

Trauma Experiences in the Backgrounds of Violent Young Offenders

Professor Gwyneth Boswell

Abstract:

There is growing evidence of the impact of childhood and adolescent trauma on young people across the life course. This article focuses on trauma in the backgrounds of violent juvenile offender groups, on which the author has conducted research over the last 20 years. It contends that such trauma frequently goes unidentified, and requires proper recognition from professionals and policy-makers in the process of delivering criminal justice.

Key words:

Childhood trauma/violence/violent young offenders/abuse/loss/age of criminal responsibility/post-traumatic stress disorder/PTSD

Introduction:

Trauma in childhood may result from a range of possible negative experiences such as violence, bullying, abuse, loss, disaster, whether in the family, in schooling, or in wider society. These experiences may be direct or witnessed. Contemporary examples include school shootings, gang violence, terrorist attacks, earthquakes and floods, aeroplane crashes, and longstanding physical and sexual abuse. The ensuing trauma may constitute a one-off reaction or, if unaddressed, a long-lasting chronic condition with far-reaching effects. Responses to it include intense feelings of fear, loss of trust in others, a reduced sense of personal safety, guilt and shame, with the possibility of damage to the brain and nervous system, relationship difficulties, engagement in high-risk behaviours, and increased involvement with child welfare and juvenile justice systems (National Child Traumatic Stress Network, 2015).

The definition of a child varies across the world, but is most frequently classified as being anyone under the age of majority, normally eighteen years. The age of criminal responsibility, however, may range from 7 years, for example in many Asian Countries, to 18 years, for example in many South American countries. Within Europe, where the average age is 14 years, England and Wales has one of the lowest ages of criminal responsibility at 10 years. This despite evidence to the effect that cognitive and psychosocial development, including the ability fully to understand the difference between right and wrong (known as the principle of *doli*

incapax) may not be complete in some young people until at least early adulthood (Erikson, 1968) Thus:

We often expect children to think like adults when they are not yet capable of doing so.

(Child Development Institute, 2015)

The question which has occupied much of my working life as an academic has been ‘Why do children and young people become violent?’ (Boswell, 2000). The process of interviewing many such young people has pointed to the necessity to identify and work with the trauma experiences in their backgrounds, such as abuse and loss, which they so frequently recount. This is particularly so in the face of increased emphasis by successive Governments, and indeed by society world-wide, on the need for public protection. It is, thus, important first to invoke the wider professional, societal and global contexts for developing a greater understanding of trauma and violence in young people.

The structural context of violence across the world:

Violence and murder perpetrated by children and young people became high profile in the UK during the 1990s largely as a result of the murder, in February 1993, of two-year old James Bulger at the hands of two 10 year old boys. The blurred video image of this innocent toddler, hand in hand with his two young killers as they led him through a Liverpool shopping precinct to his ultimate death, is one which will probably remain in the minds of all who saw it for the rest of their lives. At that time, little attempt was made to seek an explanation for the two 10 year-olds’ behaviour. It seemed sufficient for the media to apply the label ‘evil’. It appeared acceptable for any hint of the welfare philosophy, applied to children under the age of 14 years in most other European countries, to be firmly supplanted by the notions of punishment and retribution. It seemed uncontentious, as David James Smith reported in his book ‘The Sleep of Reason’ (1994) for the trial judge, when passing sentence, to threaten them by carrying into the Courtroom a black cap and white gloves - the traditional artefacts of the death penalty.

Thus, these two young children, publicly named and reportedly severely traumatised, came to be sentenced to detention during Her Majesty’s Pleasure under Section 53 (1) of the Children and Young Persons Act 1933 with a minimum of 15 years to serve, longer than the period they had yet lived, though this was eventually reduced to 8 years by the European Court. There was little recognition of them as children who prior to their offence would normally have been seen as separate, vulnerable beings with distinct needs, and a complete absence of information about the litany of abuse and loss in their backgrounds which David

James Smith (1994) and Blake Morrison (1997), both serious journalists, later recounted in their books about the case.

