 2018). Risk screening tools help standardize how practitioners identify factors that predict reoffending, as well as protective factors that can buffer youth from deeper system involvement (Viljoen et al., 2019). Effective risk screening is a critical component in the juvenile justice system, aimed at identifying youths who may pose a risk to themselves or the community. By systematically assessing various factors related to a juvenile's behavior and circumstances, practitioners can make informed decisions that balance public safety with the needs of the youth. Risk screening for juveniles differs greatly between jurisdictions due to the lack of a nationwide assessment tool and limited oversight, resulting in inconsistent evaluation and management.

When implemented equitably, validated risk and needs assessments provide an evidence-based means to divert youth from unnecessary confinement, reduce recidivism, and connect them to developmentally appropriate supports. For example, the Justice Policy Institute (2017) found that systematic use of these tools allows agencies to classify youth into low-, moderate-, or high-risk categories and match services accordingly.

Guided by the Risk–Need–Responsivity (RNR) model, these frameworks emphasize that youth with the greatest risk of reoffending should receive the most intensive services, while those with lower risk should avoid unnecessary intervention that may do more harm than good (Development Services Group, 2015). The risk principle suggests that the level of service should match the risk level of the offender, so that the highest-risk offenders receive the most intensive services and surveillance; the need principle emphasizes targeting criminogenic needs factors that are associated with criminal or delinquent behavior; and the responsivity principle suggests that treatment and interventions should be guided by characteristics of the offender that may affect his or her ability to respond and change (such as learning style or motivation) (Viljoen et al., 2019). There is usually little room for practitioners and professionals to use their discretion when calculating risk using the actuarial approach, though there may be an override option available (Viljoen et al., 2019). It is important to ensure there is no measurement bias present in a risk/needs assessment that may result in different predictions of reoffending depending upon youths' race/ethnicity, gender, age, or other demographic characteristics (Viljoen et al., 2019).

Risk/needs assessments generally categorize youth into one of three levels of risk: low risk, moderate risk, or high risk. Low risk means youths are unlikely to reoffend or engage in delinquent behavior in the future and do not need the number of services or the supervision that moderate- or high-risk youths may require; however, "low risk" does not indicate "no risk" (Vincent et al., 2012). Youths who are categorized as low risk are unlikely to recidivate, but there is still a chance they could commit a crime or delinquent

act (Vincent et al., 2012). The juvenile justice system should offer various evidence-based treatment options to address adolescents' developmental needs (Justice Policy Institute, 2017).

However, research highlights persistent concerns that risk assessments can unintentionally reinforce racial and ethnic disparities if they are not critically examined for bias or applied inconsistently (Viljoen et al., 2019). For instance, Black youth are more likely than their peers to be waived to adult court, even when controlling for offense type and severity (Hockenberry, 2021). This underscores how bias can enter decision-making at multiple contact points, from screening to placement recommendations. Scholars and service providers alike contend that for justice-involved youth, rehabilitation rather than punishment is a more developmentally appropriate mode of intervention (Robinson & Kurlychek, 2019).

Texas provides a relevant case study, in 2010, the state implemented a risk and needs instrument for county probation departments to guide individualized case plans, supported by the Juvenile Case Management System to track outcomes (Justice Policy Institute, 2017). While these measures have improved consistency, researchers note the system still requires safeguards to ensure tools function equitably across racial and ethnic groups, gender, and age (Vincent et al., 2012). Effective risk screening also requires attention to mental health needs tied to ACEs. Since 2001, Texas mandated the use of the Massachusetts Youth Screening Instrument-Second Version (MAYSI-2), validated mental health screening, to assess youth for mental health challenges at probation intake (Justice Policy Institute, 2017). This practice has strengthened connections with

specialized probation officers and community-based services, helping prevent unnecessary incarceration for youth with significant trauma histories.

Teigen (2018) suggested that systems should find ways to address youths' risks and needs outside the court system and involve them in diversion opportunities only as long as necessary. Promising community-based models, like the South Bronx Community Connections (SBCC) program, demonstrate how risk and needs screening can support diversion when paired with culturally competent, neighborhood-based supports (Teigen, 2018). Such approaches highlight the need to address risk factors beyond the courtroom, emphasizing protective community networks that promote resilience and healing. This initiative diverted youth from formal court involvement by connecting them to a network of supportive adults and activities in their neighborhoods and encouraging their engagement in neighborhood improvement projects like community gardens, as well as facilitating family involvement through outreach and parental coaching and support (Teigen, 2018). An independent evaluation from the John Jay College of Criminal Justice found that youth who participated in the SBCC program were one-third less likely to be rearrested than similarly situated peers and the program's mandate with each youth lasts only 60 days, although youth have an opportunity for continued voluntary engagement after that period expires (CCFY, 2014).

Some jurisdictions, like Utah and Tennessee, have enacted laws and policies that direct child-serving systems other than the justice system, including those responsible for child welfare and health and human services, to address the risks and needs of young people (Teigen, 2018). States can foster the development of promising programs to

address juvenile delinquency with innovation funds. In Tennessee, state statute prohibits agencies, like the Department of Children's Services, from spending state funds on any juvenile justice program unless the program is evidence-based, in that the law directs the department to "continue the ongoing research and evaluation of sound, theory-based and research-based programs to identify and expand the number and type of available evidence-based programs" (Teigen, 2018).

One of the attributes of a well-designed risk assessment instrument is that it will work equally well for all youth, regardless of race, ethnicity, gender, or other similar factors (Teigen, 2018). Effective tools can minimize bias by standardizing how agencies determine a youth's risk to public safety and plan for case management and where risk and needs assessments are not examined to identify differential ability to predict reoffending among different groups of youth, there is a risk that they will increase racial and ethnic disparities, or other forms of disparities, in the juvenile justice system (Vincent et al., 2012). From identifying the risks and needs associated with delinquency to evaluating promising practices employed by the justice system, research can serve as a guidepost for lawmakers seeking to create effective juvenile justice policies that will improve outcomes for youth and the community (Teigen, 2018). States that have increased the age for juvenile jurisdiction, as well as those considering such legislative changes, have started to integrate screening tools, risk assessments, and needs assessments into their management strategies. This approach ensures that each youth receives more effective and tailored services (Justice Policy Institute, 2017). Effective utilization of screening tools and assessments within the juvenile justice system can lead

to improved resource management and the development of robust strategies for serving young individuals more efficiently. This approach can significantly reduce the extent of a young person's involvement in the justice system while also being cost-effective (Justice Policy Institute, 2017).

In conclusion, while risk screening is a vital component of an evidence-based juvenile justice system, it must be implemented with continuous attention to fairness and cultural competence. Failing to do so can perpetuate the very disparities the system aims to reduce. Understanding and accurately assessing the risks and needs of justice-involved youth is essential for tailoring interventions that promote rehabilitation and reduce recidivism. However, risk screening alone does not fully address the developmental challenges of adolescents as they transition into adulthood. As a result, there is a growing acknowledgment of the necessity to re-evaluate the age limits for juvenile jurisdiction, ensuring that legal standards are consistent with current research on adolescent brain development and maturity. Consequently, many states have pursued “raise-the-age” legislation to ensure that young people receive appropriate treatment within the justice system that reflects their unique developmental stage (Menon & McCarter, 2021).

Raising the Juvenile Age Legislation

The USA does not have a consistent age of majority for criminal responsibility in its justice systems (Menon & McCarter, 2021). A growing body of developmental research has reshaped how policymakers understand adolescent offending, supporting a shift in juvenile justice policy toward approaches that reflect what is now known about brain development and psychosocial maturity (Menon & McCarter, 2021). Central to this

shift is the “raise-the-age” movement, which advocates increasing the upper age limit for juvenile court jurisdiction so that older adolescents are not prematurely processed in the adult criminal system (National Governors Association [NGA], 2021). Historically, many states prosecuted 16- and 17-year-olds as adults, despite research showing that the prefrontal cortex — the area of the brain that governs decision-making, impulse control, and risk assessment — continues to develop well into the mid-20s (Skibba, 2018). Advances in neurobiology indicate that adolescent brains differ in significant ways from adult brains, and typical human brains do not reach maturity until around 25 years of age (Menon & McCarter, 2021). Neuroscientific evidence confirms that youth are more susceptible to peer influence and less capable of fully anticipating the consequences of their actions, factors that mitigate culpability and favor a rehabilitative response (Teigen, 2018).

Within the U.S. Department of Justice, the OJJDP reports that more than 31 million American youth were under juvenile court jurisdiction in 2017, and of these justice-involved youth, 79% were between the ages of 10 and 15 years, 12% were age 16 years, and 9% were age 17 years (Hockenberry & Puzzanchera, 2020). The developmental research shows there are better public safety and stronger youth development outcomes when 16- and 17-year-olds are served by the juvenile justice system (Justice Policy Institute, 2022). State statutes define who is under the jurisdiction of the juvenile court, and in most states, the juvenile court has original jurisdiction over all youth charged with a law violation who were younger than age 18 at the time of the offense, arrest, or referral to court (Puzzanchera et al., 2022). In the past decade, states

have increasingly modified the age of juvenile court jurisdiction and transfer laws (Thomas, 2017). By 2021, 47 states had amended laws to define “minors” for juvenile jurisdiction as youth up to age 18, recognizing that keeping older adolescents in the juvenile system improves rehabilitation and reduces recidivism (Justice Policy Institute, 2017; Teigen, 2024). Connecticut, Illinois, and Massachusetts reported declines in juvenile crime rates after implementing such reforms, suggesting that developmentally appropriate interventions can improve community safety and youth outcomes simultaneously (Justice Policy Institute, 2017). Practitioners suggest that youth treated in the juvenile justice system are less likely to re-offend based on more developmentally appropriate treatment provisions as compared to youth handled in the adult criminal justice system (Robinson & Kurlychek, 2019).

However, state-level disparities persist. States like Vermont have pushed further, enacting staged legislation to raise the upper age of jurisdiction to 20 years old, becoming the first state in the United States to do so (Menon & McCarter, 2021). Texas law provides for the certification of a person 18 years of age or older, who is alleged to have committed murder or capital murder as a juvenile between the ages of 10 and 17 (Texas Office of the Attorney General, 2020). In contrast, Texas law still provides for the discretionary transfer of youth as young as 14 to adult court for certain felonies (Texas Office of the Attorney General, 2020). Research demonstrates that youth prosecuted in the adult system face greater risks of victimization, poorer long-term employment outcomes, and higher recidivism (Sharlein, 2016). Youth held in adult facilities are also

far more likely to attempt suicide compared to their peers in juvenile detention (Arya, 2018).

The connection between “raise-the-age” reforms and DMC is critical. Youth of color are disproportionately represented among those transferred to adult court, exacerbating the long-term harms they experience (Hockenberry & Puzzanchera, 2020). As states consider raising the age, it is imperative that reforms explicitly address how transfer statutes, prosecutorial discretion, and minimum age thresholds interact to either reduce or reproduce racial and ethnic disparities (Menon & McCarter, 2021).

Georgia, Michigan, Missouri, New York, North Carolina, and Wisconsin have all already taken some significant steps to advance a developmentally appropriate juvenile justice approach (Justice Policy Institute, 2017). In 2017, New York raised the age of juvenile court jurisdiction to include most people under the age of 18; however, New York’s law did not take effect until October 2018, and prosecutors could still petition for hearings to transfer youth to the adult system for the most serious crimes (Teigen, 2024). As of 2021, Michigan and New York have raised the maximum jurisdiction age to 18, meaning that young adults can remain under juvenile courts' purview until they turn 19 (Dodds, 2020). Accordingly, officials in several states are considering extending the upper age limits of juvenile court jurisdiction beyond age 18 to include emerging adults or young people through their early 20s (Juvenile Justice Year End Report, 2021).

States are increasingly setting a minimum age at which youth and young adults can be processed through juvenile courts, but there is significant variation in the minimum age established in statute, offenses excluded from minimum age requirements,

and the discretion afforded to prosecutors and judges (NGA, 2021). For example, a Washington statute sets the minimum age of prosecution at 8, but to charge children between 8 and 12 in juvenile court, state prosecutors must prove that they "have sufficient capacity to understand the act" (NGA, 2021). Conversely, the minimum age of prosecution in California is 12, but the state excludes certain serious crimes from minimum age restrictions, and twenty-seven states currently do not set forth a minimum age of prosecution through statute; however, several states introduced some form of legislation related to the minimum age of juvenile prosecution (NGA, 2021).

There have also been "raise-the-age" reforms to transfer ages to allow limitations on transferring youth to adult court systems using judicial and prosecutorial discretion. Furthermore, while a statute may determine the minimum age at which a transfer may be considered, judicial discretion still often plays an active role and in 2018, California became the first state in the country to limit transfer eligibility to only 16- and 17-year-olds, meaning youths 15 and younger must be adjudicated in juvenile court (NGA, 2021). After raising the age of majority, Connecticut, Illinois, and Massachusetts reported declines in their states' juvenile crime rates below the national average (Justice Policy Institute, 2017). Scholars note that although causality cannot be assumed, there may have been a "raise the age" downstream effect, where the 16- and 17-year-olds convicted by the Connecticut juvenile justice system experienced better rehabilitation and outcomes from the start and eventually resulted in less adult crime and imprisonment resulting in improved community safety (Justice Policy Institute, 2017).

Raising the age is better for public safety because research conclusively shows that the juvenile justice system does a better job of preventing recidivism than the adult correction system, which means in the future, we will have fewer crime victims, and less money spent on incarceration (Litten, 2016). Across the United States, there has been a significant decline in youth arrests for those younger than 18 years old (from 175,000 youth per year in 2007 to 75,900 youth per year in 2018) and in youth convicted under the jurisdiction of the criminal court, which coincides with the raise-the-age laws effective from 2007 (Puzzanchera et al., 2018). Menon and McCarter (2021) assert allowing states to arbitrarily establish their age of majority results in an unequal and unfair application of the law and ensures that the most vulnerable youth face worse outcomes and an inconsistent age of majority not equitable (e.g., racial and ethnic disparities); since it varies by state, it is also not equal. Equality would be the first step of treating all youth the same across states, in other words, implementing a national age of majority; equitable, fair, and impartial treatment should be a second step and would mean that youth have full and equitable participation in a justice system designed to meet their needs (Menon & McCarter, 2021).

When young people are in the adult justice system, they and their communities are less safe than they could be, and in places that have not yet raised the age, a generation of youth will continue to face challenges transitioning to adulthood because of their exposure to the adult justice system (Justice Policy Institute, 2017). Michigan, Texas, and Wisconsin already have county-based models that have proven they can address young people's mental health challenges in the community and outside the deep

end of the juvenile justice system, and models that show how the state can increase diversion so that increased resources can be focused on serving more youth in their home communities (Justice Policy Institute, 2017). Costs did not rise significantly for taxpayers in states that raised the age, such as Connecticut, Massachusetts, and Illinois; these juvenile justice systems implemented approaches that helped their juvenile justice systems dramatically reduce reliance on confinement, so they could redirect resources to serve more youth at home (Justice Policy Institute, 2017).

Results from this study indicate that many justice-involved youth carry significant burdens of ACEs. Raising the age of jurisdiction is only one step; it must be paired with evidence-based programs that address ACEs, promote mental health, and build skills for successful reintegration (Justice Policy Institute, 2017; Teigen, 2018). The movement to raise the age of juvenile court jurisdiction reflects a broader commitment to align justice practices with developmental science and promote equitable treatment for youth across states. These reforms not only improve outcomes for young people by providing more appropriate, rehabilitative responses but also contribute to enhanced public safety and reduced racial and ethnic disparities within the system (Justice Policy Institute, 2017). As juvenile justice systems evolve through evidence-based policies and legislative changes, it becomes increasingly important to synthesize these insights to inform future research and practice. Ultimately, “raise-the-age” legislation reflects a national commitment to align policy with science, acknowledging that treating adolescents as fully mature adults contradicts research and risks harming public safety (Menon & McCarter, 2021; NGA, 2021). This discussion sets the stage for the study’s final conclusions, which synthesize

the implications of DMC, ACEs, institutional racism, and developmental science to inform more just and effective responses to youth offending.

Summary and Conclusions

In Chapter 2, I presented the research strategy and theoretical framework, drawing on GST to explain pathways into delinquency and examining institutional racism as it connects to DMC. A historical review of the juvenile justice system contextualized its development and the shifting balance between rehabilitation and punishment. This chapter presented a synthesis of research on DMC and RED, exploring their origins, key decision-making points, and promising practices to reduce them. It also examined the evolution and impact of ACEs, the implementation of the Texas Model for TIC, juvenile risk screening practices, and recent "raise-the-age" legislation aimed at aligning policy with adolescent brain development.

The evidence demonstrated that consistent, evidence-based, and equity-focused approaches are essential to disrupting DMC, mitigating the long-term effects of ACEs, and improving outcomes for youth of color. Critically, literature underscores the importance of open collaboration between juvenile justice officials and community stakeholders in dismantling biased practices and building trust (Lacey, 2013; Teigen, 2018). As Rovner (2014) emphasized, youth of color remain disproportionately represented at every stage of the system, despite the system's original rehabilitative mission. Reforms over the past decade provide a transformative opportunity to replace punitive models with trauma-informed interventions that reflect what is known about adolescent development. However, what remains less clear is how these interventions can

be implemented consistently across diverse jurisdictions (Baglivio et al., 2020; Viljoen et al., 2019), and how juvenile justice systems can address deeply entrenched structural barriers that continue to perpetuate disparities (Hirschfield, 2018).

Moving forward, system leaders must implement validated, culturally responsive practices and remain accountable through rigorous data analysis and community partnership. This study highlights the urgent need for practitioners and policymakers to act on the findings regarding DMC, ACEs, and risk assessment tools to design policies that do not perpetuate cycles of inequity. By investigating the complex intersections of ACEs, DMC, and risk screening within the Texas juvenile justice system, this research aims to generate actionable evidence that can guide equitable trauma-informed policies and ultimately answer the critical question of how to disrupt systemic inequality for justice-involved youth.

In Chapter 3, the research design builds upon these findings by examining commitment and admission data within the TJJD to identify patterns related to DMC and ACEs. The rationale, methodology, and data analysis plan, alongside a discussion of threats to validity and ethical considerations for participants, are examined. This study adds to the growing body of knowledge that can inform policymakers, practitioners, and communities working to create a more equitable and developmentally appropriate juvenile justice system. Chapter 3 concludes with a summary of these elements.

Chapter 3: Research Method

Since the central goal of the juvenile justice system is to prevent reoffending and promote improved outcomes, relevant data and research should be considered cornerstones of the policymaking process (Teigen, 2018). The purpose of this study was to explore the relationship between DMC and ACEs within the TJJD. Before this study, the relationship between ACEs and DMC on minority youth within the TJJD was unexamined. As the juvenile system began to take on its more punitive practices, racial disparities in the application of justice became prevalent among Black and Hispanic youth, as opposed to White youth.

