FEMALE DELINQUENTS
COMMITTED TO THE ILLINOIS
DEPARTMENT OF CORRECTIONS:

A PROFILE

PREPARED BY:

RESEARCH AND ANALYSIS UNIT

MEGAN BUURMA ALDERDEN, M.S.
RESEARCH ANALYST
ILLINOIS CRIMINAL JUSTICE INFORMATION AUTHORITY

AND

ADRIANA PEREZ, M.A.
RESEARCH ANALYST
ILLINOIS CRIMINAL JUSTICE INFORMATION AUTHORITY

DECEMBER 2003
This project was supported by Grant #98-JN-FX-0112 awarded to the Illinois Criminal Justice Information by the Office of Juvenile Justice and Delinquency Prevention, Office of Justice Programs, U.S. Department of Justice, through the Justice Research and Statistics Association. Points of view or opinions contained within this document are those of the authors and do not necessarily represent the official position or policies of the U.S. Department of Justice, the Justice Research and Statistics Association, or the Illinois Criminal Justice Information Authority.

Illinois Criminal Justice Information Authority
120 S. Riverside Plaza, Suite 1016
Chicago, IL 60606
Telephone 312.793.8550
Telefax 312.793.8422
World Wide Web: http://www.icjia.state.il.us
ACKNOWLEDGEMENTS

This project could not have been completed without the assistance and support of many individuals. We would like to thank former Director of the Illinois Department of Corrections, Donald Snyder, for allowing researchers access to the data needed for this project. We would also like to thank Warden Jeffery Bargar of the Illinois Youth Center—Warrenville for enthusiastically supporting this research project and providing the opportunity for staff to openly discuss with researchers what it is like to work with confined female delinquents, former Deputy Warden Wendolyn Swims and Ms. Alyssa Williams for facilitating the data collection process, and Ms. Alyssa Williams and Dr. Wendy Navaro for providing background information on the various programs available at the Illinois Youth Center—Warrenville. We also would like to thank Mr. Steve Karr, acting Manager of the Planning and Research Unit of the Illinois Department of Corrections, for providing valuable information about the data collected by the Department of Corrections and extracting data from the Department of Corrections’ Juvenile Tracking System for this project.

We would also like to thank various staff at the Illinois Criminal Justice Information Authority for their assistance on this project. This project could not have been conducted without the support of the Authority’s former Director, Dr. Candice Kane. We are also grateful for the guidance and encouragement of the Associate Director and head of the Research and Analysis Unit, Dr. Gerard Ramker, Senior Research Analyst Phillip Stevenson, and Senior Research Analyst and professor at Loyola University, Dr. David Olson. This project could not have been realized without their support. Additionally, we would like to thank Director Lori G. Levin, Mr. Robert Boehmer, General Counsel at the Authority, Mr. Daniel Dighton, and Ms. Tracy Hahn for reviewing and commenting on the final report.

Finally, this project could not have been completed without the cooperation of those individuals who participated in the focus groups. Their willingness to openly and honestly discuss their experiences working with female delinquents is a testament to their commitment to improving the lives of their clients. To these individuals, we give our thanks.
**EXECUTIVE SUMMARY**

What is known about female juvenile offenders in Illinois is limited. There are no state level data available on the number of females arrested or the number of females entering and moving through the juvenile justice system in Illinois, nor are there state level data available on the specific characteristics of female delinquents. Without such information it is difficult to determine the needs of this population. The purpose of our report is to provide information to practitioners, policymakers, and correctional administrators on the particular needs of female delinquents committed to the Illinois Department of Corrections. This project also provides information on the experiences of practitioners working with female delinquents. Below is a description of the general findings presented in this report.

**Trends in Female and Male Admissions to Illinois Youth Centers**

- Based on the admission data to Illinois Youth Centers from state fiscal year (SFY) 1993 to SFY 2002, it was found that the female new court admission rate to Illinois Youth Centers was much lower than the rate for males. Although both rates increased during the time period analyzed, the female admission rate increased at a much greater magnitude than the male admission rate.

- It was also found that the demographic and offense characteristics of females were different from males admitted to Illinois Youth Centers. A greater percentage of females than males were white, admitted for court evaluations, and committed from rural or urban counties. Moreover, a greater percentage of females than males were admitted for property and person offenses; assaults and batteries; and Class 3 felony and misdemeanor offenses.

**Characteristics of Females Committed to the Illinois Youth Center—Warrenville**

- Over three-quarters of the females in our sample were committed to the Department of Corrections after being tried and adjudicated delinquent in juvenile court. Forty-four percent of the females in our sample were dually involved in the child welfare and juvenile justice systems.