Cases of young people killing other young people around the world which came after the Bulger case have included the Colorado school killings in the US by two 11-year olds; the brutal gang-rape and killing of a 14-year old schoolgirl in South Africa by a 15-year old; and the gang-rape and murder of a 23-year old woman on a bus in India by a 17-yr old boy and 4 adults. All of these produced public outcries similar to those in the UK, and petitions for the return of the death penalty in South Africa, which Nelson Mandela had abolished at the end of apartheid. In India, the adults did receive the death penalty, though the 17-year old received 3 years' detention. In a study of child violence in South Africa, Wandile Zwane observed that:

The tendency now is to emphasise the lurid details of the brutal acts committed by children. Glaringly missing from the media reports are the reasons behind this type of violent behaviour. (Zwane, 2000:2)

Of course, the reasons for violence and murder by youngsters vary enormously in relation to their individual circumstances and their respective cultures. In Rwanda, where the author advised on research about the feasibility of the 'gacaca' mediation process for young people still in prison for genocide crimes, both the young people and the communities to which it was proposed they would return remained traumatised and fearful. But whatever the circumstances, if we are seriously to consider the prevention of such violence by the next generation, we need to examine much more closely the nature of the problem about asking this question 'Why?' Indeed, it behoves any professional working with these young people first to consider the wide-ranging backdrop of violent images to which we as individuals and societies are exposed in our daily lives.

In parallel with images of violence perpetrated **by** children have developed other powerful media projections of violence perpetrated **upon** children in the form of child abuse - physical, sexual, emotional, or combinations thereof. In the UK and elsewhere, these consistently impact upon the populace as a consequence of public inquiry either because of child death within the family; or the mismanagement of suspected child abuse; or abusive practices in children's homes. According to the particular circumstances, those with professional responsibility, notably in recent times Children's Services, have been criticised either for intervening too much or intervening too little. Public feeling seemingly runs as high about the increase of state interference in domestic and family life as it does about that same state's failure to prevent the death or abuse of a child. This represents an awesome challenge for professionals both in the social care and criminal justice sectors. The nub of this challenge is to remain abreast of the art and science of risk assessment

and management, to ensure that they are always supported in their practice by their employing organisations, and to be able to stand their ground in the face of public and political pressure. This is not easy but, with training and experience, it can be done.

The contemporary primacy of violence is also demonstrated across the world in military & religious architecture, statues, art, music, press and television coverage of more than 300 wars since the end of World War II (Boswell, 2009). This has become particularly engraved on 21st-century consciousness through media coverage of the military conflicts in Iraq and Afghanistan, the conflicts arising from the Arab Spring in Libya, Egypt and Syria, and the advent of the Islamic State (formerly ISIS). Further, violence is enshrined in the response of a range of justice systems to criminalised anti-social behaviour - that is to say torture and other forms of physical retribution, and capital punishment - all of which, in some countries, may be applied to children and young people, despite wide ratification of the United Nations Convention on the Rights of the Child (UN General Assembly, 1989). Similarly, Save the Children's report 'The Small Hands of Slavery' (1997) pointed out that mental and physical violence to victims of child prostitution and child labour is to be seen not only in Asia, the Far East, Central and South America, as popularly imagined, but right across the so-called 'developed' world. Physical violence between family members is frequently seen as normal for many societies (Gelles & Straus, 1988).

At national and international levels, then, it can be argued that the cultural legitimacy of violence is reinforced to successive generations of youngsters and that, in some contexts, this in itself can be traumatising. It certainly produces confusing models and messages for a young person moving through developmental stages and trying to gain a sense of identity and morality, against a complex backcloth of interacting sociological, cultural, psychological and other influences.

Trauma as a background to later violence:

In England and Wales, during the 1990s, the author undertook two surveys for the Prince's Trust. The first was a small-scale investigation of the experiences and needs of 25 Section 53 offenders (Boswell 1991, 1996). These were children and young people between the ages of 10 and 17 inclusive, detained for murder and other grave crimes under Sections 53 (1) and (2) of the Children and Young Persons Act 1933. A completely unanticipated by-product of this survey was the discovery of evidence in both young people's accounts and their case records that 50% of the sample had a background of some kind of child abuse – that is to say physical, sexual, emotional, organised/ritual or combinations thereof. Related staff who were interviewed estimated that the true figure could be as high as 90%. The other phenomenon revealed in this survey was the high prevalence of traumatic loss

in the shape of bereavement and separation from family which the young people had not been helped to understand or come to terms with.