In this chapter, I explain the research design and rationale and describe the methodology and data analysis plan for this study. I discuss the threats to validity and the ethical procedures for participants. The research question "Does exposure to Adverse Childhood Experiences (ACEs) significantly increase the likelihood of disproportionate juvenile justice contact among minority youth in Texas?" is examined. Finally, I summarize the conclusions of Chapter 3 and provide a preview of Chapter 4.

Research Design and Rationale

The research design is the "blueprint" that enables the investigator to come up with answers to questions and guides the investigator through the various stages of the research (Frankfort-Nachmias et al., 2015). Good research designs minimize the plausible alternative explanations for the hypothesized cause-effect relationship (Trochim & Land, 1982, p. 1). There are numerous research designs that one can utilize in their research

studies; however, depending on the type of research study and methods, a researcher must select the design that best supports his/her work.

I used a quantitative research design to examine DMC and its relationship to ACEs among minority Black youth. This possible correlation assisted in determining if minority Black youth's exposure to high levels of trauma impacts their disproportionate contact with the juvenile system in Texas. The dependent and independent variables were proven to have a statistically significant relationship or not. Race/ethnicity, sex/gender, and age at admission were considered as demographic variables. The dependent variable, DMC, was operationalized as the proportion of juvenile justice admissions for each racial/ethnic category. The independent variables representing trauma exposure were the admitted youth with a history of each specific ACEs score and the admitted youth falling within different categories of ACEs exposure. The independent variables were comprised of scores from the 10-question ACEs trauma exposure assessment. The ACEs questionnaire can be found in Appendix A. This 10-item instrument is in the public domain and is freely available for public use without restriction or special permission (CDC, 2023).

I used a quantitative correlational research design, employing Pearson correlation analysis with a two-tailed significance test to examine whether statistically significant relationships exist between the independent variable (ACEs) and the dependent variable (DMC). Correlational research is appropriate for addressing research questions that seek to determine the strength and direction of relationships between variables without manipulating them (Hassan, 2024). This design directly aligns with the study’s central

question of whether exposure to ACEs significantly predicts disproportionate juvenile justice contact among minority youth. By using this approach, I produced objective evidence to clarify how these factors are related within the TJJD's framework.

There were no time or resource constraints, in that the data was readily available for extraction via the Texas open data portal.

The quantitative research design allowed de-identified secondary aggregated data to be used to examine how trauma levels impact DMC. The secondary aggregated data, located in Appendix B, were retrieved from the TJJD website (www.tjjd.texas.gov) specifically commitment and admissions data, which hosts an open data portal that provides de-identified youth admission records for secondary analysis, including demographic data (race/ethnicity, sex/gender, age at admissions), ACEs trauma scores, and ACEs traumatic exposures by category. The data was captured and categorized by TJJD on all youth committed to state-level secure facilities in Texas by juvenile court judges because they committed serious felony offenses (TJJD, 2024, p. 4).

The quantitative, correlational research design was appropriate because it allowed for systematic analysis of the relationship between ACEs, risk screening scores, and DMC using large-scale secondary data from the TJJD. This design protects a sensitive juvenile population by minimizing direct contact and upholds confidentiality while producing generalizable findings. Existing secondary data sets are not only inexpensive but are typically readily available for analysis. Quantitative analysis of administrative data is widely used in juvenile justice research to uncover structural disparities and test theories like GST (Teigen, 2018; Viljoen et al., 2019). This approach advances

knowledge in the field by providing objective evidence to inform equitable, data-driven policy and practice reforms.

Methodology

Population

The target population was minority youth, specifically Black youth, male and female, aged 10 to 17 or older, who were committed and admitted to the TJJD, categorized by race/ethnicity, sex/gender, and age at admission. The data on nonminority youth, specifically White youth, who were admitted to the TJJD, were also analyzed to provide a DMC/ACEs comparison analysis for this study. The entire target population completed the ACEs trauma screen assessment upon admission to TJJD. Due to this sensitive population, a quantitative research design was chosen because it allows research on a vulnerable population without compromising confidentiality and keeping participants protected for research purposes. A statistical power analysis was completed for this quantitative study to determine an appropriate sample size using the G*Power calculator tool by Faul et al., (2009). The target population size was unknown initially; however, a power analysis yielded a sample size of at least 42. The retrieved TJJD data yielded records on 2,591 juvenile justice-involved youth across 5 fiscal years, 2020-2024, who were committed and admitted to the TJJD and administered an ACEs trauma exposure assessment. Of the 2,591, the minority Black Youth and non-minority White youth who were sampled for this study yielded a total population of 1,520.

Sampling and Sampling Procedures

For this study, a total population sampling strategy was used. Total population sampling is a type of purposive sampling technique that researchers use when examining the entire population that has a particular set of characteristics (Laerd Statistics, 2018). Total population sampling allowed an examination of the dataset based on specific characteristics. Demographics such as race are critical in evaluating DMC; therefore, they were obtained in the sample. The data used for this study were aggregated.

The secondary aggregated data was retrieved from the TJJD website (www.tjjd.texas.gov) which hosts an open data portal that provides de-identified youth commitment and admission records for secondary analysis, including demographic data (race/ethnicity, sex/gender, age at admissions), ACEs trauma scores, and ACEs traumatic exposure by category. The aggregated data opened automatically into a Microsoft Excel file for sorting and analysis as shown in Appendix B. The data is captured and categorized by TJJD on all youth committed to state-level secure facilities in Texas by juvenile court judges because they committed serious felony offenses (TJJD, 2024, p. 4).

The sampling frame for this study consisted of youth committed and admitted by the TJJD between FY 2020 and FY 2024. Inclusion criteria required that individuals have complete data on race/ethnicity, age, sex, and total ACEs scores and trauma categories. There were no cases with missing or incomplete data on these variables excluded, which ensured accuracy in the correlational analysis. This approach ensured that only records relevant to examining DMC and ACEs were included in the final dataset.

A statistical power analysis was completed for this quantitative study to determine an appropriate sample size using the G*Power calculator tool by Faul et al. (2009). The effect size was set at .05 based on the Pearson correlation test to provide a large effect analysis. The Pearson correlation test measures the strength and direction of a linear relationship between two variables (Field, 2018). The correlation coefficient (*r*) ranges from -1 to +1, with a value closer to +1 indicating a strong positive relationship, meaning that as one variable increases, the other also tends to increase; a value closer to -1 indicates a strong negative relationship, meaning that as one variable increases, the other tends to decrease; while a value near zero suggests there is little to no linear relationship between the variables (Field, 2018).

A two-tailed significance was also set within the test parameters. A two-tailed significance test is used to assess whether the correlation coefficient is statistically significant, that is unlikely to have occurred by chance alone and examines the possibility of a relationship in either direction (positive or negative; Field, 2018). In this context, it examined whether there is a significant correlation between ACE exposure and juvenile justice contact, either positive or negative. A *p*-value is generated from this test, and if the *p*-value is less than the chosen level of significance (typically $p < .05$), the result is considered statistically significant, indicating there is evidence to conclude that a true relationship exists in the population (Field, 2018).

The power level was .95, and the alpha/significance level, which is the probability of finding a statistically significant result when there is no real effect, was set at .05. A power analysis yielded a target sample size of at least 42. The retrieved TJJD data yielded

records on 2,591 juvenile justice-involved youth across 5 fiscal years, 2020-2024, who were committed and admitted to the TJJD and administered an ACEs trauma exposure assessment. Of the 2,591, the minority Black youth and nonminority White youth who were sampled for this study yielded a population of 1,520.

Procedures of Recruitment, Participation, and Data Collection

The necessary approvals were obtained from Walden University's Institutional Review Board (IRB) on April 7, 2025 (Approval Number: 04-07-25-0521382), before moving forward in the research process to collect any data. The recruitment process was not required for this study since it utilized secondary aggregated data, eliminating the need for personal contact or interaction with research subjects. Demographic variables included race/ethnicity, sex/gender, and age at admission. Informed consent was not required because the research used secondary, de-identified, aggregated data. The data was retrieved from the TJJD website which hosts an open data portal that provides de-identified youth commitment and admission records for secondary analysis, including demographic data (race/ethnicity, sex/gender, age at admissions), ACEs trauma scores, and ACEs traumatic experiences by category. The data was captured and categorized by TJJD on all youth committed to state-level secure facilities by juvenile court judges because they committed serious felony offenses (TJJD, 2024, p. 4). The aggregated data opened automatically into a Microsoft Excel file for sorting and analysis, as shown in Appendix B. The extracted data presented in Appendix B includes the variables used for analysis: fiscal year, race/ethnicity, sex, age at admission, and ACEs categories. The data was saved in Microsoft Excel for storage and password-protected for an added layer of

security and confidentiality. Due to the nature of data collection, no exit strategy or follow-up procedures were needed for the research participants.

Archival Data

The recruitment procedures for this study were deemed unnecessary due to the use of secondary aggregated data. Consequently, there was no personal contact or recruitment of research subjects. Participants were from de-identified secondary data, so informed consent was not required. The data was retrieved from the TJJD, specifically the commitment and admission data, which hosts an open data portal that provides de-identified youth admission records for secondary analysis. The aggregated data opened automatically into a Microsoft Excel file for sorting and analysis, as shown in Appendix B. The data was saved in Microsoft Excel for storage and password-protected for an added layer of security and confidentiality.

These datasets were available to the public with confidential information redacted. Access to the data was retrieved from the TJJD website including demographic data (race/ethnicity, sex/gender, age at admissions), ACEs trauma scores, and ACEs traumatic experiences by category. The data was captured and categorized by TJJD on all youth committed to state-level secure facilities in Texas by juvenile court judges because they committed serious felony offenses (TJJD, 2024, p. 4). Since the data is readily accessible through open data portal channels, no specialized permission letters were needed except for Walden University's IRB on April 7, 2025 (Approval Number: 04-07-25-0521382).

The secondary datasets did not include any legal documents, and all retrieved information was redacted without any identifying markers, except basic demographic information. The data obtained from the TJJD, a state government agency, is known for its reputable and comprehensive statewide data collection. Since January 1999, Texas juvenile probation departments have been required to submit individual case file data in an electronic format to the TJJD or its predecessor, the Texas Juvenile Probation Commission; and, in addition, annual reporting and periodic surveys from juvenile probation departments provide supplemental information to the agency for data collection (TJJD, 2024). TJJD is a reliable source for regularly collecting data on disproportionate minority contact and adverse childhood experiences. This data includes information cross-referenced by race/ethnicity, age at admission, sex/gender, and ACEs data. The TJJD (2025) operates on a fiscal year that runs from September 1 to August 31 of the following year. Therefore, the chosen secondary aggregated dataset was thoroughly categorized across five fiscal years, spanning from 2020 to 2024.

Instrumentation and Operationalization of Constructs

The ACEs 10-item questionnaire was originally developed by Dr. Vincent Felitti and colleagues as part of the landmark ACEs Study published in 1998 (Felitti et al., 1998). Research demonstrates that the ACEs tool is a reliable and valid measure of early childhood trauma exposure, and its use has been well established in studies examining system-involved youth (Baglivio et al., 2014). This 10-item instrument is in the public domain and is freely available for public use without restriction or special permission (CDC, 2023).

Published studies have demonstrated strong reliability and validity of the ACEs instrument, with Cronbach's alpha coefficients typically reported between .76 and .88 for internal consistency in various populations (Anda et al., 2006; Dube et al., 2001). Similar findings have been confirmed in more recent community-based and juvenile justice samples, supporting its use with diverse youth populations (Ford et al., 2010). The ACEs instrument has been used extensively with both adults and adolescents, including at-risk youth and those in secure detention settings, providing further support for its appropriateness in this study. For this study, ACEs scores were obtained from standardized assessments administered by TJJD personnel and reported in de-identified, aggregated form. Consequently, no additional pilot testing or validation was performed, and no modifications to the tool were made for this study. While instrument validity and reliability were not re-tested in this secondary data sample, its consistent use in prior research supports its appropriateness for addressing the study's research question in investigating the relationship between ACEs and DMC in the Texas juvenile justice system.

Data Analysis Plan

Statistical software known as SPSS was used to analyze the collected data for this study. Before running the analysis, the commitment and admission data from TJJD data were checked for missing or duplicate cases and any errors in the key variables, such as ACEs scores, ACEs categories, and DMC indicators. No cases with incomplete ACEs responses or missing demographic variables critical to the study were found, which maintained the integrity of the dataset. Descriptive statistics were run to examine

distributions and assess normality, ensuring the data met the assumptions for Pearson correlation analysis. Any outliers or extreme ACEs scores that unduly influenced the correlation results were carefully examined and addressed through removal, if needed, to strengthen the validity and reliability of the findings.

The following research question and hypothesis were developed from a review of the existing literature.

RQ: Does exposure to adverse childhood experiences (ACEs) significantly increase the likelihood of disproportionate juvenile justice contact among minority youth in Texas?

$H_0$1: Increased exposure to adverse childhood experiences (ACEs) does not significantly increase the likelihood of disproportionate juvenile justice contact among minority youth in Texas.

H_a1: Increased exposure to adverse childhood experiences (ACEs) significantly increases the likelihood of disproportionate juvenile justice contact among minority youth in Texas.

Data analysis was conducted using Pearson correlation to test significant relationships between the independent variables (ACEs scores & trauma categories) and the dependent variable (DMC). A two-tailed significance test was used, with a typical threshold for statistical significance set at $p < .05$; however, a more conservative threshold of $p < .01$ was also noted when appropriate to reduce the risk of Type I error (Field, 2018). Demographic factors such as race/ethnicity, sex/gender, and age at admission were included as covariates to help control for confounding effects. Results

were interpreted by reporting correlation coefficients (r values), p-values, and confidence intervals to show the size, direction, and strength of the relationships.

Threats to Validity

This quantitative study used secondary aggregated data, which offered notable strengths and limitations concerning validity. A major strength was the protection of participant confidentiality, particularly for a vulnerable juvenile population, by analyzing existing data collected through standardized procedures by the TJJD, which helps reduce reporting bias and supports data reliability. Nonetheless, several threats to external validity are present. The sample is limited to youth admitted to secure state facilities in Texas, excluding those served in non-secure or community-based settings, which limits the generalizability of findings to the entire juvenile justice population in Texas. Since data came from existing records rather than experiments, reactive effects like testing reactivity or multiple-treatment interference are minimal.

Regarding internal validity, the researcher had no direct control over the data collection process, which introduces potential instrumentation threats due to variability in how Texas juvenile justice personnel administered trauma assessments and recorded demographic information. Additionally, because the data was provided in aggregated form rather than at the individual level, this limited the ability to examine personal differences or other factors that could help explain the results more deeply. However, the use of validated tools such as the ACEs screening instrument enhances construct validity by ensuring that trauma exposure is measured consistently. Threats related to history and

maturation are limited in this context because the study relies on cross-sectional administrative data instead of longitudinal or experimental interventions.

Statistical conclusion validity was addressed by using Pearson correlation with set significance levels to assess relationships between variables and minimize Type I (false positive) and II (false negative) errors. In summary, while secondary data analysis has inherent limitations, this study's reliance on validated measures, standardized data collection protocols, and suitable analytic methods help mitigate threats to validity and support credible and meaningful findings.

Ethical Procedures

Ethical considerations were prioritized throughout this study to ensure compliance with established research standards for protecting human participants. Approval was obtained from Walden University's IRB on April 7, 2025 (Approval Number: 04-07-25-0521382). Because the study relied solely on secondary, publicly available data, no additional permissions were required beyond IRB approval. The data sets used for analysis were retrieved from the TJJD open data portal (www.tjjd.texas.gov) and contained only de-identified, aggregated information. No legal documents or personal identifiable information were included. As the data were fully anonymized prior to release, informed consent from individual participants was not required, and no recruitment materials or direct participant contact were involved. There were no intervention activities or direct data collection from individuals. Therefore, concerns related to participant refusal, early withdrawal, or adverse events were not applicable.

All data were stored securely on the researcher's password-protected computer, with access limited to the researcher. The data remained confidential throughout the study and were destroyed after the dissertation was completed, in accordance with IRB requirements and best practices for secure data management. No additional ethical issues such as conflicts of interest, power differentials, or use of incentives were applicable due to the nature of the archival data and the absence of direct participant interaction.

Summary

In Chapter 3, I detailed the research design, rationale, methodology, and data analysis plan for this quantitative correlational study. I used secondary data from the TJJD to examine whether exposure to ACEs significantly increases the likelihood of disproportionate juvenile justice contact among minority youth in Texas. The study design prioritized confidentiality and minimized potential bias by using de-identified, aggregated data. Potential threats to validity were addressed through careful sampling, ethical safeguards, and appropriate statistical procedures to ensure the integrity and reliability of the findings.

Building on this methodological foundation, in Chapter 4, I present the results of the study. I begin by revisiting the research question and hypothesis introduced in Chapter 1, then outline the data collection and screening process. Chapter 4 reports the findings through descriptive and inferential statistical analyses, highlighting the relationships between ACEs and DMC variables. I conclude with a summary of the key results, setting the stage for interpretation and discussion in Chapter 5.

Chapter 4: Results

The purpose of this quantitative correlational study was to determine if a relationship exists between ACEs and DMC within the TJJD. This possible correlation helped to determine if minority youth's exposure to high levels of trauma impacts their disproportionate contact within the juvenile system in Texas. In this chapter, I present the results from the quantitative correlational analysis, which offer essential context for examining the research question and hypothesis as follows:

RQ: Does exposure to adverse childhood experiences (ACEs) significantly increase the likelihood of disproportionate juvenile justice contact among minority youth in Texas?

$H_0$1: Increased exposure to adverse childhood experiences (ACEs) does not significantly increase the likelihood of disproportionate juvenile justice contact among minority youth in Texas.

H_a1: Increased exposure to adverse childhood experiences (ACEs) significantly increases the likelihood of disproportionate juvenile justice contact among minority youth in Texas.

Chapter 4 begins with an introduction, the research question, and the hypothesis proposed in Chapter 1 of this study. The data collection process is then described in detail. Next, the chapter outlines the data analysis, followed by the presentation of the study's results and a summary of the chapter. Descriptive statistics and inferential analyses were used to evaluate the significance of relationships between the selected variables.

Data Collection

Acquisition of the Data Sample

The data sample was immediately accessible due to the open data set being readily accessible through the TJJD's public data portal, www.tjjd.texas.gov. Since I used existing, de-identified secondary data, there was no need for participant recruitment or informed consent procedures. Due to this, no recruitment or response rates are applicable to this study. There were no significant discrepancies between the data collection plan described in Chapter 3 and the actual process. The secondary data was retrieved as anticipated from the TJJD open data portal. The data were complete, de-identified, and provided in aggregated form, consistent with the approved research plan.