- Over half of these females had experienced either physical and/or sexual abuse at least once in their lifetime. Over 95 percent of the females who reported physical, emotional, or verbal abuse and nearly three-quarters of the females reporting past sexual abuse reportedly knew their victimizers (e.g., family members, boyfriends, other relatives, etc.).

- Many of the females in our sample were reportedly having difficulty in school. Almost 70 percent had missed school due to truancy, 44.8 percent had been suspended at least once, 9.7 percent had been expelled, and 21.4 percent had dropped out of school or had been dropped from the school’s roster due to not attending.

- Nearly three-quarters of the females in our sample had been diagnosed with a mental health disorder or problem. Thirty-eight percent had reported suicidal thoughts and over one-fourth had attempted suicide at least once.
• Nearly all of the females in our sample had tried alcohol and/or drugs. The most frequently cited drug was marijuana.

• Many of the females entering the Department of Corrections had extensive arrest histories; the average was five prior arrests (not including arrests for status offenses). Nearly three-quarters had been arrested for a violent offense.

• For those females in which information about their victims were available, it was found that family members, authority figures (e.g., police, school personnel, etc.), acquaintances (e.g., school mates, etc.), and store owners or businesses were the most frequently identified victims.

Working With Female Delinquents

• Focus group participants reported experiencing four main barriers while working with female delinquents: (1) the family and neighborhood environments, (2) females’ sexual relationships, (3) the juvenile justice system and other agencies, and (4) the institutional environment.

• Focus group participants reported filling various roles staff reported engaging in while working with females. The most frequently cited role was that of a surrogate parent. A few participants, however, felt taking on the parental role was difficult because it could create situations in which the youth gets attached to staff and does not want to leave the institution or the staff member disciplines the youth and she feels rejected and hurt.

• Staff participating in the focus groups made several recommendations for improving the correctional system. These include creating more mental health options for the seriously ill, more training on issues particular to working with females, better screening of staff, and more communication between staff (including administrative personnel). Parole officers cited the need for transitional living centers for female delinquents, and all three focus groups identified the need for aftercare services.

Recommendations

• Develop more programming for female delinquents. More programming should be developed to specifically address the needs of females engaged in the juvenile justice system. Programs recommended include mentoring and tutoring programs, anger management and conflict resolution programs, sex education classes, and parenting classes. Programs also should be developed that teach and model healthy relationships. Additionally, it is recommended that more community-based mental health programs be developed to specifically address the mental health needs of females at risk for or entering the juvenile justice system. Finally, programs should be created that work specifically with females and their families.
• **Improve the information available in the social history reports.**
  While reviewing social history reports it was realized that the social history reports varied greatly in terms of the amount and detail of the information provided. Although it is recognized that some counties are limited in what they are able to produce during the time available to conduct a presentence social history investigation, we suggest officials at minimum consider revisiting what information is being collected, particularly in those counties in which a limited amount of information is being collected and reported to juvenile court.

• **Conduct more research on female delinquents.**
  More research should be conducted on female delinquents in general, not just those committed to the Department of Corrections. Research is needed to determine if indeed there has been an increase in the number of female juveniles arrested in Illinois, and if so, why this increase has occurred; map the flow of female delinquents through the juvenile justice system to identify how females move through the juvenile justice system and what factors predict their movement; and how the Department of Corrections is being used by local juvenile justice systems.

• **Revisit institutional policies (Department of Corrections).**
  Based on the information shared by focus group participants, it is recommended that the Department of Corrections consider revisiting institutional policies to determine if some policies conflict with institutional rules, and if so, what actions can be taken to remedy such situations. Additionally, several participants described working with female delinquents as emotionally draining, difficult, and frustrating. It is suggested that the Department of Corrections consider providing staff with the opportunity to openly discuss their frustrations or concerns.

• **Implement more intensive mental health services (Department of Corrections).**
  It is recommended that the Department of Corrections develop more intensive mental health services for the females in their care. Such services may include the development of a separate wing devoted specifically to females with more severe mental health problems.

• **A greater focus on education (Department of Corrections).**
  Based on the findings from the focus groups, it is recommended that there be a greater focus on the education of females in the Illinois Youth Center—Warrenville.