The next step, when research funding became available, was to survey a much higher proportion of cases, to try and establish a reliable figure for the prevalence of abuse and loss in the lives of the Section 53 population, drawing on a statistically significant number of detainees. At the time, the population of Section 53s of all ages, including those who had progressed to the adult prison system, numbered 615 of whom 584 were male and 31 female. (The Department of Health did not monitor ethnic origin during that period). The research method was to examine a random sample of 200 centrally-held files, to note down professionally confirmed evidence in them of child abuse and loss and, where this evidence was partial or ambiguous, to interview the young people themselves about these issues. A total of 72% of respondents was found to have experienced abuse, defined according to Government Department guidelines (Home Office *et al.*, 1991). This was divided as follows: emotional (28.5%); sexual (29%); physical (40%); organised/ritual (1.5%); combinations of abuses (27%).

A total of 57% had experienced significant loss via bereavement (21%) or cessation of contact, usually with a parent (43%) and, in a small number of cases, both. In only 18 out of 200 cases studied were there no personally reported evidences of abuse and/or loss. In other words, the total number of Section 53 offenders who had experienced one or both phenomena was 91%.

The total number who had experienced **both** abuse **and** loss was 35%, suggesting that the presence of a double childhood trauma may be a potent factor in the lives of violent young offenders. Indeed there seems little doubt that child abuse and childhood experience of loss, when no effective opportunity is provided for the child to make sense of these experiences, constitutes unresolved trauma which is likely to manifest itself in some way at a later date. Many children become depressed, disturbed, violent or all three, and as the American Psychiatric Association reports, girls tend to internalise and boys to externalise their responses (American Psychiatric Association, 2013).

Not untypical of this group was Darren, aged 32 who, when interviewed, had so far served 15 years, 11 of them in adult prisons, for grievous bodily harm and attempted rape, and recounted a childhood which included the loss of his father when he was 3, regular beatings from that time by his mother, sexual abuse by his mother's lover, being locked in a dark cellar with rats, and sexual abuse followed by suicide attempts after he was placed in a children's home. George, aged 23 at the time of interview, was sentenced to be detained during Her Majesty's Pleasure for the physical and sexual assault of a woman belonging to a religious group he had joined for support; his attack caused serious and lasting injury. At the time of

interview he had served eight years, the last two in an adult prison. His father had died when he was 5, and his stepfather subsequently physically and sexually abused him. His case is not unusual, in that this early abusive and traumatic background had not come to light before his very serious offence, despite professional (and in his case longstanding) involvement with the family. Had abuse been recognised and the child and his family managed differently as a result, it is possible that the long-term outcome not just for George, but for many of these young men, might have been different.

These cases are not recounted to suggest that child abuse or loss are the only potential causes of violent offending – indeed cause is notoriously difficult to establish - nor is it to suggest that every abused child becomes an offender, rather that abuse is sufficiently prevalent among such offenders to be regarded as a key traumatic factor which involved professionals should have in mind as they engage with children and young people, along the dichotomous welfare/justice continuum. Recurringly, research evidence reminds us of the seemingly paradoxical but nevertheless close relationship between the offender's own victimisation at some point in their lives, and their later offending. Examples of this include research in America on problem behaviour in abused and neglected children grown up (Widom & White, 1997); the Edinburgh longitudinal study of youth transitions and crime by Smith & McVie (2003); the research review of risk and protective factors for violent behaviour in youth, conducted by Lösel & Bender (2006); the work of Wikstrom and Butterworth (2006) on lifestyles of those involved in adolescent crime; the study by Jacobson *et al.* (2010) of 200 young people in custody; and the biographical narrative interview study of violent young people in secure settings by Grimshaw *et al.* (2012). These kinds of backgrounds of victimisation were also almost universally present in the small number of young women in our sample.