Sample Representativeness and Generalizability

The sample for this study included aggregated, de-identified data on youth admitted to secure state facilities within the TJJD. While this sample provides valuable insights into youth experiencing deeper system involvement, it does not represent all youth served in non-secure or community-based placements. Therefore, findings may not be fully generalizable to the entire population of justice-involved youth in Texas but do reflect patterns among those with the most serious offenses. I used a simple correlational design without the inclusion of covariates in a multivariate model. Therefore, univariate analyses to justify covariate inclusion were not applicable.

Results

Descriptive Statistics

Descriptive statistics were calculated to characterize the demographic profile of the youth sample. Frequencies and percentages were reported for categorical variables, including race/ethnicity, sex, and age at admission. The mean and standard deviation were reported for total ACEs scores and trauma exposure categories within minority and nonminority groups. The dependent variable, DMC, was operationalized as the proportion of juvenile justice admissions by racial/ethnic category. The independent variables included trauma indicators measured by the 10-item ACEs assessment and grouped ACEs categories. The sample included 5 fiscal years of data (FY 2020–2024) for youth admitted to secure state facilities within the TJJD. The TJJD fiscal year runs from September 1 through August 31 of the following year (TJJD, 2024). Data cleaning confirmed that no missing values were present, ensuring the accuracy of the analysis. Descriptive analyses were conducted using SPSS, with means and standard deviations computed for continuous variables to assess central tendencies and variability.

The following tables summarize the total sample population, demographic characteristics, ACEs trauma exposure categories, ACEs scores, means, and standard deviations, for the sample utilized in this study. Presenting these descriptive statistics in tabular form helps clarify the composition of the sample and highlights patterns relevant to understanding the relationships between ACEs, DMC, and demographic factors. These descriptive statistics provide context for interpreting the relationships examined in the subsequent analyses.

Total Sample Population

Table 1 displays all youth committed to secure facilities and admitted to TJJD from FY 2020-2024.

Table 1

Youth Admissions by Fiscal Year

Fiscal year	Number of admissions
2020	456
2021	569
2022	426
2023	562
2024	578

Note. The TJJD fiscal year operates from September 1 to August 31 of the following year (TJJD, 2024).

Race/Ethnicity

Table 2 displays the race/ethnicity distribution across FY 2020-2024. Most of the admitted youth were identified as Hispanic and Black, and this trend was consistent over all five fiscal years. It is critical to note that this study mentioned the demographics of Hispanic and Other racial/ethnic groups in Table 2 to reflect the ethnic diversity of the TJJD, and although the study did not focus on those populations, it helps to provide a broader understanding of racial disparities within its juvenile justice system. For this study, race/ethnicity focused on minority Black youth and nonminority White youth, as reflected in the full data analysis found in Tables 10 and 12.

Table 2

Race/Ethnicity Composition of Youth Admissions by Fiscal Year

Race/Ethnicity	FY2020 (*n*=456)	%	FY2021 (*n*=569)	%	FY2022 (*n*=426)	%	FY2023 (*n*=562)	%	FY2024 (*n*=578)	%
Black/African American	173	37.9	200	35.1	177	41.5	222	39.5	247	42.7
Hispanic	191	41.9	248	43.6	169	39.7	220	39.2	226	39.1
White	89	19.5	115	20.2	77	18.1	119	21.2	101	17.5
Other	3	0.7	6	1.1	3	0.7	1	0.2	4	0.7

Note. The TJJD fiscal year operates from September 1 to August 31 of the following year (TJJD, 2024).

Sex/Gender

Table 3 displays the sex/gender distribution across FY 2020-2024. The sex/gender breakdown was as follows: 2020 was 456; in 2021, it was 569; in 2022, it was 426; in 2023, it was 562; and in 2024, it was 578. Across all years, most admissions were male.

Table 3

Sex/Gender Composition of Youth Admissions by Fiscal Year

Gender	FY2020 (*n*=456)	FY2020 %	FY2021 (*n*=569)	FY2021 %	FY2022 (*n*=426)	FY2022 %	FY2023 (*n*=562)	FY2023 %	FY2024 (*n*=578)	FY2024 %
Male	423	92.8%	511	89.8%	383	89.9%	498	88.6%	532	92.0%
Female	33	7.2%	58	10.2%	43	10.1%	64	11.4%	46	8.0%

Note. The TJJD fiscal year operates from September 1 to August 31 of the following year (TJJD, 2024).

Age at Admission

Table 4 displays the age at admission distribution across FY 2020-2024. Age groups were categorized based on admission age at the time of TJJD commitment. Most youth were admitted between the ages of 15 and 17.

Table 4

Age at Admission by Fiscal Year

Age Group	FY2020 (*n*=456)	%	FY2021 (*n*=569)	%	FY2022 (*n*=426)	%	FY2023 (*n*=562)	%	FY2024 (*n*=578)	%
10–12 Years	0	0.0	1	0.2	6	1.4	1	0.2	3	0.5
13 Years	16	3.5	12	2.1	8	1.9	13	2.3	13	2.3
14 Years	33	7.2	38	6.7	34	8.0	32	5.7	39	6.8
15 Years	97	21.3	103	18.1	66	15.5	85	15.1	107	18.5
16 Years	173	37.9	232	40.8	146	34.3	193	34.3	185	32.0
17 Years and Older	137	30.0	183	32.2	166	39.0	238	42.4	231	40.0

Note. The TJJD fiscal year operates from September 1 to August 31 of the following year (TJJD, 2024).

Dependent Variable: DMC

Table 5 provides the distribution of admissions by race/ethnicity, allowing for the assessment of DMC across FY 2020-2024. Minority Black youth admissions consistently represented a disproportionately high percentage of admissions relative to their low general population proportions in Texas. This was the highest increase among all

racial/ethnic groups, signaling growing DMC concerns for this population. The dependent variable, DMC, was operationalized as the proportion of juvenile justice youth admissions for each racial/ethnic category, and disparities were assessed by comparing admission rates across each racial/ethnic category.

Table 5

DMC Disparities by Fiscal Year

Demographic category	FY 2020 (*n* = 456)		FY 2021 (*n* = 569)		FY 2022 (*n* = 426)		FY 2023 (*n* = 562)		FY 2024 (*n* =578)	
	n	%	*n*	%	*n*	%	*n*	%	*n*	%
Gender										
Male	423	92.8	511	89.8	383	89.9	498	88.6	532	92.0
Female	33	7.2	58	10.2	43	10.1	64	11.4	46	8.0
Race/Ethnicity										
Black or African American	173	37.9	200	35.1	177	41.5	222	39.5	247	42.7
Hispanic	191	41.9	248	43.6	169	39.7	220	39.2	226	39.1
White	89	19.5	115	20.2	77	18.1	119	21.2	101	17.5
Other	3	0.7	6	1.1	3	0.7	1	0.2	4	0.7

Note. The TJJD fiscal year operates from September 1 to August 31 of the following year (TJJD, 2024).

Among the under-18 general population, youth in Texas across the years 2020-2024, Black youth were the minority when compared to White youth (Garza et al., 2020). Every Texan (2024) reported Hispanic youth made up about 48% of the under-18 population, while Non-Hispanic Black youth accounted for 12%, Non-Hispanic Asian youth accounted for 5%, and Non-Hispanic White youth accounted for roughly 32–35%. These demographic figures highlight the increasing racial and ethnic diversity among Texas youths.

Independent Variables: ACEs Scores & Exposure Categories

Table 6 outlines the distribution of specific ACEs trauma exposure categories across FY 2020-2024. Most youth admitted to TJJD consistently reported overwhelming household disruption and dysfunction across all fiscal years, such as parents separated or divorced, an incarcerated household member, and household substance abuse, which all indicate persistent patterns of household instability. The independent variables for trauma exposure were operationalized by specific ACEs scores and categories of ACEs among admitted youth. This allowed analysis of the link between ACEs and DMC by comparing minority Black and non-minority White youth as reflected in later tables.

Table 6

ACEs Trauma Exposure Categories by Fiscal Year

ACEs Category	FY2020 (*n*=456)	%	FY2021 (*n*=569)	%	FY2022 (*n*=426)	%	FY2023 (*n*=562)	%	FY2024 (*n*=578)	%
History of emotional abuse	148	32.7	161	30.3	129	30.6	197	35.2	221	38.2
History of physical abuse	116	25.6	132	24.9	104	24.7	179	32.0	149	25.8
History of sexual abuse	52	11.5	92	17.3	64	15.2	98	17.5	98	17.0
History of emotional neglect	123	27.2	133	25.0	135	32.1	177	31.6	185	32.0
History of physical neglect	87	19.2	130	24.5	100	23.8	192	34.3	173	29.9
History of family violence	149	32.9	166	31.3	146	34.7	237	42.3	215	37.2
Household substance abuse	212	46.8	248	46.7	187	44.4	306	54.6	315	54.5
Household mental illness	89	19.6	129	24.3	99	23.5	160	28.6	135	23.4
Parents separated or divorced	390	86.1	423	79.7	343	81.5	477	85.2	498	86.2
Incarcerated household member	268	59.2	284	53.5	251	59.6	381	68.0	383	66.3

Note. The TJJD fiscal year operates from September 1 to August 31 of the following year (TJJD, 2024).

Table 7 illustrates the distribution of total ACEs trauma scores among admitted youth across FY 2020-2024. Most youth admitted to TJJD consistently had high ACEs scores (4 or more), indicating multiple forms of trauma. The categories of 2–3 ACEs and 4–5 ACEs comprise the highest percentages across all years. ACEs scores categorize trauma based on cumulative exposure. For each of the 10 ACEs experienced, a score of "1" is assigned, which yields a cumulative ACEs score, with a maximum of 10, where elevated scores reflect a greater burden of childhood trauma exposure.

Table 7

ACEs Trauma Scores Distribution by Fiscal Year

ACEs Score Category	FY2020 (*n*=456)	%	FY2021 (*n*=569)	%	FY2022 (*n*=426)	%	FY2023 (*n*=562)	%	FY2024 (*n*=578)	%
0–1 ACEs	86	19.0%	122	23.0%	93	22.1%	80	14.3%	88	15.2%
2–3 ACEs	153	33.8%	169	31.8%	140	33.3%	155	27.7%	171	29.6%
4–5 ACEs	119	26.3%	125	23.5%	84	20.0%	155	27.7%	158	27.3%
6–7 ACEs	63	13.9%	74	13.9%	63	15.0%	99	17.7%	100	17.3%
8–10 ACEs	32	7.1%	41	7.7%	41	9.7%	71	12.7%	61	10.6%

Note. The TJJD fiscal year operates from September 1 to August 31 of the following year (TJJD, 2024).

Mean & Standard Deviation

Table 8 presents the mean (*M*) and standard deviation (*SD*) for dependent and independent study variables, specifically minority Black youth, non-minority White youth, ACEs trauma exposure categories, and ACEs scores across FY 2020-2024. Each variable was measured for the same cases, ensuring comparability to calculate the minimum, maximum, *M*, and *SD*. The mean for minority Black youth (*M* = 203.80, *SD* = 31.14) was more than double that of non-minority White youth (*M* = 100.20, *SD* = 17.58). The difference between the means of the minority Black youth and the non-minority White youth provides evidence of a racial disparity in system contact. This notable difference suggests a disproportionate representation of minority Black youth in contact with the juvenile justice system, providing initial descriptive support for the concern of DMC as the dependent variable.

Table 8

Means & Standard Deviations: Black Youth & White Youth

	N	Minimum	Maximum	Mean	*SD*
Black youth	5	173.00	247.00	203.80	31.14
White youth	5	77.00	119.00	100.20	17.58
Household substance abuse	5	187.00	315.00	253.60	56.38
Household mental illness	5	89.00	160.00	122.40	28.63

	N	Minimum	Maximum	Mean	*SD*
Parental separation	5	343.00	498.00	426.20	63.20
Household incarceration	5	251.00	383.00	313.40	63.70
History emotional abuse	5	129.00	221.00	171.20	37.31
History physical abuse	5	104.00	179.00	136.00	29.40
History sexual abuse	5	52.00	98.00	80.80	21.38
History emotional neglect	5	123.00	185.00	150.60	28.26
History physical neglect	5	87.00	192.00	136.40	45.38
History family violence	5	146.00	237.00	182.60	41.09
ACE 0–1	5	80.00	122.00	93.80	16.44
ACE 2–3	5	140.00	171.00	157.60	12.72
ACE 4–5	5	84.00	158.00	128.20	30.23
ACE 6–7	5	63.00	100.00	79.80	18.54
ACE 8–10	5	32.00	71.00	49.20	16.16

	N	Minimum	Maximum	Mean	*SD*
Valid *N* (listwise)	5				

Note. (N = 5) Fiscal years 2020–2024. The TJJD fiscal year operates from September 1 to August 31 of the following year (TJJD, 2024).

For additional descriptive analyses of Table 8, several household-level ACEs indicators were analyzed to illustrate the patterns and prevalence of family-related trauma among these justice-involved youth. For example, examining household-level ACEs exposure indicators, the mean prevalence of household substance abuse (M = 253.60, SD = 56.38) and household incarceration (M = 313.40, SD = 63.70) were among the highest, highlighting the prevalence of severe family dysfunction among the youth sampled. The separation of the parents was the highest ACEs trauma exposure, with a mean of M = 426.20 (SD = 63.20), emphasizing how family disruption is a dominant theme within this group's early life experiences. This result correlates with Baglivio et al. (2014), who stated the increased vulnerability of the system-involved youth to familial unrest, especially Black youth. In contrast, household mental illness presented a lower mean (M = 122.40, SD = 28.63) relative to other household-level ACEs. ACEs types demonstrated an increasing pattern of accumulation of trauma.

Further, the breakdown of ACEs score ranges revealed an important pattern related to cumulative adversity. Analyzing the ACEs score ranges, the mean frequencies decreased as the ACEs score categories increased. Specifically, participants with 0–1 ACEs had a mean frequency of 93.80, while those with 8–10 ACEs had a mean frequency of only 49.20. This pattern illustrates that while low to moderate ACEs scores

are more common, there is still a significant subcategory of youth experiencing high cumulative adversity, and the presence of any youth in the highest ACEs categories still supports the possibility that increased ACEs exposure is linked with juvenile justice contact, particularly among minority youth.

When looking at individual abuse and neglect histories, emotional abuse (M = 171.20, SD = 37.31) and family violence (M = 182.60, SD = 41.09) were the most frequently reported, followed by emotional neglect (M = 150.60, SD = 28.26). This indicated that exposure to direct abuse and witnessing violence are common experiences that may compound other risk factors for justice involvement. Elkins et al. (2019) suggested the link between the overwhelming overlap of trauma and juvenile system participation. Sexual abuse had the lowest means (M = 80.80, SD = 21.38), with a high standard deviation indicating varied participant experiences.

The descriptive statistics presented in Table 8 provided critical insight into the distribution and prevalence of ACEs and the disproportionate representation of minority youth within the juvenile justice system. These findings highlighted significant patterns of household dysfunction, abuse, and neglect, as well as notable racial disparities that warranted further examination. While the descriptive results suggested a potential link between higher ACEs exposure and increased likelihood of juvenile justice contact among minority youth, descriptive data alone cannot determine whether these observed relationships were statistically significant.

These descriptive results only provide foundational context; therefore, the following section presents the inferential analyses, using Pearson correlations, to formally

test the research hypothesis and assess whether increased ACEs exposure significantly predicts DMC in the juvenile justice system within TJJD. Before conducting the Pearson correlation analyses, the dataset was carefully checked to confirm that key conditions were met. Before running the Pearson correlation analyses, statistical assumptions were checked, and no major outliers were found. Because these conditions were satisfied, the results of the correlation tests can be considered accurate and reliable for this study. The results of these tests informed whether the null hypothesis could be rejected and provided deeper insight into the impact of ACEs on justice system involvement for minority youth in Texas.

Inferential Analyses

Inferential statistical analyses were conducted to examine the relationships between ACEs and DMC among youth admitted to secure state facilities within the TJJD. Pearson correlation analyses explored the strength and direction of associations between total ACEs scores, grouped trauma exposure categories, and DMC, which was operationalized as racial and ethnic representation within the sample. Correlation coefficients (r) were calculated, and statistical significance was evaluated using two-tailed tests at the $p < .05$ and $p < .01$ levels. Correlation strength was interpreted using conventional guidelines, with values closer to +1.0 indicating a strong positive relationship and values closer to 1.0 indicating a strong negative relationship (Field, 2018). If the p-value was less than the chosen level of significance, the result was considered statistically significant, suggesting evidence of a true relationship with the

population. Confidence intervals (CI) were reviewed for significant results; all significant coefficients had 95% CIs that did not include zero.

Effect size represents the practical strength of the relationship between variables, independent of sample size. Effect sizes were interpreted using Cohen's (1988) conventional benchmarks, where correlations of .10, .30, and .50 indicate small, medium, and large effects, respectively. Recent scholars emphasize the value of contextualizing effect sizes within the research domain to ensure meaningful interpretation (Fritz et al., 2012; Sawilowsky, 2009). All analysis was conducted using SPSS.

The results showed clear patterns aligned with the central research question: whether ACE exposure significantly increases the likelihood of DMC among minority Black youth in Texas.

For *Black youth*, several ACEs categories demonstrated strong, statistically significant positive correlations with DMC. For example, household substance abuse (r = .95*, $p < .05$), parental separation (r = .94*, $p < .05$), household incarceration (r = .94*, $p < .05$), history of emotional abuse (r = .97**, $p < .01$), history of sexual abuse (r = .88*, $p < .05$), emotional neglect (r = .94*, $p < .05$), physical neglect (r = .91*, $p < .05$), and ACEs scores in the 6–7 range (r = .96*, $p < .05$) were all significant. These results suggest that higher exposure to these specific ACEs is associated with greater DMC for minority Black youth.

Conversely, other ACEs indicators for Black youth, such as household mental illness (r = .80) and history of family violence (r = .87), did not reach significance (*ns*), indicating no clear evidence of a relationship at the $p < .05$ level.

For *White youth*, the correlations were not statistically significant, though some showed moderate to high coefficients — for example, household mental illness (r = .86, *ns*) and history of physical abuse (r = .84, *ns*). This suggests that, within this sample, ACEs exposure did not significantly increase DMC rates for non-minority White youth.

Effect sizes for significant findings among Black youth generally fell within the large range ($r \geq .50$), highlighting meaningful practical implications (Cohen, 1988; Fritz et al., 2012; Sawilowsky, 2009). No post-hoc analyses were necessary, as the planned correlation tests sufficiently addressed the research hypothesis.

Overall, these results *support the hypothesis* that ACEs exposure is more strongly related to disproportionate juvenile justice contact for minority Black youth than for non-minority White youth. This underscores the importance of integrating trauma-informed practices and culturally responsive strategies to reduce racial disparities in the Texas juvenile justice system.

Pearson Correlation Analysis: Minority Black Youth

Table 9 presents the Pearson correlation coefficients for key assumptions examining the relationship between juvenile justice contact for minority Black youth and various ACEs indicators. These significant correlations highlight how increased exposure to adverse childhood experiences is associated with disproportionate minority contact, emphasizing systemic inequalities within the juvenile justice system. The analysis revealed several notable positive correlations between indicators of household- and family-level trauma and the number of Black youths admitted to secure state facilities.