• **Develop aftercare services and transitional living centers (Department of Corrections).**
  Aftercare services should be developed to supplement the supervision provided through parole. Such aftercare services could link females to additional programming and crisis intervention services. It is also suggested that aftercare services be made available to youth as they transition off parole. Transition centers should be created to provide temporary placements for youth while alternative placements are identified.
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INTRODUCTION

In recent years, practitioners have noted an increase in the numbers of female juveniles being arrested.\(^1\) Although the reasons why more females are being arrested are not clear,\(^2\) the increase has resulted in more females moving through the juvenile justice system. Yet, even though the number of female delinquents has increased, little is known about their needs. This is particularly true for Illinois; what is known about female juvenile offenders in Illinois is limited. There are no statewide data available on the actual number of females arrested in Illinois or the number of females entering (e.g., petitioned to court) and moving through the juvenile justice system. Since 1992, arrest data in Illinois has been reported to the Illinois State Police by local law enforcement agencies in a manner that prohibits analyzing these data by age, sex, race, and ethnicity of the alleged offenders at the state level. In other words, researchers are unable to determine how many juveniles are arrested each year in Illinois, let alone, how many of these juvenile arrestees are female.

Court and probation data reported to the Administrative Office of the Illinois Courts by court personnel also lack the specificity needed to examine the sex, race, and ethnicity of the alleged offenders. These data are also collected in a way that prohibits examination of the specific ages of juveniles entering and moving through the juvenile justice system at the state level (i.e., although it is known that the minors are under the age of 17, the specific ages are


\(^2\) Some researchers have argued that more females are being arrested due to changes in the way females are being processed by juvenile justice professionals and not necessarily because females are committing more crimes. For more information on this topic see Chesney-Lind, M. & Paramore, V. (2001). Are girls getting more violent? Exploring juvenile robbery trends. Journal of Contemporary Criminal Justice, 17(2), 142-166.
unknown). Thus, researchers are unable to determine how many females at the state level are petitioned to court, the offenses for which they are being brought before the court, the age at petition, other demographic characteristics (e.g., race and ethnicity), the number of females adjudicated delinquent, and what sentences these females receive (e.g., probation, residential placement, treatment, commitment to the Department of Corrections, etc.). In fact, the only detailed data available statewide on juvenile delinquents are on juveniles admitted to juvenile temporary detention (although these data have only been available since 1998) and juveniles committed to the Department of Corrections. However, even these data contain only basic demographic information (e.g., sex, race, ethnicity) and offense information. Regardless, without arrest and court data, it is impossible for researchers to know if and for what offenses female juveniles are involved in the juvenile justice system at the state level.

Given the lack of basic demographic data on juvenile delinquents in Illinois, it should not be surprising that even less data are available at the state level on more detailed characteristics of juvenile delinquents. For instance, there is virtually no information available at the state level on the family structure or background, abuse history, academic background, mental and physical health histories, and criminal histories of delinquents in Illinois or how these factors predict delinquent behavior or movement through the juvenile justice system. Without this information it is not only difficult to explain why some female juveniles are engaged in delinquent activity, but also to develop programs that specifically address the needs of this population.

Our study was conducted to address the lack of information available on female delinquents in Illinois. The purpose of this study was three-fold. First, researchers sought to develop a profile of female delinquents committed to the Department of Corrections in an effort

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3 Although demographic data are collected at the county-level on juveniles entering the juvenile justice system, this information is not reported to the Administrative Office of the Illinois Courts. Rather, the Administrative Office of the Illinois Courts collects court data in aggregate (e.g., all juveniles petitioned during a particular time period).
to provide juvenile justice practitioners, policymakers, and, more specifically, correctional administrators with data on the particular needs of these female delinquents that could be used to create programs explicitly addressing the critical issues and needs of this population. Second, researchers sought to learn more about the experiences of practitioners working with female delinquents. These data were collected in an effort to provide program administrators seeking to develop programming for female delinquents or those individuals currently working with female delinquents with information that should be considered when developing, implementing, and evaluating programs for female delinquents. Third, based on the information collected on the characteristics of females committed to the Department of Corrections and that collected from correctional personnel working with these females, researchers sought to identify recommendations to assist the implementation of programming and policies to address the needs of female delinquents in Illinois.