A third study of those sentenced for grave crimes who, by then, had become Section 90 & 91 offenders under the Powers of the Courts (Sentencing) Act 2000, was conducted for England & Wales' Youth Justice Board (YJB) in 2003 (Boswell, Wedge & Price, 2003). Based on Prison Service Order 4950 (HM Prison Service, 2000) which stated that regimes for those under 18 should do all they could to positively motivate young people via individually tailored programmes, three enhanced YOI regimes for vulnerable detainees had been set up, and our research team evaluated the effectiveness of one of them. The findings were largely positive, but following on from the identification of links between trauma and later violent behaviour in the Prince's Trust study, we worked with a psychologist to administer a test for post-traumatic stress disorder (PTSD). All 24 young men on this particular enhanced unit, unsurprisingly were found to have damaged and disturbed backgrounds and we wanted to know if PTSD was or had been experienced as a result.

The Test for Post-Traumatic Stress Disorder at that time was the PTSD-1. It took the form of an interview which has demonstrated very high internal consistency and test-retest reliability. It was devised to correspond closely to the American Psychiatric Association's (1980) diagnostic standards and criteria for PTSD (DSM-III) though both the criteria and PTSD testing instruments have increased in sophistication since that time. The first question in the PTSD-1 asks whether the respondent has experienced an unusual, extremely distressing event (the first criterion for a PTSD diagnosis). Answers in the affirmative then triggered more detailed questions in 4 sections which represent the remaining four criteria for PTSD – which are that the traumatic event is persistently re-experienced; the person persistently avoids stimuli associated with the trauma, or experiences a numbing of general responsiveness; that persistent symptoms of increased arousal are experienced; and that symptoms must have persisted for 28 days before diagnosis.

It is generally acknowledged that these criteria require further development, particularly within non-military and non-natural disaster contexts. The test authors, indeed, suggest that some of the cut-off points may be too rigid, and that 'users could substitute lower and higher cut-off points if desired' (Watson *et al.*, 1991: 181). In relation to young people, Young (1990) developed a set of early maladaptive schemata to interact with unresolved PTSD symptoms. These schemata specifically allow for links between major childhood traumata and psychological morbidity in later life. Of import, in relation to the YJB study, are those maladaptive schemata which include subjugation, vulnerability to harm, emotional deprivation, abandonment or loss, mistrust and defectiveness or unlovability (often experienced by abused children). As noted in the previous study of this offender group: 'it seems entirely possible that such interactions at some point along the continuum between PTSD and psychological morbidity could manifest themselves in ways which include violent offending' (Boswell, 1996: 116).

The research team was able to interview 21 of the 24 young men on the enhanced unit on 2 occasions with an average gap of around 9 months. One fifth, or 4 respondents scored positive for current PTSD at first interview, but only 2 of these still scored positive by the second interview. The traumata cited by this group were: being bullied; military conflict; terrifying dreams; and, for one, the violent offence he himself had committed. Three others scored positive for 'lifetime' PTSD – that is to say, PTSD which has been experienced previously, but is not current. Two of this group also cited their own violent offences; the third cited military conflict in his country of origin. In respect of the issue of rigid cut-off points, it is also worthy of mention that if they had scored higher on a single indicator, three other respondents would have reached the level of 'current' PTSD

diagnosis at first interview, and three would have reached the level of 'lifetime' diagnosis. Other traumata cited by those for whom PTSD was not found included further examples of bullying and violent racism, and witnessing the deaths of family members or friends. However, many of these experiences were still categorised as problematic in their lives by these young men.

Although by no means all cases of violent young offenders neatly fit into the criteria for PTSD, these findings generally beg questions as to whether these young people, detained for violent offences and for long periods, should routinely be screened for PTSD and what, if a positive diagnosis results, should then be done to address this situation. Two related incidences of trauma in the backgrounds of young people who had committed murder will serve as illustrations.