Table 9

Pearson Correlations for Key Assumptions: Minority Black Youth

	Black youth	Substance Abuse	Parental separation	Household incarceration	Emotional abuse	Physical abuse	Family violence	ACEs 6-7	ACEs 8-10
Black youth	—	.95*	.94*	.94*	.97**	.77	.87	.96*	.84
Household substance abuse	.95*	—	.99**	.98**	.98**	.91*	.95*	.98**	.87
Parental separation	.94*	.99**	—	.95*	.98**	.88	.91*	.95*	.80
Household incarceration	.94*	.98**	.95*	—	.97**	.91*	.98*	.99**	.93*
History emotional abuse	.97**	.98**	.98**	.97**	—	.82	.90*	.96**	.82
History physical abuse	.77	.91*	.88	.91*	.82	—	.97**	.91*	.91*
History family violence	.87	.95*	.91*	.98**	.90*	.97**	—	.98**	.97**
ACEs 6–7	.96*	.98**	.95*	.99**	.96**	.91*	.98**	—	.94*
ACEs 8–10	.84	.87	.80	.93*	.82	.91*	.97**	.94*	—

Note. Pearson correlations for Black youth. *Indicates correlation is significant at the 0.05 level *$p < .05$, **$p < .01$ (2-tailed).

As reflected in Table 9, it was particularly striking that Black youth representation was greatly correlated with household substance abuse ($r = .95$*, $p < .05$), household incarceration ($r = .94$*, $p < .05$), history of emotional abuse ($r = .97$**, $p < .01$), and

parental separation ($r = .94^*$, $p < .05$) indicating overlapping traumatic experiences. This indicated that substance abuse within the household frequently co-occurs with other family disruptions and violence and aligned with existing literature showing that parental substance use often leads to family instability and increased risk of system involvement (Duke et al., 2010).

The inclusion of historical family violence in this analysis highlighted its pivotal role as a co-occurring ACEs factor. History of family violence in Black youth had strong positive correlations with household incarceration ($r = .98^{**}$, $p < .01$), physical abuse ($r = .97^{**}$, $p < .01$), physical neglect ($r = .98^{**}$, $p < .01$), and ACEs scores in the 6–7 range ($r = .98^{**}$, $p < .01$) and 8–10 range ($r = .97^{**}$, $p < .01$). This pattern indicated that youth exposed to family violence are more likely to accumulate a higher total number of ACEs, placing them at greater risk for negative developmental and system-involvement outcomes. This finding mirrors previous research emphasizing that exposure to family violence contributes significantly to cumulative trauma burden, which can in turn increase the likelihood of contact with the juvenile justice system (Ford et al., 2007).

The full Pearson correlation analysis for minority Black youth was presented below in Tables 10 and 11 to provide transparency of the statistical results, allowing for a comprehensive review of the interrelationships among ACEs scores and household variables, thereby demonstrating the strength and direction of the bivariate relationships. Correlation coefficients, significance levels ($^*p < .05$, $^{**}p < .01$) were reported for each group. The correlation analysis revealed strong and statistically significant relationships among various ACEs and factors related to juvenile justice contact of Black youth. The

presented results revealed a recurrent trend: the greater the incidence of household-level hardships, including parental absence, imprisonment, or drug abuse, the greater the number of Black youths in the juvenile justice system. Previous studies proved these issues enhance stress, behavioral risks, and negatively affect academic or social support outcomes among black children (Baglivio et al., 2014; Tufford & Dylan, 2025).

Table 10

Full Pearson Correlations Black Youth: ACEs Household Trauma Categories

	Black Youth	Substance Abuse	Mental Illness	Parental Separation	Incarceration	Emotional Abuse	Physical Abuse	Sexual Abuse	Emotional Neglect	Physical Neglect	Family Violence
Black Youth	—	.95*	.80	.94*	.94*	.97**	.77	.88*	.94*	.91*	.87
Substance Abuse	.95*	—	.88	.99**	.98**	.98**	.91*	.87	.91*	.95*	.95*
Mental Illness	.80	.88	—	.82	.85	.77	.94*	.94*	.80	.96**	.92*
Parental Separation	.94*	.99**	.82	—	.95*	.98*	.88	.84	.86	.90*	.91*
Incarceration	.94*	.98**	.85	.95*	—	.97**	.91*	.81	.96**	.95*	.98**
Emotional Abuse	.97**	.98**	.77	.98**	.97**	—	.82	.80	.92*	.89*	.90*
Physical Abuse	.77	.91*	.94*	.88	.91*	.82	—	.81	.81	.95*	.97**
Sexual Abuse	.88*	.87	.94*	.84	.81	.80	.81	—	.79	.91*	.82
Emotional Neglect	.94*	.91*	.80	.86	.96**	.92*	.81	.79	—	.93*	.94*
Physical Neglect	.91*	.95*	.96**	.90*	.95*	.88*	.95*	.91*	.93*	—	.98**
Family Violence	.87	.95*	.92*	.91*	.98**	.90*	.97**	.82	.94*	.98**	—

Note. Pearson correlations for Black youth. *Indicates correlation is significant at the 0.05 level *$p < .05$, **$p < .01$ (2-tailed). Negative values indicate an inverse relationship.

Notably, in Table 10, ACEs trauma categories, household substance abuse shows a very strong positive correlation with household incarceration ($r = .98$**, $p < .01$), parental separation ($r = .99$**, $p < .01$), and emotional abuse ($r = .98$**, $p < .01$) suggesting that these household dysfunctions tend to co-occur in this population. History of emotional abuse and physical abuse also display significant positive correlations with many ACEs variables, such as family violence ($r = .90$*, $p < .05$ and $r = .97$**, $p < .01$, respectively), indicating that maltreatment types are interrelated. Additionally, the history of emotional neglect strongly correlates with emotional abuse ($r = .92$*, $p < .05$), highlighting the prevalent nature of emotional trauma.

Historic variables of emotional and physical trauma also had significant correlations with the involvement of Black youth. There were positive relationships between the history of emotional abuse ($r = .97$**, $p < .01$), the history of emotional neglect ($r = .94$*, $p < .05$), and physical neglect ($r = .91$*, $p < .05$), and sexual abuse ($r = .88$*, $p < .05$). These significant relationships suggested that Black youth in this study often experienced multiple, co-occurring household adversities, underscoring the role of family instability in disproportionate juvenile justice contact.

In Table 11, regarding cumulative ACEs scores, the ACEs scores 4–5, 6–7, and 8–10 displayed very high positive correlations with nearly all individual ACEs variables (e.g., household substance abuse $r = .97$**, $p < .01$, $r = .98$**, $p < .01$, $r = .87$)

underscoring that higher ACEs counts correspond with the presence of multiple adverse conditions.

Table 11

Full Pearson Correlations Black Youth: ACEs Household Scores

	Black youth	ACE 0-1	ACE 2-3	ACE 4-5	ACE 6-7	ACE 8-10
Black youth	—	-.17	.70	.87	.96*	.84
Substance abuse	.95*	-.23	.69	.97**	.98**	.87
Mental illness	.80	-.07	.49	.78	.89*	.91*
Parental separation	.94*	-.21	.75	.98**	.95*	.80
Incarceration	.94*	-.42	.53	.93*	.99**	.93*
Emotional abuse	.97**	-.29	.70	.95*	.96**	.82
Physical abuse	.77	-.31	.45	.89*	.91*	.91*
Sexual abuse	.88*	.15	.68	.75	.87	.81
Emotional neglect	.94*	-.45	.41	.80	.97**	.95*
Physical neglect	.91*	-.25	.49	.85	.98**	.97**
Family violence	.87	-.41	.43	.89*	.98**	.97**
ACE 0-1	-.17	—	.39	-.27	-.33	-.43
ACE 2-3	.70	.39	—	.72	.56	.28
ACE 4-5	.87	-.27	.72	—	.91*	.76
ACE 6-7	.96*	-.33	.56	.91*	—	.94*
ACE 8-10	.84	-.43	.28	.76	.94*	—

Note. Pearson correlations for Black youth. *Indicates correlation is significant at the 0.05 level *$p < .05$, **$p < .01$ (2-tailed). Negative values indicate an inverse relationship.

For example, ACEs scores 6–7 were strongly correlated with household incarceration *(r* = .99**, *p* < .01*),* emotional abuse *(r* = .96**, *p* < .01*)*, emotional neglect *(r* = .97**, *p* < .01*),* physical neglect *(r* = .98**, *p* < .01*),* and family violence *(r* = .98**, *p* < .01*)* illustrated how severe and complex trauma exposure is highly interrelated for Black youth. In comparison, ACEs scores 4-5 were strongly correlated with substance abuse *(r* = .97**, *p* < .01*)* and parental separation *(r* = .98**, *p* < .01*)*, while ACEs scores 8-10 closely correlated with household physical neglect and family violence (both respectively, *r* = .97**, *p* < .01). This indicated that Black youth with multiple ACEs are disproportionately exposed to multiple, interlocking forms of household adversity. Interestingly, lower ACEs scores 0–1 were negatively correlated with several trauma variables but did not reach statistical significance, suggesting that a lack of early adversity is less common in this research sample.

Collectively, these findings suggest that Black youth experiencing multiple ACEs face heightened risk factors linked to juvenile justice contact. These findings strengthened the position that injustice practices should involve the orientation of culturally based interventions and healing-based strategies (Sonu et al., 2024). The interrelatedness of household dysfunction, abuse, neglect, and family violence indicates a complex trauma environment that may contribute to disproportionate juvenile justice involvement in this population.

The pattern of significant relationships between key ACEs indicators and justice involvement suggested that exposure to multiple and overlapping childhood adversities, such as family disruption, substance abuse, and emotional abuse, may contribute to

disproportionate minority contact for Black youth in Texas. These findings aligned with prior research indicating that trauma and household dysfunction are key risk factors for juvenile justice system involvement, particularly for marginalized populations. The results were consistent with the national pattern that demonstrated Black youth are more exposed to various traumas than their peers, and they might struggle to develop and have a higher risk of contact with the sources of justice (Ginwright, 2018; Elkins et al., 2019).

Overall, the strength and significance of these correlations provided initial inferential support for *rejecting the null hypothesis* for minority Black youth, indicating that increased exposure to ACEs significantly increases the likelihood of juvenile justice contact among this population. These findings support the need for trauma-informed interventions and equitable justice system practices (Heard-Garris et al., 2018).

Pearson Correlation Analysis: Non-Minority White Youth

Table 12 presents the Pearson correlation coefficients for key assumptions examining the relationship between juvenile justice contact for non-minority White youth and various ACEs indicators. The correlation analysis for White youth revealed a similar pattern of significant relationships among ACEs variables and juvenile justice-related risk factors, though with some notable differences in magnitude and significance levels from Black youth.

Table 12

Pearson Correlations for Key Assumptions: Nonminority White Youth

	White youth	Substance Abuse	Mental illness	Parental separation	Household incarceration	Emotional abuse	Physical abuse	ACEs 6-7	ACEs 8-10
White youth	—	.75	.86	.74	.64	.62	.84	.67	.60
Household substance abuse	.75	—	.88	.99**	.98**	.98**	.91*	.98**	.87
Household mental illness	.86	.88	—	.82	.85	.77	.94*	.89*	.91*
Parental separation	.74	.99**	.82	—	.95*	.98**	.88	.95*	.80
Household incarceration	.64	.98**	.85	.95*	—	.97**	.91*	.99**	.93*
History emotional abuse	.62	.98**	.77	.98**	.97**	—	.82	.96**	.82
History physical abuse	.84	.91*	.94*	.88	.91*	.82	—	.91*	.91*
ACEs 6–7	.67	.98**	.89*	.95*	.99**	.96**	.91*	—	.94*
ACEs 8–10	.60	.87	.91*	.80	.93*	.82	.91*	.94*	—

Note. Pearson correlations for White youth. * Indicates correlation is significant at the 0.05 level *$p < .05$, **$p < .01$ (2-tailed).

The analysis in Table 12 demonstrated moderate to strong positive correlations between White youth system involvement and multiple household and abuse variables, with values ranging from $r = .60$ to $r = .86$. The strongest bivariate relationship with White youth was seen with household mental illness ($r = .86$) and history of physical

abuse (r = .84). This pattern suggested that for White youth, both direct abuse and family mental health challenges were closely related to system involvement, consistent with evidence that youth exposed to family mental illness face elevated risks of victimization, behavioral issues, and justice contact (Ford et al., 2007).

Household dysfunction variables, including household substance abuse, household mental illness, and parental separation, were strongly intercorrelated, For example, household substance abuse correlated with parental separation (r = .99**, p < .01), household incarceration (r = .98**, p < .01), emotional abuse (r = .98**, p < .01), and ACEs 6-7 (r = .98**, p < .01). ACEs scores in the 6–7 range also had significant correlations with household incarceration (r = .99**, p < .01) and emotional abuse (r = .96**, p < .01). These variables showed strong associations with household incarceration and various types of abuse. These findings align with prior research indicating that family instability and caregiver mental health issues often co-occur and predict youth system involvement (Ford et al., 2007).

The full Pearson correlation analysis for non-minority White youth was presented in Tables 13 and 14 to provide transparency of the statistical results, allowing for a comprehensive review of the interrelationships among ACEs and household variables, thereby demonstrating the strength and direction of the bivariate relationships. Correlation coefficients, significance levels (*p < .05, **p < .01) were reported for each trauma exposure category and ACEs score for White youth. Overall, the results revealed several moderate-to-strong positive correlations, though few reached conventional levels of statistical significance.

Table 13

Full Pearson Correlations White Youth: ACEs Household Trauma Categories

	White youth	Substance abuse	Mental illness	Parental separation	Incarceration	Emotional abuse	Physical abuse	Sexual abuse	Emotional neglect	Physical neglect	Family violence
White youth	—	.75	.86	.74	.64	.62	.84	.81	.47	.75	.70
Substance abuse	.75	—	.88	.99**	.98**	.98**	.91*	.87	.91*	.95*	.95*
Mental illness	.86	.88	—	.82	.85	.77	.94*	.94*	.80	.96**	.92*
Parental separation	.74	.99**	.82	—	.95*	.98**	.88	.84	.86	.90*	.91*
Incarceration	.64	.98**	.85	.95*	—	.97**	.91*	.81	.96**	.95*	.98**
Emotional abuse	.62	.98**	.77	.98**	.97**	—	.82	.80	.92*	.89*	.90*
Physical abuse	.84	.91*	.94*	.88	.91*	.82	—	.81	.81	.95*	.97**
Sexual abuse	.81	.87	.94*	.84	.81	.80	.81	—	.79	.91*	.82
Emotional neglect	.47	.91*	.80	.86	.96**	.92*	.81	.79	—	.93*	.94*
Physical neglect	.75	.95*	.96**	.90*	.95*	.89*	.95*	.91*	.93*	—	.98**
Family violence	.70	.95*	.92*	.91*	.98**	.90*	.97**	.82	.94*	.98**	—

Note. Pearson correlations for White youth. *Indicates correlation is significant at the 0.05 level *$p < .05$, **$p < .01$ (2-tailed). Negative values indicate an inverse relationship.

The Pearson correlations demonstrated that the indicators of ACEs were strongly related to the presence of different traumatic histories in the households and abuse experiences of the non-minority White youth. For White youth, as reflected in Table 13, a few of the strongest relationships were observed with household substance abuse (r =

.75), household mental illness (r = .86), parental separation (r = .74), history of physical abuse (r = .84) and a history of sexual abuse (r = .81). This pattern suggests that for White youth, both direct abuse and family mental health challenges are closely related to system involvement, consistent with evidence that youth exposed to family mental illness face elevated risks of victimization, behavioral issues, and justice contact (Ford et al., 2010). While these correlations were substantial, their p-values exceeded the .05 threshold, indicating that they are *not* statistically significant in this research sample. Several ACE domains showed significant relationships with one another; however, they did not translate into significant correlations with justice contact for White youth.

Markedly, the household substance abuse had very strong positive correlations to the parental separation (r = .99**, p < .01), the household incarceration (r = .98**, p < .01), household history of emotional abuse (r = .98**, p < .01). Household substance abuse also had very strong positive correlations ACEs scores from 4–5 (r = .97**, p < .01) and 6–7 (r = .98**, p < .01). This pattern suggested that household substance abuse frequently co-occurs with other forms of household instability and moderate-to-high levels of adverse experiences. Interestingly, household incarceration showed a slightly lower correlation (r = .64) than for Black youth, suggesting that while parental incarceration is relevant, other household dysfunctions may exert a greater influence within the White youth. These findings explained that family dysfunctions are commonly comorbid and enhance accumulative trauma in White youth (Elkins et al., 2019). Strongly correlated trauma, according to the framework of healing-centered engagement outlined by Ginwright (2018), points to the necessity of culturally competent

interventions, which take into consideration the family structure and not individualized contributing risks.

Furthermore, in Table 13, several important relations appeared among the variables of abuse and neglect. As an example, the history of physical abuse significantly correlated with household mental illness ($r = .94^*$, $p < .05$) and household incarceration ($r = .91^*$, $p < .05$), indicating the overall instability of households in which the abuse occurs (Baglivio et al., 2014). Parental separation was significantly correlated with the history of emotional abuse ($r = .98^{**}$, $p < .01$) highlighting the potential clustering of abuse with family disruptions in this group.

The history of emotional abuse and physical abuse demonstrated significant positive correlations with family violence ($r = .90^*$, $p < .05$ and $.97^{**}$, $p < .01$), and emotional neglect is strongly related to emotional abuse ($r = 0.92^*$, $p < .05$), emphasizing that maltreatment and neglect co-occur within this group. Such results confirmed prior research that highlighted the stratification of adversity in White youth families and further justify the necessity of trauma-aware policies with an equity- and intersectionality-based background (Sonu et al., 2024).

Finally, in Table 14, the cumulative ACEs in the highest categories 6–7 and 8–10 also showed moderate-to-strong correlations with juvenile justice contact for White youth ($r = .67$ and $r = .60$, respectively), but again, these relationships are *not* statistically significant.