The first case was not in the Prince's Trust abuse and loss study but, unusually for the British press, was reported in some detail by one journalist at the time of that study. A 14 year-old boy was charged with bayoneting another teenager to death in a gang attack. This followed an alleged attack with a baseball bat on another boy. The reporting psychiatrist informed the court that the young defendant had witnessed his mother stab his father to death in their home when he was aged 6. Thus he saw his father dead and his mother taken away to jail for manslaughter – effectively a double bereavement. The boy reported persistent mental images and nightmares about this event and had been deeply affected by the traumatic loss at a very young age of both his parents. His response to emotional events generally was one of numbness (a phenomenon we found ourselves as researchers often reading about, as well as 'lost memory' or 'frozen emotion' in descriptions of our respondents). The boy told the psychiatrist that while he was attacking the other teenager, he had seen the image of his father dying, and the psychiatrist reported the murder of the boy's father by his mother as 'clearly the most traumatic incident in his life'. Yet the prosecution refused to accept the boy's plea of guilty to manslaughter on the grounds of diminished responsibility. Clearly those concerned were not persuaded of any link between the two events, despite the considerable body of research available at the time on the effects of this particular form of trauma – i.e. the witnessing of parental violence and murder. (See Black, Kaplan & Harris-Hendriks, 1993; Black, 1998; Black, Harris-Hendriks & Kaplan, 2000).

The second case in the abuse and loss study had not been included in the figure of 72% experiencing abuse because there had been no professional corroboration of it. However, the research team suspected it, based on a range of disjointed records, as highlighted in the following recorded account (Boswell, 1996).

A young woman of 15, who we'll call Jennifer, was convicted of the murder of an elderly woman in her locality. She had exhibited 'disturbed behaviour from an early age' and was described by her GP as 'a very distressed child needing

an urgent child psychiatry referral' following a urinary tract infection and an inability to use her right leg. She became unable to walk for 11 weeks, but a later report described the condition as 'a functional paralysis for which no cause could be found'. Surrounding this situation was domestic violence and disruption at home. The existence of this combination of factors would have raised the antennae of many of those accustomed to working with abused children, but the records contained no evidence of any formal abuse investigation or even of any probing questioning.

Eight years after this account was published, the author attended a seminar about violent young offenders at which a respected psychotherapist from the Bowlby Centre was presenting a case study. After listening for some minutes, it became clear to the author that the case the psychotherapist was talking about was that of this very same young woman, Jennifer, with whom she had been working for a number of years. She recounted a history of sustained and systematic abuse in the life of this young woman which made it only too clear how traumatised she was when she had committed her own crime. The psychotherapy had worked very well in helping her to understand why she had done what she had done, to come to terms with it, and the steps she would need to take to avoid such violence in the future. She was now released and doing extremely well.

The crucial lesson from both the cases described above is that if their childhood trauma had been recognised and worked with, two other human beings would still be alive and these two young people themselves would have been most unlikely to have ended up incarcerated at the heavy end of the criminal justice system. Such evidence as is available about protective or resilience factors, for example that of Lösel and Bender (2006) suggests that the two main factors that aid recovery from trauma are (a) access to and ability to benefit from sympathetic schooling and (b) to be able to share the story of the traumatic experience with at least one responsible adult who will listen, believe, help the young person to understand and to move on from that experience. As trauma expert Judith Herman has noted, telling their story is a key step in recovery from trauma, enabling a new sense of self and a new life narrative to develop (Herman, 2001).

Creating the space and opportunity for children to talk in this way is of the essence, and yet it rarely seems to happen in the case of these young people. As Yule, in a critique of issues and findings relating to childhood trauma observed: 'One reason why professionals did not believe that children were subject to physical or sexual abuse, or suffered from post-traumatic stress disorder was simply - that they never asked them!' (Yule, 1993: 165). However, the action that needs to be taken is not only by child care and criminal justice professionals; it also requires public and political will and understanding.

Conclusion:

This article has reflected upon findings from the author's and others' research on the presence of trauma in the backgrounds of violent young offenders, in order to focus attention on the ways forward for working effectively with these undoubtedly challenging, frequently disturbed and sometimes continuingly dangerous young people. The following five points offer suggestions to this end.

First, the age of criminal responsibility should be universally raised to at least that of 14 years so that it becomes commensurate with that currently existing in countries where such youngsters are channelled through the child care system, rather than through a punitive and often re-abusive criminal justice system.