Table 14

Full Pearson Correlations White Youth: ACEs Household Scores

	White youth	ACE 0-1	ACE 2-3	ACE 4-5	ACE 6-7	ACE 8-10
White youth	—	.22	.66	.76	.67	.60
Substance abuse	.75	-.23	.69	.97**	.98**	.87
Mental illness	.86	-.07	.49	.78	.89*	.91*
Parental separation	.74	-.21	.75	.98**	.95*	.80
Incarceration	.64	-.42	.53	.93*	.99**	.93*
Emotional abuse	.62	-.29	.70	.95*	.96**	.82
Physical abuse	.84	-.31	.45	.89*	.91*	.91*
Sexual abuse	.81	.15	.68	.75	.87	.81
Emotional neglect	.47	-.45	.41	.80	.97**	.95*
Physical neglect	.75	-.25	.49	.85	.98**	.97**
Family violence	.70	-.41	.43	.89*	.98**	.97**
ACE 0-1	.22	—	.39	-.27	-.33	-.43
ACE 2-3	.66	.39	—	.72	.56	.28
ACE 4-5	.76	-.27	.72	—	.91*	.76
ACE 6-7	.67	-.33	.56	.91*	—	.94*
ACE 8-10	.60	-.43	.28	.76	.94*	—

Note. Pearson correlations for White youth. *Indicates correlation is significant at the 0.05 level *$p < .05$, **$p < .01$ (2-tailed). Negative values indicate an inverse relationship.

The cumulative ACEs scores (4–5 through 8–10) correlated strongly with many variables, reflecting the cumulative impact of adverse experiences on White youth. A strong positive correlation was observed between parental separation and ACEs scores 4-5 ($r = .98^{**}$, $p < .01$), as well as household incarceration and ACEs scores from 6–7 ($r = .99^{**}$, $p < .01$), reinforcing the pattern of cumulative adversity. ACEs 8–10 were moderately to strongly correlated with household mental illness and history of physical abuse ($r = .91^{*}$, $p < .05$). Additionally, the history of emotional neglect was strongly correlated with household incarceration ($r = .96^{**}$, $p < .01$) and ACEs scores from 6–7 ($r = .97^{**}$, $p < .01$), indicating that neglect and household instability were highly related in this sample. ACEs scores showed several expected negative correlations with low ACEs categories (e.g., ACEs 0–1 with household substance abuse $r = –.23$; ACEs 0–1 with mental illness $r = –.07$).

This trend supports the cumulative effect version of trauma exposure (Heard-Garris et al., 2018), which stipulates that the combination of several adversities raises the level of developmental, emotional, and morbidity risks dramatically. The results support the arguments about technocratic approaches to racism and trauma diversification given by León & Gómez Cervantes (2023), as they demand addressing intra-contextual approaches by taking into consideration the systemic disparities in experiencing and reacting to adversity among White youth.

These results suggest that while ACEs are present among White youth in the juvenile justice system, the strength of the relationship between ACEs exposure and justice contact is *less pronounced* and *less consistent* than observed for Black youth. This

pattern may imply that other protective or mediating factors reduce the direct impact of ACEs on system involvement for White youth compared to their Black counterparts. These results highlighted the complex, overlapping nature of adverse childhood experiences within White youth populations, with multiple household risk factors and abuse/neglect experiences significantly interrelated. For non-minority White youth in this study, the correlation results *did not* yield sufficient statistical evidence to reject the null hypothesis, suggesting that increased ACEs exposure *was not* significantly associated with greater juvenile justice involvement for this group.

Comparison of Correlations: Minority Black and Non-Minority White Youth

Table 15 illustrates notable differences in the strength of correlations between key ACEs variables and juvenile justice contact that are *consistently stronger* for Black youth *than* for White youth, suggesting greater cumulative ACEs exposure may contribute to DMC within the TJJD. These findings echo the ACEs framework, which emphasizes that multiple forms of household dysfunction and maltreatment frequently cluster together (Felitti et al., 1998).

Table 15

Comparison of ACEs Correlations: Black and White Youth

	Black youth	White youth
Household substance abuse	.95*	.75
Household mental illness	.80	.86
Parental separation	.94*	.74
Household incarceration	.94*	.64
History emotional abuse	.97**	.62
History physical abuse	.77	.84
History sexual abuse	.88*	.81
History emotional neglect	.94*	.47
History physical neglect	.91*	.75
History family violence	.87	.70
ACE 0–1	–.17	.22
ACE 2–3	.70	.66
ACE 4–5	.87	.76
ACE 6–7	.96*	.67
ACE 8–10	.84	.60

Note. * Indicates correlation is significant at the 0.05 level *$p < .05$, **$p < .01$ (2-tailed). Negative values indicate an inverse relationship.

For Black youth, several household and trauma-related variables demonstrated stronger associations with justice system involvement than for White youth. Specifically, household substance abuse ($r = .95^*$, $p < .05$) and household incarceration ($r = .94^*$ $p <$

.05) showed very strong correlations for Black youth, compared to moderate correlations for White youth (r = .75 and r = .64, respectively). Similarly, parental separation (r = .94*, p < .05), emotional neglect (r = .94*, p < .05), and physical neglect (r = .91*, p < .05) were more strongly associated with justice involvement among Black youth than White youth (ranging from .47 to .75).

The most striking disparity was found in emotional abuse, which yielded a near-perfect correlation for Black youth (r = .97**, p < .01) but only a moderate one for White youth (r = .62). Conversely, White youth showed slightly higher correlations for household mental illness (r = .86 vs. r = .80) and physical abuse (r = .84 vs. r = .77), indicating some overlap in risk factors across groups. Additionally for Black youth, the correlations for several ACEs variables, such as history of sexual abuse (r = .88*, p < .05), and history of emotional abuse (r = .97**, p < .01), were stronger than those for White youth (r = .81; r = .62). However, the overall pattern reflects that Black youth tend to have higher cumulative correlations across multiple ACEs, *supporting the hypothesis* that increased ACEs exposure is associated with greater disproportionate contact for minority youth.

When examining cumulative ACEs scores, the strength of the relationship with juvenile justice contact increased with greater ACEs exposure for both groups. However, Black youth consistently exhibited higher correlations: ACEs 6–7 (r = .96*, p < .05) and ACEs 4–5 (r = .87) were particularly strong, whereas for White youth, these same scores were lower (r = .67 and r = .76, respectively). Interestingly, ACEs 0–1 had a slight

negative correlation for Black youth (r = –.17), while it was positive for White youth (r = .22), suggesting potential protective effects of lower ACE exposure may vary by race.

These findings emphasize a more concentrated burden of adversity among Black youth, with several trauma and household variables having significantly stronger associations with justice involvement. Unlike Black youth, the correlation between White youth and some ACEs variables was somewhat lower (e.g., white youth and history of emotional neglect *r* = .47), which might reflect differences in sample characteristics or reporting patterns. The pattern of associations suggested that White youth also experience significant clustering of ACEs that may contribute to juvenile justice involvement, though the strength of some relationships varies compared to Black youth. These findings highlight the importance of considering racial and contextual factors when addressing juvenile justice disparities.

In both Black and White youth samples, ACEs, including household dysfunction, abuse, neglect, and family violence, were strongly interrelated and collectively associated with increased risk of juvenile justice contact. The strength of correlations tended to be higher for Black youth, suggesting a potentially greater burden or different exposure dynamics in this group. This suggests that Black youth in this study sample may have experienced more concentrated or overlapping household risks, which aligns with existing research on disproportionate exposure to structural and familial adversity. Meanwhile, White youth showed significant correlations across similar ACEs domains, though some associations, such as those involving neglect among White youth, were moderately weaker. These results underscore the need for targeted trauma-informed

interventions that address the cumulative effects of ACEs within minority youth populations to mitigate disproportionate juvenile justice involvement.

Summary

This quantitative correlational study examined whether a relationship exists between ACEs and DMC within the TJJD, specifically whether exposure to trauma impacts minority Black youths' disproportionate contact with the juvenile justice system compared to non-minority White youth.

In summary, the results presented in Chapter 4 provided evidence *supporting* the research question and hypothesis; thus, *rejecting* the null hypothesis as follows:

RQ: Does exposure to adverse childhood experiences (ACEs) significantly increase the likelihood of disproportionate juvenile justice contact among minority youth in Texas?

$H_0$1: Increased exposure to adverse childhood experiences (ACEs) does not significantly increase the likelihood of disproportionate juvenile justice contact among minority youth in Texas.

H_a1: Increased exposure to adverse childhood experiences (ACEs) significantly increases the likelihood of disproportionate juvenile justice contact among minority youth in Texas.

RQ Answer: An exposure to ACEs significantly increases the likelihood of disproportionate juvenile justice contact among minority Black youth in Texas due to higher trauma exposure, which proves the hypothesis to be significant and rejects the null hypothesis.

In response to the research question and hypothesis, the following was found:

The descriptive statistics revealed that minority Black youth were significantly overrepresented in juvenile justice secure facility admissions within the TJJD, highlighting systemic disproportionality. The highest mean for trauma scores for both groups, as shown in Table 8, was observed in parental separation ($M = 426$) and household incarceration ($M = 313$), with many youths clustered within the moderate-to-high ACEs categories (2–5 ACEs and above). This descriptive summary underscores the need for trauma-informed and racially equitable interventions, as supported by prior literature demonstrating that cumulative childhood adversity is a powerful predictor of delinquency and system contact, especially for underserved minority groups (Baglivio et al., 2014; Leiber et al., 2011).

The correlational analyses for both Black and White youth revealed important differences. Among Black youth, multiple ACEs variables, including household substance abuse, parental separation, household incarceration, and emotional abuse—showed strong, statistically significant positive correlations with disproportionate juvenile justice contact ($p < .05$ or $p < .01$). These results indicate that even lower levels of trauma exposure can have a direct and magnifying impact on system involvement for Black youth. In contrast, while White youth also demonstrated moderate-to-strong correlations between ACEs and juvenile justice contact, these associations did not reach statistical significance within this study and tended to cluster at higher ACEs levels.

This pattern suggested that Black youth may experience disproportionate system involvement at lower levels of trauma exposure, while for White youth, the impact of

ACEs may accumulate over time before translating into justice contact. Such racial differences point to the need for disaggregated analyses and caution against one-size-fits-all interventions. Tailored, race-specific pathways of trauma-informed care may be critical: for Black youth, earlier and more targeted trauma-response strategies could mitigate the compounding effects of ACEs, whereas for White youth, protective factors or delayed system contact warrant further exploration. These findings support existing evidence that cumulative childhood adversity contributes to racial disparities in justice system outcomes (Sonu et al., 2024). They also raise important policy questions about the role of community responses, policing practices, and systemic bias in shaping how trauma translates into juvenile justice involvement.

In conclusion, the results presented in Chapter 4 serve as a foundation for the discussions in Chapter 5, where I further interpret these patterns and explore practical implications for addressing racial trauma inequities within the juvenile justice system. These trends underscore the critical need for systemic reforms that prioritize equity, early intervention, and culturally responsive practices to address patterns of disproportionate minority contact. The findings suggest that ACEs contribute to the risk factors influencing juvenile justice involvement for both groups, with a more pronounced and consistently significant impact for minority Black youth in this study. In Chapter 5, I further examine and interpret these descriptive and inferential correlational results, discussing key findings, study limitations, recommendations, and implications for policy, practice, and future research.

Chapter 5: Discussion, Conclusions, and Recommendations

In this chapter, I present a summary of the key findings of the study, offers an interpretation of their significance concerning the research questions and hypotheses, discusses the study's limitations, and outlines recommendations for practice, policy, and future research. The purpose of this quantitative study was to examine whether exposure to ACEs significantly increases the likelihood of DMC among youth committed to the TJJD, focusing specifically on minority Black youth and nonminority White youth. The nature of this study utilized archival de-identified secondary aggregated data on youth commitment admissions from the TJJD to investigate DMC and ACEs. While DMC exists in Texas, its relationship with ACEs of minority youth in the juvenile justice system remained unexamined.

Up to 90% of justice-involved youth report exposure to some type of traumatic event, and on average, 70% of youth meet criteria for a mental health disorder, with approximately 30% of youth meeting criteria for post-traumatic stress disorder [PTSD] (Dierkhising et al., 2013). Justice-involved youth are also at risk for substance use and academic problems, and child welfare involvement; yet, less is known about the details of their trauma histories, and associations among trauma details, mental health problems, and associated risk factors (Dierkhising et al., 2013). The study’s findings align with national trends, as SAMHSA (2024) reports that 17.1% of individuals aged 12 or older experienced a substance use disorder in 2023. Such prevalence may contribute to risk factors underlying juvenile justice involvement, particularly for minority youth exposed

to ACEs. There is a critical need for policies targeting early intervention and equitable mental health access to prevent trajectories into the juvenile justice system.

Quantitative correlational analyses were conducted for both Black and White youth samples to explore patterns of trauma exposure and their relationships to juvenile justice involvement. I used descriptive and correlational analyses to examine differences in trauma exposure by race, identifying variations in contact experienced by Black youth. These concepts have been researched independently of each other; however, to date, no known research studies have examined how these concepts correlate with one another.

In this quantitative study, I used archival de-identified secondary data on youth admissions from the TJJD to investigate disproportionate minority contact. The research sample included data from trauma exposure screenings related to ACEs, administered to both minority and nonminority youth upon their commitment and admission to the TJJD secure facilities. The DMC data and ACEs trauma exposure assessments were routinely collected by the Texas Juvenile Justice Department. The selected populations were divided into minority and non-minority categories. The minority population primarily included Black youth involved with the Texas juvenile justice system. To ensure comprehensive data representation, Hispanic and Other youth were mentioned among the demographics in Table 2, reflecting the diversity of Texas youth. The nonminority population consisted of White youth who had contact with the Texas juvenile justice system. The analysis of data was conducted using the SPSS software.

Key Findings

In addition to the interpretation of results, I highlight how the data can be translated into actionable recommendations. There were several *key findings* of this research study as follows:

- Significant correlations for Black youth: For Black youth, household-related ACEs, particularly parental incarceration, separation, and household substance abuse, showed strong, statistically significant positive correlations with disparate juvenile justice system involvement. This supported the hypothesis that higher ACE exposure increases the likelihood of DMC for this population.
- Weaker or nonsignificant correlations for White youth*:* For White youth, similar ACE categories were correlated with system involvement, but the strength of these relationships was generally weaker and often not statistically significant. This suggests that ACE exposure alone may not explain DMC patterns for White youth to the same extent as Black youth, suggesting different pathways to system contact.
- Variation in ACEs scores: Mid-to-high-range ACE scores (4–7) were most strongly associated with juvenile justice involvement for Black youth, while these associations were less pronounced for White youth.
- Systemic and structural patterns: The findings highlighted the disproportionate impact of structural and family-related trauma on Black youth, indicating that broader systemic factors contribute to higher DMC rates.

These key findings demonstrated that trauma is experienced and reported differently across racial groups, with system-related ACEs—such as parental incarceration and separation—being especially prevalent among Black youth. These patterns must be viewed through the lens of systemic inequity, intergenerational trauma, and overlooked policy gaps (Elkins et al., 2019). This chapter aims to translate the findings into actionable insights for policymakers, practitioners, and researchers. It further connects these findings to existing literature, discusses their implications for trauma-informed juvenile justice practices, and offers recommendations for more culturally responsive approaches.

Interpretation of the Findings

The results of this study offer important insights into the relationship between ACEs and DMC within the TJJD, and demonstrate how these patterns confirm, extend, and challenge existing literature. Correlational analyses indicated that household factors, such as substance abuse, parental separation, and incarceration, showed significant positive relationships with juvenile justice involvement for both Black and White youth, though these patterns were more pronounced among Black youth. These findings align with prior research that institutional and systemic traumas disproportionately affect youth of color (León & Gómez Cervantes, 2023). The strength of these correlations suggests that addressing trauma in justice-involved youth requires acknowledging broader contexts of structural racism and intergenerational disadvantage (Justice Policy Institute, 2023).

These findings also reflect arguments by Goshe (2019) and Rampersaud (2022) that race functions as an underlying risk factor, exposing minority youth to systemic biases from initial police contact through deeper stages of court involvement. Scholars such as Lacey (2013) and Jiwani (2019) emphasize that these disparities are rooted in a long history of racial discrimination and segregation—a legacy that continues to shape the overrepresentation of minority youth at every stage of system contact. The results of this study provide current, practical support for these arguments, illustrating how system-level ACEs, such as parental incarceration, remain deeply entwined with structural inequities.

Consistent with previous research by the Justice Policy Institute (2023) and the TJJD (2025), this study found that mid-to-high ACE scores (2–7) were more prevalent and strongly correlated with justice involvement among Black youth. This supports frameworks that advocate culturally informed, trauma-responsive interventions that acknowledge racialized patterns of adversity (Tufford & Dylan, 2025). Interestingly, some ACEs categories, like household mental illness, showed weaker or inverse relationships, particularly for Black youth, which could reflect underreporting or underdiagnosis in Black communities—a disparity that has been noted by the SAMHSA (2021). Black communities with any mental illness (AMI) are less likely to receive mental health services compared to their White counterparts, with 39.4% of Black communities accessing care, compared to 52.4% of White communities (SAMHSA, 2021). Among adults with AMI, the use of prescription mental health medications is

lower among Blacks (23.7%) compared to Whites (47.2%), indicating potential disparities in treatment access or utilization (SAMHSA, 2021).

These findings extend knowledge in the field by demonstrating that ACEs are not equally distributed across racial groups and that their effects vary according to broader social and structural conditions. While White youth in this study showed some similar associations with ACEs, the trends were less pronounced and tended to reflect family or individual factors rather than institutional or systemic trauma. This echoes the argument by Ginwright (2018) that healing-centered and racially conscious frameworks are needed to address how systems compound trauma for youth of color.

The results of this study confirm prior literature highlighting the disproportionate impact of ACEs on minority youth (Justice Policy Institute, 2023; León & Gómez Cervantes, 2023) and extend it by demonstrating how these patterns manifest in contemporary Texas juvenile justice data. They also challenge the adequacy of universal ACE-based assessments that do not account for racialized, systemic sources of strain (Elkins et al., 2019).

These findings are well-grounded in the GST, which helps to explain why the observed racial disparities may persist, showing that ACEs and trauma (stressors) contribute to negative emotional states (e.g., depression, anxiety), which in turn may lead to delinquent or substance use behaviors, paralleling the ACEs-to-DMC. According to Agnew and Moon (2018) and Kaufman et al. (2008), GST suggests that certain groups are disproportionately exposed to overlapping and chronic strains—such as parental rejection, abuse, and systemic injustice—which increase the likelihood of delinquent

outcomes. The findings of Steele and Durkin (2024) aligned with the core tenets of GST, suggesting that adverse experiences—similar to ACEs—can generate emotional distress that increases the likelihood of risky or delinquent behaviors, a pattern highly relevant to understanding pathways into juvenile justice involvement among minority youth. The significant correlations observed between household substance abuse, parental separation, and incarceration with juvenile justice contact among Black youth strongly illustrate the GST mechanism: that these compounded strains generate negative emotions that can manifest in behaviors leading to system involvement.

The patterns revealed in this study support Fontaine's (2019) assertion that GST remains one of the leading criminological theories for explaining how systemic conditions, including structural racism and intergenerational disadvantage, act as powerful sources of strain. As Merton (1938) and Agnew (1992) emphasized, strains arise when youth are unable to achieve valued goals or when they lose protective support, such as stable family structures, a pattern reflected in this study's data. By situating these results within GST, this study confirms that interventions should move beyond individual-level responses to delinquency and instead target the structural conditions that produce strain in the first place. This aligns with calls for more trauma-responsive, culturally informed, and healing-centered approaches that address root causes, not just symptoms, of DMC (Ginwright, 2018). These interpretations are consistent with the study's data: while the correlational design identifies associations rather than indicating causation, the observed relationships align with GST's propositions and suggest its

relevance for examining the interaction between race, trauma, and system contact among minority youth.