Second, there should be universal recognition of the United Nations Riyadh Guidelines of 1990 which state:

Deprivation of the liberty of a juvenile should be a disposition of last resort and for the minimum necessary period, and should be limited to exceptional cases. (UN, Fundamental Perspective 2, 1990)

Third, professionals such as police, social workers, probation and prison officers, need to be equipped with a firm knowledge base about the significance of childhood trauma which will help them recognise the signs of phenomena such as PTSD; they need also to be provided with the training and resources which will enable them to intervene appropriately **before** high-risk behaviour becomes entrenched within young adulthood. As a welcome start, two downloadable practitioner guides on these matters have recently been published by the 'Beyond Youth Custody' partnership (Wright & Liddle, 2014a, 2014b).

Fourth, as observed in an earlier issue of this Journal (Boswell, 2009), young people who have been abused and otherwise traumatised need to be supported by their communities, and their experiences believed and validated, so that they can feel free to speak about them without shame being attached to this process. Support for their parents and families are also needed. Police professionals in particular have a key role to play here, in linking with their local communities and communicating with them about the importance for community safety of reaching an understanding of young violent offenders, and negotiating with them the action that each sector can appropriately take to minimise the risks of this happening in their communities.

Finally, research needs to be made central to the process of policy formulation and effective application in the justice system for young people. In other words, politicians, policy-makers and sentences need to listen to and act on research findings. This, too, is an arena in which professionals can play a major role, by becoming research-minded, and also by helping to represent not only their

own views, but those of the public, victims and their families, **and** the youthful perpetrators themselves, moving society towards a greater sense of collective responsibility in the process.

In the ways outlined above, society's responses to young, violent offenders can, become much more proactive, confident and accurate in the very complex arena which spans child welfare and youth justice, and which frequently finds the victim and the offender located in one single damaged young person.

References:

- American Psychiatric Association (1980) *Diagnostic and Statistical Manual of Mental Disorders* (DSM-III) 3rd edition. Washington D.C: American Psychiatric Association.
- American Psychiatric Association (2013) *Diagnostic and Statistical Manual of Mental Disorders* (DSM-V) 5th edition. Washington D.C: American Psychiatric Association.
- Black, D. (1998) 'Working with the effects of traumatic bereavement by uxoricide (spouse killing) on young children's attachment behaviour', *International Journal of Psychiatry in Clinical Practice* 2 (4): 245-249.
- Black, D., Harris-Hendriks, J., & Kaplan, T. (2000) *When Father Kills Mother: guiding children through trauma and grief*. London: Routledge.
- Black, D., Kaplan, T., & Harris-Hendriks, J. (1993) 'Father Kills Mother: effects on the children in the United Kingdom'. In Wilson, J.P. & Raphael, B.[Eds.] *International Handbook of Traumatic Stress Syndromes*. New York: Plenum Press.
- Boswell, G.R. (1991) *Waiting for Change: An exploration of the experiences and needs of Section 53 offenders*. London: The Prince's Trust.
- Boswell, G. R. (1995) *Violent Victims*. London: The Prince's Trust.
- Boswell, G. R. (1996) *Young and Dangerous: the Backgrounds and Careers of Section 53 Offenders*. Aldershot: Avebury.
- Boswell, G.R. (2009) 'Child Victims', *Pakistan Journal of Criminology*, Vol.1 (3): 1-18.
- Boswell, G.R. (2000) *Violent Children and Adolescents: Asking the Question Why*. London: Philadelphia: Whurr Publishers.
- Boswell, G.R., Wedge, P. & Price, A. (2003) *An Evaluation of Regimes for Section 90/91 Offenders at HM Young Offender Institutions Feltham, and Carlford Unit, Warren Hill*. A Report to the Youth Justice Board of England & Wales.
- Boswell, G.R. (2009) 'Child Victims', *Pakistan Journal of Criminology*, Vol.1 (3): 1-18.