In their entirety, these findings confirm and extend previous knowledge that ACEs, especially household substance abuse, parental separation, and parental incarceration, are significant predictors of system involvement for Black youth. They support the core assumptions of GST, showing how multiple sources of strain interact with structural racism to heighten risk for DMC. By highlighting the stronger relationships for minority youth compared to White youth, this study reinforces calls for culturally responsive, trauma-informed practices that address not only individual trauma but also the systemic conditions that sustain inequity. These interpretations remain consistent with the study's data, acknowledging that while correlational analyses cannot establish causality, they reveal meaningful associations that can inform future research and practice.

While these interpretations offer meaningful insights into the connections between ACEs, race, and juvenile justice contact, it is important to acknowledge the constraints that may have influenced the scope and validity of these results. The following section outlines the study's limitations to provide transparency and context for understanding how these factors may affect the generalizability and reliability of the findings.

Limitations of the Study

Limitations represent inherent challenges and constraints that may affect the generalizability, validity, reliability, and trustworthiness of research findings (Akanle et

al., 2020). The primary limitation of this quantitative study was its reliance on secondary, aggregated data obtained from the TJJD. Although the data were routinely collected during youth admissions, including ACEs trauma screenings and measures of DMC, the researcher had no control over the original data collection procedures or their accuracy.

Using secondary, aggregated data limits the ability to verify data completeness and consistency to ensure uniform measurement across reporting periods. Variations in data collection standards and possible missing values could have introduced bias or errors. Despite a thorough screening of records, existing data limited the researcher's control over measurement accuracy.

Furthermore, the aggregate nature of the data restricted the potential for more sophisticated individual-level analyses, such as logistic regression or moderation models, which could have controlled for multiple variables simultaneously and explored interactions among them (Creswell & Creswell, 2018). The absence of individual-level data also prevented examination of intersecting identities that include variables such as gender, age, and socioeconomic status, which may mediate the relationship between trauma exposure and juvenile justice involvement (Creswell & Creswell, 2018). As a result, the findings reflect associations at a broader level but may overlook more nuanced individual differences.

The narrow timeframe—5 fiscal years (2020–2024)—further limited the generalizability. This period may not be sufficient to identify stable, long-term trends, especially given that short-term contextual factors such as policy changes, economic shifts, or the COVID-19 pandemic may have influenced both ACEs prevalence and

juvenile justice admissions. Furthermore, the cross-sectional and correlational design does not allow for conclusions regarding causality. While significant correlations were observed between ACEs and DMC, these relationships should not be interpreted as causal because unmeasured factors—such as local policing practices, community-level structural inequalities, or family dynamics—could contribute to the observed disparities. Certain ACEs categories, such as household mental illness, showed weaker or inverse correlations, particularly for Black youth. This may reflect underreporting, stigma, or disparities in mental health diagnosis and treatment access within Black communities (SAMHSA, 2021), thereby affecting the trustworthiness of these specific data points.

Finally, the traditional ACEs framework used in this study may not fully capture race-specific or culturally relevant adversities such as racial profiling, neighborhood violence, or school policing through SROs, as highlighted in Chapter 1, that disproportionately impact minority youth and contribute to DMC (Elkins et al., 2019). When SROs handle minor incidents, those actions add to the research data that suggest stricter school discipline practices and DMC for minority youths, which were relatively more prevalent in urban areas (Marchbanks et al., 2018). The absence of these structural and systemic factors suggests that the ACE categories employed may underrepresent the full scope of adversity faced by Black youth.

Considered together, these limitations highlight the need for future research that incorporates larger, individual-level, longitudinal, and mixed-methods designs. Studies that expand trauma frameworks to include culturally and contextually relevant factors, and that control intersecting identities and systemic conditions (Creswell & Creswell,

2018), can enhance the generalizability, validity, and reliability of findings and deepen understanding of how ACEs, race, and systemic inequities intersect in juvenile justice involvement. While these limitations highlight important considerations regarding the scope, validity, and generalizability of this study's findings, they also point to actionable steps that practitioners, policymakers, and researchers can take to address gaps and advance more equitable outcomes. The following recommendations are offered to strengthen trauma-informed juvenile justice practices and guide future research that builds on these insights.

Recommendations

Based on the findings of this study, several actionable recommendations are proposed to improve trauma-informed practices, promote racial equity, and guide future research within the juvenile justice system.

The first recommendation proposed is to *expand ACEs screening tools to address structural and racialized trauma.* Juvenile justice systems should revise ACEs assessments to include indicators of structural and race-specific adversities, such as racial profiling, neighborhood disinvestment, and family disruption related to immigration enforcement or policing practices (Heard-Garris et al., 2018). Although the existing ACEs frameworks are helpful, their applicability often represents a white, normative model that can be blind to the hallmarks of adversity among minority populations (Heard-Garris et al., 2018). Incorporating these contextual factors can improve the identification of at-risk youth and ensure that interventions are responsive to the lived realities of minority youth.

The second recommendation proposed is *to provide culturally responsive and race-conscious training for juvenile justice professionals.* All professionals involved in the juvenile justice system, including intake officers, probation staff, caseworkers, and judges, should receive training in trauma-informed care that is explicitly culturally relevant and race-conscious. Research shows that implicit biases and structural racism can shape placement and detention decisions, potentially increasing system contact for youth of color (León & Gómez Cervantes, 2023). Training should include modules on data literacy, the historical roots of racial trauma, and strategies for promoting racial equity in decision-making processes.

The third recommendation proposed is *to partner with culturally competent, community-based organizations.* Juvenile justice agencies should expand partnerships with community-based organizations that possess cultural competence and deep connections to the communities they serve. Such collaborations can ensure that interventions are tailored to the cultural and social contexts of justice-involved youth. Community partners can also help bridge trust gaps and provide wraparound services that address the root causes of trauma and system involvement.

The final recommendation proposed is *to conduct longitudinal and mixed-methods research to deepen the understanding of racialized trauma.* Future research should go beyond cross-sectional or purely quantitative analyses by integrating longitudinal and mixed methods designs. This approach can capture how trauma and race intersect over time and reveal the processes through which trauma impacts justice involvement and long-term outcomes. As Creswell and Creswell (2018) emphasize,

incorporating youth and family narratives can uncover overlooked dimensions of trauma and resilience, resulting in more comprehensive and equitable interventions. Combining quantitative data with qualitative stories not only enhances validity but also ensures that youth and families help shape the reforms that directly impact them.

These recommendations underscore the need to move beyond universal, one-size-fits-all models of trauma-informed care. Instead, they call for a trauma-responsive, culturally adaptive, and racially equitable juvenile justice system that recognizes the systemic and structural roots of adversity and prioritizes healing and community-driven solutions. These recommendations can help bridge the gap between research and practice, addressing the systemic and structural issues highlighted in this study. Grounded in GST, these recommendations acknowledge that the strains and adversities experienced by justice-involved youth, particularly minority Black youth, are not solely individual but are shaped by broader social and institutional factors. The following implications section examines how these insights can inform juvenile justice policies, trauma-responsive interventions, and future research aimed at dismantling structural inequities and promoting long-term positive outcomes for marginalized youth.

Implications

The findings of this study have significant implications for positive social change at multiple levels. At the *individual level*, recognizing the unique trauma experiences of minority youth, particularly Black youth, can improve their access to culturally responsive trauma-informed care, promoting healing and reducing recidivism (Ginwright, 2018; Wachtel, 2019). At the *family level*, addressing systemic adversities may strengthen

family stability and resilience, supporting better youth outcomes (León & Gómez Cervantes, 2023). At the *organizational level*, juvenile justice agencies adopting policies and training to reduce racial bias and promote equity can foster a more just and supportive environment for youth (Heard-Garris et al., 2018). Finally, at the *societal and policy level*, the study underscores the urgent need to revise juvenile justice practices and ACEs screening tools to include structural and racial trauma factors, which can drive broader systemic reforms and more equitable treatment of youth across racial groups (Elkins et al., 2019; Heard-Garris et al., 2018). All these implications remain grounded in the scope of this study, which analyzed trauma exposure and DMC among youth involved with the TJJD over 5 fiscal years. The implications do not extend beyond the data but emphasize the critical need for trauma-responsive and race-conscious practices informed by these findings.

The methodological implication of this study is that the reliance on secondary, aggregate data highlights the need for future research using individual-level intersectional data that includes variables such as gender, age, and socioeconomic status to best understand mediating factors (Creswell & Creswell, 2018). Employing longitudinal and mixed-methods designs will better capture the evolving relationship between trauma and juvenile justice involvement, providing richer, more nuanced insights (Creswell & Creswell, 2018).

The theoretical implications of this research support the integration of the study's selected GST (Agnew & Moon, 2018; Kaufman et al., 2008), as well as a supporting theory, Bronfenbrenner's EST (Lansford et al., 2017) as a comprehensive framework to

understand how systemic strains and environmental contexts influence youth justice involvement. The findings reinforce that trauma and justice system contact among minority youth must be understood as outcomes of complex interactions between individual experiences and broader structural forces.

The empirical implications of this study challenge the adequacy of traditional ACEs frameworks by demonstrating the need to incorporate structural and racial trauma indicators to better capture adversity experienced by minority youth (Elkins et al., 2019; Heard-Garris et al., 2018). This calls for refinement of trauma assessment tools to enhance their cultural relevance and accuracy within juvenile justice settings.

The implications for practice, while detailed recommendations were provided in the previous section, these findings suggest that juvenile justice practitioners and policymakers should consider integrating culturally responsive, trauma-informed, and equity-focused approaches into assessments and interventions. Training programs should address systemic and racialized trauma to reduce bias and improve outcomes for marginalized youth (Ginwright, 2018; León & Gómez Cervantes, 2023).

These implications stress the ethical responsibility of stakeholders advocating for systemic reforms that dismantle structural barriers contributing to trauma. By aligning trauma-informed care with anti-racist principles and community empowerment, the juvenile justice system can better serve all youth, especially those most marginalized by historical and present-day inequities. Despite decades of reform, institutional racism continues to be embedded within the policies and discretionary decisions of the juvenile justice system, contributing to how minority youth are disproportionately policed,

detained, and adjudicated (León & Gómez Cervantes, 2023; Rampersaud, 2022). This study, therefore, contributes methodological, theoretical, and practical guidance for moving from a system that simply recognizes trauma to one that actively works to dismantle its root causes and promote community resilience. To close this chapter, the final section provides an integrative conclusion that synthesizes the study's major findings, discusses their broader relevance for research and practice, and offers final reflections on how this work contributes to ongoing efforts to create a more just and trauma-responsive system for all youth.

Conclusion

This study highlights the disproportionate impact of trauma—measured through ACEs—on both Black and White youth within the TJJD. While both groups experienced significant adversity, this research shows that the pathways leading to system involvement are shaped not only by individual or family factors but by deeply rooted racial and structural inequities. The correlational findings demonstrate that household factors such as parental incarceration, separation, and substance abuse have strong, significant relationships with juvenile justice contact—especially for Black youth—highlighting how institutional and systemic traumas compound risk (León & Gómez Cervantes, 2023).

Importantly, the data from the TJJD revealed that mid-range ACEs scores were more prevalent and more strongly correlated with justice involvement for Black youth compared to White youth. This finding supports what prior research has long suggested: that youth of color face unique, compounded adversities often overlooked in traditional

ACE frameworks (Heard-Garris et al., 2018; Wachtel, 2019). Without acknowledging these systemic differences, the juvenile justice system risks misdiagnosing the root causes of behaviors and perpetuating cycles of disproportionate minority contact and incarceration. To close this gap, trauma-informed care within the TJJD and similar systems must evolve into trauma-responsive, culturally adaptive, and explicitly race-conscious practices (Ginwright, 2018). It is no longer sufficient to measure adversity through a universal lens. ACEs must be contextualized alongside race-related adversities—like racial profiling, neighborhood disinvestment, and historical marginalization—that significantly shape youth outcomes in Texas and beyond.

At the organizational and policy levels, these findings underscore the urgent need for the TJJD to integrate structural trauma indicators into its ACEs screenings, expand culturally responsive training for all justice professionals, and build partnerships with community-based organizations that can deliver healing-centered, culturally relevant care. By doing so, the TJJD has the potential to become a leader in dismantling structural barriers and advancing racial equity within the juvenile justice system.

Theoretically, this research aligns with GST, which suggests that youth—particularly Black youth—experience unique strains rooted in systemic injustice and intergenerational disadvantage (Agnew & Moon, 2018; Fontaine, 2019). Methodologically, it highlights the importance of integrating longitudinal and mixed methods approaches to better capture how trauma and race interact over time. Analytically, it adds to the growing evidence that universal trauma models must be adapted to reflect the lived experiences of marginalized youth.

Ultimately, the findings of this study convey a clear message: the TJJD—and the broader juvenile justice system—must move beyond generic trauma models and adopt frameworks that actively confront and dismantle the structural roots of trauma. It is only by doing so that we can build a more equitable, healing-centered system that does not harm young people because of who they are or where they come from. This study provides a foundation for continued research and advocacy toward a system that embraces equity, responsiveness, and transformative social change. It serves as a call to action for policymakers, practitioners, educators, and community leaders alike. By bridging the gap between data and equity, the TJJD can help lead the way toward a system that recognizes, addresses, and heals trauma at its roots, creating real pathways for positive social change, resilience, and justice for all youth in Texas and beyond.

References

ACE Response. (2024). *ACEs questionnaire*. https://www.aceresponse.org/who_we_are/ACE-Study_43_pg.htm

Agnew, R. (1992). Foundation for a general strain theory of crime and delinquency. *Criminology*, *30*(1), 47–88. https://doi.org/10.1111/j.1745-9125.1992.tb01093.x

Agnew, R. (2006). *Pressured into crime: An overview of general strain theory*. Roxbury.

Agnew, R., & Moon, B. (2018). Strain theory and violent behavior. In A. T. Vazsonyi, D. Flannery, & M. DeLisi (Eds.), *The Cambridge Handbook of Violent Behavior and Aggression* (Cambridge Handbooks in Psychology, pp. 453–466). Cambridge University Press. https://doi.org/10.1017/9781316847992.026

Akanle, O., Ademuson, A. O., & Shittu, O. S. (2020). Scope and limitation of study in social research. In A. S. Jegede & U. C. Isiugo-Abanthe (Eds.), *Contemporary Issues in Social Research* (pp. 105-114). Ibadan University Press.

Altakhayneh, S. K. (2023). Impact of stress-induced life events on mental well-being and delinquency: The mediating influence of substance use among Jordanian university students. *Journal of Pedagogical Research, 7*(4), 323-338. https://doi.org/10.33902/JPR.202322839

American Psychological Association. (2020). *Publication manual of the American Psychological Association* (7th ed.). Author.

Anda, R. F., Felitti, V. J., Bremner, J. D., Walker, J. D., Whitfield, C., Perry, B. D., Dube, S. R., & Giles, W. H. (2006). The enduring effects of abuse and related adverse experiences in childhood: A convergence of evidence from neurobiology

and epidemiology. *European Archives of Psychiatry and Clinical Neuroscience*, *256*(3), 174–186. https://doi.org/10.1007/s00406-005-0624-4

Arya, N. (2018). *Getting to zero: A 50-state study of strategies to remove youth from adult jails*. Justice Center: The Council of State Governments. https://drive.google.com/file/d/1LLSF8uBlrcqDaFW3ZKo_k3xpk_DTmItV/view

Baglivio, M. T., Epps, N., Swartz, K., Huq, M. S., Sheer, A., & Hardt, N. S. (2014). The prevalence of adverse childhood experiences (ACE) in the lives of juvenile offenders. *Journal of Juvenile Justice, 3*(2), 1–23. https://www.researchgate.net/publication/284889607_The_prevalence_of_Adverse_Childhood_Experiences_ACE_in_the_lives_of_juvenile_offenders

Baglivio, M. T., Wolff, K. T., Piquero, A. R., & Epps, N. (2020). The relationship between adverse childhood experiences (ACEs) and juvenile offending trajectories in a juvenile justice context: The moderating role of education. *Youth Violence and Juvenile Justice*, *18*(2), 203–225. https://doi.org/10.1177/0306624X15613992

Barajas-Gonzalez, R. G., Ayón, C., Brabeck, K., Rojas-Flores, L., & Valdez, C. R. (2021). An ecological expansion of the adverse childhood experiences (ACEs) framework to include threat and deprivation associated with U.S. immigration policies and enforcement practices: An examination of the Latinx immigrant experience. *Social Science & Medicine, 282*, Article 114126. https://doi.org/10.1016/j.socscimed.2021.114126

Better, S. (2008). *Institutional racism: A primer on theory and strategies for social*

change. Rowman & Littlefield.

Bronfenbrenner, U. (1979). *The ecology of human development: Experiments by nature and design*. Harvard University Press.

Carmichael, D., Booth, E., & Patnaik, A. (2010). *Addressing disproportionate minority contact in the Texas juvenile justice system: Causes and solutions from the community perspective* (Report to the Office of the Governor, Criminal Justice Division, prepared by the Public Policy Research Institute, Texas A&M University). Retrieved from https://ashweetapatnaik.com/Assets/Reports/2010%2007%20-%20Addressing%20Disproprtionate%20Minority%20Contact%20in%20the%20Texas%20Juvenile%20Justice%20System%20-%20Causes%20and%20Solutions%20from%20the%20Community%20Perspective.pdf

Centers for Disease Control and Prevention. (2023). *About the CDC-Kaiser ACE study*. https://www.cdc.gov/violenceprevention/aces/about.html

Chapple, C. L., Pierce, H., & Jones, M. S. (2021). Gender, adverse childhood experiences, and the development of self-control. *Journal of Criminal Justice, 74*, Article 101811. https://doi.org/10.1016/j.jcrimjus.2021.101811

Claus, C., Elkington, K. S., Dierkhising, C. B., & Teplin, L. A. (2018). Mental health needs of youth in the juvenile justice system: A survey of judicial perspectives. *Journal of Juvenile Justice, 7*(1), 1–18.

Claus, R.E., Vidal, S. & Harmon, M. (2018). Racial and ethnic disparities in the police

handling of juvenile arrest. *Crime and Delinquency, 64*(11), 1375-1393. https://doi.org/10.1177/0011128717741615

Cohen, J. (1988). *Statistical power analysis for the behavioral sciences* (2nd ed.). Routledge.

Community Connections for Youth. (2014). *South Bronx Community Connections: An innovative approach to diverting youth from juvenile justice involvement using a positive youth development framework built on the strengths of grassroots faith and neighborhood organizations*. Community Connections for Youth. https://nycourts.gov/ip/justiceforchildren/PDF/RestorativePracticeConf/J2-Austria-CCFY-SBCC-Companion_Guide.pdf

Connolly, E. J., & Kavish, N. (2019). The causal relationship between childhood adversity and developmental trajectories of delinquency: A consideration of genetic and environmental confounds. *Journal of Youth and Adolescence, 48*(2), 199-211. https://doi.org/10.1007/s10964-018-0960-0

Craig, J. M., Trulson, C. R., DeLisi, M., & Caudill, J. W. (2020). Toward an understanding of the impact of adverse childhood experiences on the recidivism of serious juvenile offenders. *American Journal of Criminal Justice45*(6), 1024-1039. https://doi.org/10.1007/s12103-020-09524-6

Creswell, J. W., & Creswell, J. D. (2018). *Research design: Qualitative, quantitative, and mixed methods approaches* (5th ed.). SAGE Publications.

Dawson-Edwards, C., Tewkbury, R., & Nelson, N. (2020). The causes and pervasiveness of DMC: Stakeholder perceptions of disproportionate minority contact in the

juvenile justice system. *Race and Justice, 10*(2), 223-242. https://doi.org/10.1177/2153368717735365

DeLisi, M., Alcala, J., Kusow, A., Hochstetler, A., Heirigs, M. H., Caudill, J. W., Trulson, C. R., & Baglivio, M. T. (2017). Adverse childhood experiences, commitment offense, and race/ethnicity: Are the effects crime-, race-, and ethnicity-specific? *International Journal of Environmental Research and Public Health, 14*(3), 331. https://doi.org/10.3390/ijerph14030331

Development Services Group, Inc. (2015). *Risk and needs assessment for youths: Literature review*. Office of Juvenile Justice and Delinquency Prevention. https://www.ojjdp.ojp.gov/model-programs-guide/literature-reviews/risk_needs_assessments_for_youths.pdf

Dierkhising, C. B., Ko, S. J., Woods-Jaeger, B., Briggs, E. C., Lee, R., & Pynoos, R. S. (2013). Trauma histories among justice-involved youth: Findings from the National Child Traumatic Stress Network. *European Journal of Psychotraumatology*, *4*(1). https://doi.org/10.3402/ejpt.v4i0.20274

Dodds, K. (2020, July). Why all states should embrace Vermont's Raise the Age Initiative. Coalition for Juvenile Justice. https://juvjustice.org/blog/why-all-states-should-embrace-vermonts-raise-the-age-initiative/

Dollar, C. B. (2014, July). Racial threat theory: Assessing the evidence, requesting redesign. *Journal of Criminology*, Article 983026. https://doi.org/10.1155/2014/983026

Dube, S. R., Anda, R. F., Felitti, V. J., Chapman, D. P., Williamson, D. F., & Giles, W.

H. (2001). Childhood abuse, household dysfunction, and the risk of attempted suicide throughout the life span: Findings from the Adverse Childhood Experiences Study. *JAMA*, *286*(24), 3089–3096. https://doi.org/10.1001/jama.286.24.3089

Duke, N. N., Pettingell, S. L., McMorris, B. J., & Borowsky, I. W. (2010). Adolescent violence perpetration: Associations with multiple types of adverse childhood experiences. *Pediatrics, 125*(4), e778–e786. https://doi.org/10.1542/peds.2009-0597

Elkins, J., Briggs, H. E., Miller, K. M., Kim, I., Orellana, R., & Mowbray, O. (2019). Racial/ethnic differences in the impact of adverse childhood experiences on posttraumatic stress disorder in a nationally representative sample of adolescents. *Child and Adolescent Social Work Journal, 36*(5), 449–457. https://doi.org/10.1007/s10560-018-0585-x

Every Texan. (2024). *2024 Texas Kids Count Data Book: Putting kids first for a brighter future for all.* Annie E. Casey Foundation. https://everytexan.org/wp-content/uploads/2023/08/KidsCount2024-final-digi-01132025.pdf

Fang, L., Chuang, D. M., & Lee, Y. (2016). Adverse childhood experiences, gender, and HIV risk behaviors: Results from a population-based sample. *Preventive Medicine Reports, 4,* 113–120. https://doi.org/10.1016/j.pmedr.2016.05.019

Farrell, C., & Zimmerman, G. M. (2017). Does offending intensify as exposure to violence aggregates? Reconsidering the effects of repeat victimization, types of exposure to violence, and poly-victimization on property crime, violent offending,

and substance use. *Journal of Criminal Justice, 53,* 25–33. https://doi.org/10.1016/j.jcrimjus.2017.09.004

Faul, F., Erdfelder, E., Buchner, A., & Lang, A.-G. (2009). Statistical power analyses using G*Power 3.1: Tests for correlation and regression analyses. *Behavior Research Methods, 41*(4), 1149–1160. https://doi.org/10.3758/BRM.41.4.1149

Feinstein, R. (2015). A qualitative analysis of police interactions and disproportionate minority contact. *Journal of Ethnicity in Criminal Justice, 13*(2), 159–178. https://doi.org/10.1080/15377938.2014.936645

Felitti, V. J., Anda, R. F., Nordenberg, D., Williamson, D. F., Spitz, A. M., Edwards, V., Koss, M. P., & Marks, J. S. (1998). Relationship of childhood abuse and household dysfunction to many of the leading causes of death in adults: The Adverse Childhood Experiences (ACE) Study. *American Journal of Preventive Medicine, 14*(4), 245–258. https://doi.org/10.1016/s0749-3797(98)00017-8

Field, A. P. (2018). *Discovering statistics using IBM SPSS Statistics* (5th ed.). Sage Publications.

Finlay, J., Scully, B., Eaton-Kent, M., Farrell, T.-R., Dicks, P., & Salerno, J. (2019). *Cross-Over Youth Project: Navigating quicksand*. Cross-Over Youth Project. https://youthrex.com/report/cross-over-youth-project-navigating-quicksand

Folk, J. B., Kemp, K., Yurasek, A., Barr-Walker, J., & Tolou-Shams, M. (2021). Adverse childhood experiences among justice-involved youth: Data-driven recommendations for action using the sequential intercept model. *American Psychologist, 76*(2), 268–283. https://doi.org/10.1037/amp0000769

Fontaine, A. L. C. (2019). Integrating general strain theory and the gender role strain paradigm: Initial considerations. *Journal of Theoretical & Philosophical Criminology, 11*(3), 159–186. https://www.proquest.com/scholarly-journals/integrating-general-strain-theory-gender-role/docview/2350468844/se-2

Ford, J. D., Chapman, J., Hawke, J., & Albert, D. (2007). *Trauma among youth in the juvenile justice system: Critical issues and new directions*. National Center for Mental Health and Juvenile Justice. https://courts.ca.gov/sites/default/files/courts/default/2024-12/btb25-1g-02.pdf

Ford, J. D., Elhai, J. D., Connor, D. F., & Frueh, B. C. (2010). Poly-victimization and risk of posttraumatic, depressive, and substance use disorders and involvement in delinquency in a national sample of adolescents. *Journal of Adolescent Health, 46*(6), 545–552. https://doi.org/10.1016/j.jadohealth.2009.11.212

Frankfort-Nachmias, C., Nachmias, D., & DeWaard, J. (2015). *Research methods in the social sciences* (8th ed.). Worth.

Fritz, C. O., Morris, P. E., & Richler, J. J. (2012). Effect size estimates: Current use, calculations, and interpretation. *Journal of Experimental Psychology: General, 141*(1), 2–18. https://doi.org/10.1037/a0024338

Gann, S. M. (2018). Examining the relationship between race and juvenile court decision making: A counterfactual approach. *Youth Violence and Juvenile Justice, 17*(3), 269–287. https://sci-hub.se/10.1177/1541204018806976

Garza, O., Green, D., Grubbs, S., & Halbrook, S. (2020, February). *Young Texans: Demographic overview* (Part 1 of a two-part series). *Fiscal Notes*. Texas

Comptroller of Public Accounts. https://comptroller.texas.gov/economy/fiscal-notes/archive/2020/feb/texans.php

Georgiev, G. Z. [Sample Size Calculator]. Giga Calculator. https://www.gigacalculator.com/calculators/power-sample-size-calculator.php

Gillis, A. J., & Bath, E. (2016). Demographics. *Child and Adolescent Psychiatric Clinics of North America, 25*(1), 1–17. https://doi.org/10.1016/j.chc.2015.08.001

Ginwright, S. (2018). The future of healing: Shifting from trauma-informed care to healing-centered engagement. Medium. https://grandparents.com.au/wp-content/uploads/2018/08/OP-Ginwright-S-2018-Future-of-healing-care.pdf

Goshe, S. (2019). How contemporary rehabilitation fails youth and sabotages the American juvenile justice system: A critique and call for change. *Critical Criminology, 27*(4), 559–573. https://doi.org/10.1007/s10612-019-09473-5

Green, S. B., & Salkind, N. J. (2010). *Using SPSS for Windows and Macintosh: Analyzing and understanding data* (6th ed.). Pearson.

Hassan, M. (2024, March 24). Correlational research—Methods, types, and examples. Research Method. https://researchmethod.net/correlational-research/

Heard-Garris, N., Cale, M., Camaj, L., Hamati, M., & Dominguez, T. (2018). Transmitting trauma: A systematic review of vicarious racism and child health. *Social Science & Medicine, 199*, 230–240. https://www.sciencedirect.com/science/article/pii/S0277953617302411

Hill Collins, P. (2019). *Intersectionality as critical social theory*. Duke University Press. https://doi.org/10.1215/9781478007098

Hilotin-Lee, L. T. (2023). History of the juvenile justice system. https://www.findlaw.com/criminal/juvenile-justice/development-of-the-juvenile-justice-system.html

Hirschfield, P. J. (2018). The role of schools in sustaining juvenile justice system inequality. *The Future of Children, 28*(1), 11–35. https://www.proquest.com/scholarly-journals/role-schools-sustaining-juvenile-justice-system/docview/2434475920/se-2

Hockenberry, S., & Puzzanchera, C. (2020). *Juvenile court statistics 2018*. National Center for Juvenile Justice. https://www.ojjdp.gov/ojstatbb/njcda/pdf/jcs2018.pdf

Hockenberry, S., & Puzzanchera, C. (2021, June). *Juvenile court statistics 2019* (Report). National Center for Juvenile Justice. https://www.ojjdp.gov/ojstatbb/njcda/pdf/jcs2019.pdf

Hockenberry, S. (2021). *Delinquency cases waived to criminal court 2018*. National Center for Juvenile Justice. https://ojjdp.ojp.gov/publications/delinquency-cases-waived-2018.pdf

Hockenberry, S., & Puzzanchera, C. (2024, January). *Juvenile court statistics 2021*. National Center for Juvenile Justice. https://www.ncjj.org/pdf/jcsreports/jcs2021_508Final.pdf

Jackson, D. B., Jones, M. S., Semenza, D. C., & Testa, A. (2023). Adverse childhood experiences and adolescent delinquency: A theoretically informed investigation of mediators during middle childhood. *International Journal of Environmental Research and Public Health, 20*(4), 3202. https://doi.org/10.3390/ijerph20043202

Jiwani, Y. (2019). The criminalization of race, the racialization of crime. In W. Chan & K. Mirchandani (Eds.), *Crimes of colour. Racialization and the criminal justice system in Canada* (pp. 67–86). Broadview Press, Ltd.

Joseph, E. D. (2023). *A trauma-informed model of care in Texas juvenile justice facilities: Evaluation and implications* (Publication No. 30426531) [Doctoral dissertation, Texas Christian University]. ProQuest Dissertations & Theses Global. https://www.proquest.com/dissertations-theses/trauma-informed-model-care-texas-juvenile-justice/docview/2810789412/se-2

Justice Policy Institute. (2017). *Raising the age: Shifting to a safer and more effective juvenile justice system*. https://justicepolicy.org/wp-content/uploads/2021/06/raisetheage.fullreport.pdf

Justice Policy Institute. (2023, October). *Don't abandon us: Addressing youth, crime, and trauma*. https://justicepolicy.org/wp-content/uploads/2023/09/Dont-Abandon-Us_Brief.pdf

Juvenile Justice 2020 Year-End Report. (2021, February). National Conference of State Legislatures. https://www.ncsl.org/civil-and-criminal-justice/juvenile-justice-2020-year-end-report

Kaufman, J. M., Rebellon, C. J., Thaxton, S., & Agnew, R. (2008). A general strain theory of racial differences in criminal offending. *The Australian and New Zealand Journal of Criminology, 41*(3), 421–437. https://doi.org/10.1375/acri.41.3.421

Kennedy-Lewis, B. L., & Murphy, A. S. (2016). Listening to "frequent flyers": What

persistently disciplined students have to say about being labeled as "bad." *Teachers College Record, 118*(1), 1–40. https://doi.org/10.1177/016146811611800106

Konold, T., Cornell, D., Shukla, K., & Huang, F. (2017). Racial/ethnic differences in perceptions of school climate and its association with student engagement and peer aggression. *Journal of Youth and Adolescence, 46*(6), 1289–1303. https://doi.org/10.1007/s10964-016-0576-1

Lacey, C. (2013). Racial disparities and the juvenile justice system: A legacy of trauma. National Center for Child Traumatic Stress. https://www.nctsn.org/sites/default/files/resources/racial_disparities_and_juvenile_justice_system_legacy_of_trauma.pdf

Laerd Statistics. (2018). Non-probability sampling. https://dissertation.laerd.com/non-probability-sampling.php

Lansford, J. E., Dodge, K. A., Pettit, G. S., & Bates, J. E. (2017). A public health perspective on school dropout and juvenile justice involvement. *Adolescent Research Review, 2*(1), 1–14. https://doi.org/10.1016/j.jadohealth.2016.01.014

Laureate Education. (Producer). (2010c). Overview of quantitative research methods. Baltimore, MD: Author.

Leiber, M., Bishop, D., & Chamlin, M. B. (2011). Juvenile justice decision-making before and after the implementation of the disproportionate minority contact (DMC) mandate. *Justice Quarterly, 28*(3), 460–492. https://doi.org/10.1080/07418825.2010.516005

Leiber, M. J., & Fix, R. (2019). Reflections on the impact of race and ethnicity on juvenile court outcomes and efforts to enact change. *American Journal of Criminal Justice, 44*(4), 581–608. https://doi.org/10.1007/s12103-019-09479-3

León, K. S., & Gómez Cervantes, A. (2023). Techno-bureaucratic race-making: Latino (mis) representation in criminology and criminal justice knowledge claims. *Journal of Criminal Justice Education, 34*(3), 376–399. https://doi.org/10.1080/10511253.2022.2155204

Listwan, S. J. (2013). *Introduction to juvenile justice*. Bridgepoint Education, Inc.

Litten, K. (2016, April 27). Louisiana should raise the age to 18 for prosecution as an adult [Editorial]. *The Times-Picayune Editorial Board*. https://www.nola.com/news/politics/louisiana-should-raise-the-age-to-18-for-prosecution-as-an-adult-editorial/article_e6d73b39-7446-5b5c-9e33-d1c2df816878.html

Lynch, M. (2011). Crack pipes and policing: A case study of institutional racism and remedial action in Cleveland. *Law & Policy, 33*(2), 179–214. https://doi.org/10.1111/j.1467-9930.2010.00334.x

Madoshi, L., Esq. (2019). Mind on lock: The impact of incarceration on Black mental health. *Harvard Journal of African American Public Policy*, 59–65. https://www.proquest.com/scholarly-journals/mind-on-lock-impact-incarceration-black-mental/docview/2316972905/se-2

Majumdar, S. (2017). Decomposing disproportionate minority contact in juvenile justice. *Journal of Ethnicity in Criminal Justice, 15*(2), 99–116.

https://doi.org/10.1080/15377938.2017.1279096

Marchbanks, M. P., Peguero, A. A., Varela, K. S., Blake, J. J., & Eason, J. M. (2018). School strictness and disproportionate minority contact: Investigating racial and ethnic disparities with the "school-to-prison pipeline." *Youth Violence and Juvenile Justice, 16*(2), 241–259. https://doi.org/10.1177/1541204016680403

McCarter, S. A. (2018). Racial disparities in the criminal justice system. In *Encyclopedia of Social Work*. New York, NY: National Association of Social Workers Press and Oxford University Press. https://doi.org/10.1093/acrefore/9780199975839.013.1289

McCarter, S. A. (2019). Intersection of mental health, education, and juvenile justice: The role of mental health providers in reducing the school-to-prison pipeline. *Ethical Human Psychology and Psychiatry, 21*(1), 7–18. https://doi.org/10.1891/1559-4343.21.1.7

McCarter, S., & Durant, T. (2022). Disproportionate minority contact (DMC) to racial and ethnic disparities (RED) in juvenile justice: What does it mean and does it matter? *Journal of Forensic Social Work, 6*(1), 57–76. https://doi.org/10.15763/issn.1936-9298.2022.6.1.57-76

Mendel, R. A. (2022). *Diversion: The hidden key to combating racial and ethnic disparities in juvenile justice*. https://www.sentencingproject.org/reports/diversion-a-hidden-key-to-combating-racial-and-ethnic-disparities-in-juvenile-justice/

Menon, S. E., & McCarter, S. A. (2021). Make juvenile justice more just: Raise-the-age

to 20 years old. *Journal of Policy Practice and Research, 2*(2), 119–139. https://doi.org/10.1007/s42972-021-00030-5

Mersky, J. P., Choi, C., Lee, C. P., & Janczewski, C. E. (2021). Disparities in adverse childhood experiences by race/ethnicity, gender, and economic status: Intersectional analysis of a nationally representative sample. *Child Abuse & Neglect, 117,* Article 105066. https://doi.org/10.1016/j.chiabu.2021.105066

Moon, B., Blurton, D., & McCluskey, J. (2008). General strain theory and delinquency. *Crime & Delinquency, 54*. https://doi.org/10.1177/0011128707301627

Morrison, E. T. (2019). *Tarrant County disproportionate minority contact report 2015–2019*. https://www.tarrantcountytx.gov/content/dam/main/juvenile-services/Documents/DMC_Report_2015-2019.pdf

National Center for Health Statistics. (2021). Vintage 2020 postcensal estimates of the resident population of the United States (April 1, 2010, July 1, 2010–July 1, 2020), by year, county, single-year of age, bridged race, Hispanic origin, and sex. https://www.cdc.gov/nchs/nvss/bridged_race.htm

National Governors Association. (2021, August). *Age boundaries in juvenile justice systems*. https://www.nga.org/wp-content/uploads/2021/08/Raise-the-Age-Brief_5Aug2021.pdf

Noelle, V. (2019). Labeling theory. *Salem Press Encyclopedia*.

Obsuth, I., Mueller Johnson, K., Murray, A. L., Ribeaud, D., & Eisner, M. (2017).