- Child Development Institute (2015) <http://childdevelopmentinfo.com/child-development/piaget/#ixzz3Uwmt8Doq> [Accessed 29/03/15]
- Erikson, E.H. (1968) *Identity: youth and crisis*. London: Faber.
- Gelles, R. J. & Strauss, M. A. (1988) *Intimate Violence*. New York: Simon and Schuster.
- Grimshaw, R. [Ed.] with Schwartz, J. & Wingfield, R. (2012) *My Story: young people talk about the trauma and violence in their lives*. London: Centre for Crime & Justice Studies.
- Herman, J. (2001) *Trauma and Recovery: From Domestic Abuse to Political Terror*. London: Pandora.
- Home Office, Department of Health, Department of Education and Science, Welsh Office (1991) *Working Together under the Children Act 1989. A guide to arrangements for inter-agency co-operation for the protection of children from abuse*. London: HMSO.
- Jacobson, J., Bhardwa, B., Gyateng, T., Hunter, G. & Hough, M. (2010) *Punishing Disadvantage: A Profile of Children in Custody*. London: Prison Reform Trust.
- James Smith, D. (1994) *The Sleep of Reason: the James Bulger case*. London: Century.
- Lösel, F. and Bender, D. (2006) 'Risk factors for serious and violent antisocial behaviour in children and youth'. In Hagell, A. & Jeyarajah-Dent, R. [Eds.], *Children who commit acts of serious interpersonal violence: Messages for best practice*. London & Philadelphia: Jessica Kingsley Publishers.
- Morrison, B. (1997) *As If*. London: Granta Books.
- National Child Traumatic Stress Network (2015) *Defining Trauma and Child Traumatic Stress*. <http://www.nctsnet.org/content/defining-trauma-and-child-traumatic-stress> [Accessed 11/06/15]
- Save the Children (2007) *The Small Hands of Slavery*. London: Save the Children.
- Smith, D. & McVie, S. (2003) Theory and Method in the Edinburgh Study of Youth Transitions and Crime, *British Journal of Criminology* 43(1):169 -195.
- United Nations (1990) *Guidelines for the Prevention of Juvenile Delinquency (The Riyadh Guidelines)*. New York: Department of Public Information.
- United Nations General Assembly (1989) *Convention on the Rights of the Child*. New York: United Nations.
- Watson, C.G., Juba, M.P., Manifold, V., Kucala, T. and Anderson, P.E.D.(1991) 'The PTSD Interview: Rationale, Description, Reliability and Concurrent Validity of a DSM-III-based Technique' *Journal of Clinical Psychology* 47(2): 179-88.

- Wedge, P., Boswell, G., Dissel, A. (2000) 'Violent Victims in South Africa: key factors in the backgrounds of young, serious offenders', *Acta Criminologica* 13 (1) and 13 (2).
- Widom, C. & White, H. (1997) 'Problem behaviour in abused and neglected children grown up: prevalence and co-occurrence of substance abuse, crime and violence', *Criminal Behaviour and Mental Health* 7: 287-310.
- Wikstrom, P. and Butterworth, D. (2006) *Adolescent crime: individual differences and lifestyles*. Cullompton: Willan.
- Wright, S. & Liddle, M. (2014a) *Young Offenders and Trauma: Experience and Impact. A Practitioner's Guide*. Beyond Youth Custody.
<http://www.beyondyouthcustody.net/resources/publications/categories/practitioners-guides/> [Accessed 21.03.15]
- Wright, S. & Liddle, M. (2014b) *Developing Trauma-Informed Resettlement for Young Custody Leavers. A Practitioner's Guide*. Beyond Youth Custody.
<http://www.beyondyouthcustody.net/resources/publications/categories/practitioners-guides/www.beyondyouthcustody.net> [Accessed 21.03.15]
- Young, J.E. (1990) *Cognitive therapy for personality disorders: a schema-focused approach*. Sarasota, F.L: Professional Resource Exchange.
- Yule, W. (1993) 'Children as victims and survivors'. In Taylor, P.J. [Ed.] *Violence in Society*. London: Royal College of Physicians.
- Zwane, W. (2000) *Understanding Children and Youth: pathways to a violent lifestyle - the South African case*. Johannesburg: Centre for the Study of Violence and Reconciliation.

About the author:

Gwyneth Boswell is Director of Boswell Research Fellows and visiting professor at the *University of East Anglia, Norwich, UK*. She has researched and published widely on the subject of violent young offenders, both in the UK and South Africa. She is also author of *Violent Victims (Prince's Trust 1995)*; *Violent Children and Adolescents: Asking the Question Why* (Whurr 2000); and, with Peter Wedge, of *Imprisoned Fathers and their Children* (Jessica Kingsley 2002).