Violent poly-victimization: The longitudinal patterns of physical and emotional victimization throughout adolescence (11–17 years). *Journal of Research on Adolescence*. https://doi.org/10.1111/jora.12365

Office of Juvenile Justice and Delinquency Prevention. (2019). *Distribution of juvenile justice formula grants by state*. https://ojjdp.ojp.gov/distribution-juvenile-justice-formula-grants-state

Office of Juvenile Justice and Delinquency Prevention. (2019, October). *Racial/ethnic disparities (R/ED)*. https://ojjdp.ojp.gov/programs/racial-and-ethnic-disparities

Office of Juvenile Justice and Delinquency Prevention. (2022). *Racial and ethnic disparities*. https://ojjdp.ojp.gov/programs/racial-and-ethnic-disparities

Owens, E. G. (2017). Testing the school-to-prison pipeline. *Journal of Policy Analysis and Management, 36*(1), 11–35. https://doi.org/10.1002/pam.21954

Paige, K. (2022). *Reducing racial disparity of youths referred to the juvenile center* (Order No. 29396725). ProQuest Dissertations & Theses Global. https://www.proquest.com/dissertations-theses/reducing-racial-disparity-youths-referred/docview/2721358018/se-2

Pew Research Center. (2017). Race, immigration, and discrimination. https://www.pewresearch.org/politics/2017/10/05/4-race-immigration-and-discrimination/

Piquero, N., & Sealock, M. (2010). Race, crime, and general strain theory. *Youth Violence and Juvenile Justice, 8*(3), 170–186. https://doi.org/10.1177/1541204009361174

Puzzanchera, C., Hockenberry, S., & Sickmund, M. (2022). *Youth and the juvenile justice system: 2022 national report*. Pittsburgh, PA: National Center for Juvenile Justice. https://nij.ojp.gov/library/publications/youth-and-juvenile-justice-system-2022-national-report

Puzzanchera, C., Sickmund, M., & Sladky, A. (2018). *Youth younger than 18 prosecuted in criminal court: National estimate, 2015 cases*. Pittsburgh, PA: National Center for Juvenile Justice. https://ojjdp.ojp.gov/sites/g/files/xyckuh176/files/media/document/youth-prosecuted-criminal-court-2019-cases.pdf

Rampersaud, M. (2022). Punitive justice: When race and mental illness collide in the early stages of the criminal justice system. *Canadian Journal of Law and Society, 37*(3), 387–408. https://doi.org/10.1017/cls.2022.23

Robinson, K., & Kurlychek, M. (2019). Differences in justice, differences in outcomes: A DID approach to studying outcomes in juvenile and adult court processing. *Justice Evaluation Journal, 2*, 35–49. https://doi.org/10.1080/24751979.2019.1585927

Robles-Ramamurthy, B., & Watson, C. (2019). Examining racial disparities in juvenile justice. *The Journal of the American Academy of Psychiatry and the Law, 47*(1), 48–52. https://jaapl.org/content/early/2019/02/13/JAAPL.003828-19

Rovner, J. (2014). *Disproportionate minority contact in the juvenile justice system*. The Sentencing Project. https://www.sentencingproject.org/app/uploads/2022/10/Disproportionate-

Minority-Contact-in-the-Juvenile-Justice-System.pdf

Rovner, J. (2025, August). Black disparities in youth incarceration: Black youth almost five times as likely to be incarcerated as white peers [Fact sheet]. The Sentencing Project. https://www.sentencingproject.org/fact-sheet/black-disparities-in-youth-incarceration/

Sacks, V., & Murphey, D. (2018). *The prevalence of adverse childhood experiences, nationally, by state, and by race or ethnicity*. Child Trends. https://www.childtrends.org/publications/prevalence-adverse-childhood-experiences-nationally-state-race-ethnicity

Sawilowsky, S. S. (2009). New effect size rules of thumb. *Journal of Modern Applied Statistical Methods, 8*(2), 597–599. https://doi.org/10.22237/jmasm/1257035100

S.B. 234, Gen. Assem. (Vt. 2018). Vermont Statutes. https://legislature.vermont.gov/bill/status/2018/S.234

Schlesinger, T. (2018). Decriminalizing racialized youth through juvenile diversion. *The Future of Children, 28*(2), 59–81. https://doi.org/10.1353/foc.2018.0003

Scully, C., McLaughlin, J., & Fitzgerald, A. (2020). The relationship between adverse childhood experiences, family functioning, and mental health problems among children and adolescents: A systematic review. *Journal of Family Therapy, 42*(2), 291–316. https://doi.org/10.1111/1467-6427.12263

Sharlein, J. (2016). Beyond recidivism: Investigating comparative educational and employment outcomes for adolescents in the juvenile and criminal justice systems. *Crime & Delinquency, 64*(1), 26–52.

https://doi.org/10.1177/0011128716678193

Shin, S. H., McDonald, S. E., & Conley, D. (2018). Profiles of adverse childhood experiences and impulsivity. *Child Abuse & Neglect, 85*, 118–126. https://doi.org/10.1016/j.chiabu.2018.07.028

Skibba, R. (2018, November). Age-based justice system approach overlooks that adolescence extends beyond age 18, scientists say. *Inside Science*. https://www.aip.org/inside-science/age-based-justice-system-approach-overlooks-that-adolescence-extends-beyond-age-18-scientists-say

Slutkin, G. (2017). Reducing violence as the next great public health achievement. *Nature Human Behaviour, 1*(5), 1–6. https://doi.org/10.1038/s41562-016-0025

Sonu, S., Mann, K., Potter, J., Rush, P., & Stillerman, A. (2024). Toward integration of trauma, resilience, and equity theory and practice: A narrative review and call for consilience. *The Permanente Journal, 28*(1), 151. https://doi.org/10.7812/TPP/23.105

Spohn, C., & Cederblom, J. (2006, August). Race and disparities in sentencing: A test of the liberation hypothesis. *Justice Quarterly*, *8*(3), 305–327. https://doi.org/10.1080/07418829100091071

Steele, J. L., & Durkin, K. F. (2024). Beyond urban centers: Investigating general strain theory and opioid use among rural adolescents. *Journal of Criminal Justice, 95*, 102307. https://doi.org/10.1016/j.jcrimjus.2024.102307

Substance Abuse and Mental Health Services Administration. (2021). *Racial/ethnic differences in mental health service use among adults with any mental illness*.

https://www.samhsa.gov/data/sites/default/files/MHServicesUseAmongAdults/MHServicesUseAmongAdults.pdf

Substance Abuse and Mental Health Services Administration. (2024). *Key substance use and mental health indicators in the United States: Results from the 2023 National Survey on Drug Use and Health* (HHS Publication No. PEP24-07-021, NSDUH Series H-59). U.S. Department of Health and Human Services. https://www.samhsa.gov/data/report/2023-nsduh-annual-national-report

Sullivan, K., Hickey, C., & O'Key, S. (2021, January 22). Here are the 30 executive orders and actions Biden signed in his first three days [CNN Media report]. https://www.cnn.com/2021/01/22/politics/joe-biden-executive-orders-first-week/index.htm1

Takahashi, Y., & Evans, L. T. (2018). An application of machine learning for predicting rearrests: Significant predictors for juveniles. *Race and Social Problems, 10*(1), 42–52. https://doi.org/10.1007/s12552-017-9219-8

Teigen, A. (2018, January). *Principles of effective juvenile justice policy*. National Conference of State Legislatures. https://documents.ncsl.org/wwwncsl/Human-Services/JJ_Principles_122017_31901.pdf

Teigen, A. (2024, August). *Juvenile age of jurisdiction and transfer to adult court laws*. National Conference of State Legislatures. https://www.ncsl.org/civil-and-criminal-justice/juvenile-age-of-jurisdiction-and-transfer-to-adult-court-laws

Tennessee Commission on Children and Youth. (2012). *Study of disproportionate*

minority contact (DMC) in the Tennessee juvenile justice system. https://www.tn.gov/content/dam/tn/tccy/documents/youth-justice/dmc-rep12.pdf

Texas Juvenile Justice Department. (2024, July). *Handbook for parents and caregivers*. https://www.tjjd.texas.gov/wp-content/uploads/2024/07/Handbook-for-Parents-and-Caregivers-073124.pdf

Texas Juvenile Justice Department. (2024, August). *The state of juvenile probation activity in Texas: Calendar year 2023*. https://www.tjjd.texas.gov/wp-content/uploads/2024/08/The-State-of-Juvenile-Probation-Activity-in-Texas-Calendar-Year-2023.pdf

Texas Juvenile Justice Department. (2025). *Annual statistical report FY 2024–25*. https://www.tdcj.texas.gov/documents/Statistical_Report_FY2024.pdf

Texas Juvenile Justice Department. (2025, April). *Research and legislative reports*. https://www.tjjd.texas.gov/operations/research-and-legislative-reports/

Texas Juvenile Justice Department. (2025, April). *Texas Model*. https://www.tjjd.texas.gov/state-programs/texas-model/

Texas Juvenile Justice Department. (2025, April). *Youth demographics*. https://www.tjjd.texas.gov/state-programs/youth-demographics/

Texas Office of the Attorney General. (2020). *Juvenile justice handbook*. https://www.texasattorneygeneral.gov/sites/default/files/files/divisions/juvenile-justice/JuvenileJusticeHandbook.pdf

Thaxton, S., & Agnew, R. (2018). When criminal coping is likely: An examination of

conditioning effects in general strain theory. *Journal of Quantitative Criminology, 34*(4), 887–920. https://doi.org/10.1007/s10940-017-9358-5

Theofanidis, D., & Fountouki, A. (2018). Limitations and delimitations in the research process. *Perioperative Nursing-Quarterly, 7*(3), 155–163. https://www.spnj.gr/articlefiles/volume7_issue3/pn_sep_73_155_162b.pdf

Thomas, J. M. (2017). *Raising the bar: State trends in keeping youth out of adult courts (2015–2017)*. Campaign for Youth Justice. https://static.prisonpolicy.org/scans/StateTrends_Repot_FINAL.pdf

Tufford, L., & Dylan, A. (Eds.). (2025). *Trauma-informed care in social work education: Implications for students, educators, pedagogy, and field* (1st ed.).

Trochim, W., & Land, D. (1982). Designing designs for research. *The Researcher, 1*(1), 1–6. http://www.socialresearchmethods.net/kb/desdes.php

USC Libraries. (n.d.). Organizing your social sciences research paper: Theoretical framework. http://libguides.usc.edu/content.php?pid=83009&sid=618409

Van Wyk, J. A. (2023). ACEs and angst: Adverse childhood experiences, general strain theory, and adolescent male suicidal and violent behaviors. *Sage Open, 13*(2). https://doi.org/10.1177/21582440231176710

Vergara, A. T., Kathuria, P., Woodmass, K., Janke, R., & Wells, S. J. (2016). Effectiveness of culturally appropriate adaptations to juvenile justice services. *Journal of Juvenile Justice, 5*(2), 85–103. https://www.proquest.com/scholarly-journals/effectiveness-culturally-appropriate-adaptations/docview/1845981489/se-2

Viljoen, J. L., Jonsson, M. R., Cochrane, D. M., Vargen, L. M., & Vincent, G. M. (2019). Impact of risk assessment instruments on rates of pretrial detention, postconviction placements, and release: A systematic review and meta-analysis. *Law and Human Behavior, 43*(5), 397–420. https://psycnet.apa.org/fulltext/2019-46921-001.pdf

Vincent, G. M., Guy, L. S., & Grisso, T. (2012). *Risk assessment in juvenile justice: A guidebook for implementation*. New York, NY: Models for Change. https://modelsforchange.net/publications/346/Risk_Assessment_in_Juvenile_Justice_A_Guidebook_for_Implementation.pdf

Warner, T. D., Leban, L., Pester, D. A., & Walker, J. T. (2023). Contextualizing adverse childhood experiences: The intersections of individual and community adversity. *Journal of Youth and Adolescence, 52*(3), 570–584. https://doi.org/10.1007/s10964-022-01713-2

Wachtel, T. (2019). Defining restorative. International Institute for Restorative Practices. https://www.iirp.edu/images/pdf/Defining-Restorative_Nov-2016.pdf

Watson, R., & de Gelder, B. (2017). How White and Black bodies are perceived depends on what emotion is expressed. *Scientific Reports, 7*(1), 1–12. https://doi.org/10.1038/srep41349

Wing, B. (2019). Second bi-annual disproportionate minority contact report for agreement. https://wp.stlcountycourts.com/family-court/updates-on-the-agreement-with-the-department-of-justice/

Wolff, K. T., Baglivio, M. T., Klein, H. J., Piquero, A. R., DeLisi, M., & Howell, J. C.

(2020). Adverse childhood experiences (ACEs) and gang involvement among juvenile offenders: Assessing the mediation effects of substance use and temperament deficits. *Youth Violence and Juvenile Justice, 18*(1), 24–53. https://doi.org/10.1177/1541204019854799

Woods, L. V. (2021). Juvenile Detention Alternatives Initiative, zero-tolerance discipline, and the school-to-prison pipeline. *Journal of Social Change, 13*(1). https://scholarworks.waldenu.edu/cgi/viewcontent.cgi?article=1279&context=jsc

Zettler, H. R., & Craig, J. M. (2023). Residentially-placed youth and the adverse childhood experiences–recidivism relationship: Considering racial/ethnic and sex differences. *American Journal of Criminal Justice, 48*(2), 530–544. https://doi.org/10.1007/s12103-021-09667-0

Appendix A: What's My ACE Score

What's My ACE Score?

Prior to your 18th birthday:

1. Did a parent or other adult in the household **often or very often**…
   Swear at you, insult you, put you down, or humiliate you?
   or
   Act in a way that made you afraid that you might be physically hurt?
   Yes No If yes enter 1 _____
2. Did a parent or other adult in the household **often or very often**…
   Push, grab, slap, or throw something at you?
   or
   Ever hit you so hard that you had marks or were injured?
   Yes No If yes enter 1 _____
3. Did an adult or person at least 5 years older than you **ever**…
   Touch or fondle you or have you touch their body in a sexual way?
   or
   Attempt or actually have oral, anal, or vaginal intercourse with you?
   Yes No If yes enter 1 _____
4. Did you **often or very often** feel that …
   No one in your family loved you or thought you were important or special?
   or
   Your family didn't look out for each other, feel close to each other, or support each other?
   Yes No If yes enter 1 _____
5. Did you **often or very often** feel that …
   You didn't have enough to eat, had to wear dirty clothes, and had no one to protect you?
   or
   Your parents were too drunk or high to take care of you or take you to the doctor if you needed it?
   Yes No If yes enter 1 _____
6. Was a biological parent **ever** lost to you through divorce, abandonment, or other reason?
   Yes No If yes enter 1 _____
7. Was your mother or stepmother:
   Often or very often pushed, grabbed, slapped, or had something thrown at her? or
   Sometimes, often, or very often kicked, bitten, hit with a fist, or hit with something hard? or
   Ever repeatedly hit over at least a few minutes or threatened with a gun or knife?
   Yes No If yes enter 1 _____
8. Did you live with anyone who was a problem drinker or alcoholic or who used street drugs?
   Yes No If yes enter 1 _____
9. Was a household member depressed or mentally ill or did a household member attempt suicide?
   Yes No If yes enter 1 _____
10. Did a household member go to prison?
    Yes No If yes enter 1 _____

Now add up your "Yes" answers: _____ This is your ACE Score

Appendix B: Texas Juvenile Justice Department Commitment & Admission Data

	FY 2020		FY 2021		FY 2022		FY 2023		FY 2024	
NUMBER OF NEW ADMISSIONS	456		569		426		562		578	
DEMOGRAPHICS	**#**	**%**	**#**	**%**	**#**	**%**	**#**	**%**	**#**	**%**
GENDER										
MALE	423	92.8	511	89.8	383	89.9	498	88.6	532	92.0
FEMALE	33	7.2	58	10.2	43	10.1	64	11.4	46	8.0
RACE/ETHNICITY										
BLACK OR AFRICAN AMERICAN	173	37.9	200	35.1	177	41.5	222	39.5	247	42.7
HISPANIC	191	41.9	248	43.6	169	39.7	220	39.2	226	39.1
WHITE	89	19.5	115	20.2	77	18.1	119	21.2	101	17.5
OTHER	3	0.7	6	1.1	3	0.7	1	0.2	4	0.7
AGE AT ADMISSION										
10 TO 12 YEARS	0	0.0	1	0.2	6	1.4	1	0.2	3	0.5
13 YEARS	16	3.5	12	2.1	8	1.9	13	2.3	13	2.3
14 YEARS	33	7.2	38	6.7	34	8.0	32	5.7	39	6.8
15 YEARS	97	21.3	103	18.1	66	15.5	85	15.1	107	18.5
16 YEARS	173	37.9	232	40.8	146	34.3	193	34.3	185	32.0
17 OR OLDER	137	30.0	183	32.2	166	39.0	238	42.4	231	40.0
ADVERSE CHILDHOOD EXPERIENCES (ACES)										
HISTORY OF EMOTIONAL ABUSE	148	32.7	161	30.3	129	30.6	197	35.2	221	38.2
HISTORY OF PHYSICAL ABUSE	116	25.6	132	24.9	104	24.7	179	32.0	149	25.8
HISTORY OF SEXUAL ABUSE	52	11.5	92	17.3	64	15.2	98	17.5	98	17.0
HISTORY OF EMOTIONAL NEGLECT	123	27.2	133	25.0	135	32.1	177	31.6	185	32.0
HISTORY OF PHYSICAL NEGLECT	87	19.2	130	24.5	100	23.8	192	34.3	173	29.9
HISTORY OF FAMILY VIOLENCE	149	32.9	166	31.3	146	34.7	237	42.3	215	37.2
HOUSEHOLD SUBSTANCE ABUSE	212	46.8	248	46.7	187	44.4	306	54.6	315	54.5
HOUSEHOLD MENTAL ILLNESS	89	19.6	129	24.3	99	23.5	160	28.6	135	23.4
PARENTS SEPARATED OR DIVORCED	390	86.1	423	79.7	343	81.5	477	85.2	498	86.2
INCARCERATED HOUSEHOLD MEMBER	268	59.2	284	53.5	251	59.6	381	68.0	383	66.3
TOTAL NUMBER OF ACES										
0 to 1	86	19.0	122	23.0	93	22.1	80	14.3	88	15.2
2 to 3	153	33.8	169	31.8	140	33.3	155	27.7	171	29.6
4 to 5	119	26.3	125	23.5	84	20.0	155	27.7	158	27.3
6 to 7	63	13.9	74	13.9	63	15.0	99	17.7	100	17.3
8 to 10	32	7.1	41	7.7	41	9.7	71	12.7	61	10.6

Note: Appendix B displays the de-identified, aggregated secondary data used for this study. Data represents youth admitted to secure facilities within the Texas Juvenile Justice Department from FY 2020 to FY 2024, including demographic variables and ACEs categories. Retrieved from www.tjjd.texas.gov, Commitment & Admission Data.