There are five sections of this report. Section one, *Illinois Youth Center—Warrenville*, provides an overview of the types of youth that are committed to the Department of Corrections (e.g., juvenile felon, juvenile delinquent, and court evaluation) and the programs available to youth who reside in the Illinois Youth Center—Warrenville, the only correctional facility in Illinois that solely serves female delinquents. Section two, *Trends in Female and Male Admissions to Illinois Youth Centers*, provides an overview of the trends in female and male new court admissions to Illinois Youth Centers from state fiscal year⁴ (SFY) 1993 to SFY 2002 and the demographic and offense characteristics of these juveniles. Although the primary focus of this report is female delinquents, this section provides data on male delinquents admitted to Illinois Youth Centers for contextual and comparative purposes. Section three, *Characteristics of Females Committed to the Illinois Youth Center—Warrenville*, offers a detailed profile of the

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⁴ The state fiscal year runs from July 1st to June 30th.
backgrounds, needs, and services received by a sample of female delinquents committed to the Department of Corrections. Section four, *Working With Females Committed to the Illinois Department of Corrections*, presents findings from three focus groups with correctional staff regarding the barriers experienced while working with delinquent females. It includes a description of the roles staff believed they took on as they worked with female delinquents and a list of recommendations staff made in terms of how community-based programs and the correctional system can better serve female delinquents. Section five, *Recommendations*, provides recommendations based on the characteristics of the female delinquents and findings from the focus groups with correctional personnel.
I. ILLINOIS YOUTH CENTER—WARRENVILLE

The Department of Corrections oversees the secure confinement of juveniles in Illinois. The Department consists of two divisions, the Adult Division, which oversees the adult correctional facilities and supervision, and the Juvenile Division, which consists of seven correctional facilities, referred to as Illinois Youth Centers, that house minors between the ages of 10 and 21 years old.5 The majority of the Illinois Youth Centers house only male juveniles. Only one facility in Illinois, the Illinois Youth Center—Warrenville, is devoted solely to female juveniles. Similar to adult correctional facilities, these juvenile facilities range from minimum- to maximum-security levels.

The majority of juveniles committed to Illinois Youth Centers fall into one of three general categories: juveniles sentenced from adult criminal court, juveniles sentenced from juvenile court, and juveniles adjudicated delinquent in juvenile court and sent to the Department of Corrections for court evaluations.6

- Juveniles who have been tried, found guilty, and sentenced to the Department of Corrections from adult criminal court are housed in Illinois Youth Centers until, at minimum, their 17th birthday, although they may stay at Illinois Youth Centers until their 21st birthday, at which time they must be transferred to an adult facility. These youth are

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5 Although juvenile delinquents committed to the Department of Corrections from juvenile court must be 13 years or older, since 1995 minors 10 years or older found guilty in juvenile court and placed with the Department of Children and Family Services, the child welfare agency in Illinois, can be transferred to the Department of Corrections if it is determined that the Department of Children and Family Services lacks the ability to care for these minors. For more information, please refer to the Illinois Department of Corrections. (2000), Statistical Summary of the Juvenile Division: FY 95 – FY 99. Springfield, IL: State of Illinois, Illinois Department of Corrections or the Secure and Residential Youth Care Facility Licensing Act (730 ILCS 5/3-10-11), which authorizes such placements.

typically referred to as juvenile felons. Similar to adults, juvenile felons receive
determinate sentences and are able to earn day-to-day good conduct credit.

- Juveniles tried, found delinquent, and sentenced to the Department of Corrections from
  juvenile court are housed in Illinois Youth Centers for their entire commitment. These
  juveniles are typically referred to as juvenile delinquents. Unlike adults or juveniles
  sentenced in adult criminal court, juvenile delinquents sentenced from juvenile court
  receive indeterminate sentences. Based on guidelines developed by the Juvenile Division
  of the Department of Corrections, these youth receive an Administrative Review Date, at
  which time their cases will be reviewed and considered for release. These juveniles may
  remain in custody of the Department of Corrections until their 21st birthday.

- Juveniles tried and found delinquent in juvenile court may also be committed to the
  Department of Corrections for court evaluations. Court evaluations are used to assess the
  needs of juveniles found delinquent in juvenile court. The results from the evaluations are
  reported to the juvenile court within a 90-day time period. Based on the court evaluations,
  juveniles can be released (e.g., a minor may be sentenced to probation instead) or
  returned to an Illinois Youth Center to serve indeterminate terms.

**Illinois Youth Center—Warrenville**

The Illinois Youth Center—Warrenville is the reception center for females committed to
the Juvenile Division, and is considered a maximum-security facility for female delinquents. As
noted above, it is the only juvenile correctional facility in the state devoted solely to female
delinquents. The facility is located in DuPage County, which is in northeastern Illinois
approximately 30 miles west of the City of Chicago (see Appendix A for a map of Illinois). Prior
to 1998, this facility housed both male and females committed to the Department of Corrections.
Males were transferred from the Illinois Youth Center—Warrenville on December 1, 1998, to accommodate an increasing female juvenile population. The facility, which resides on 35 acres, consists of a main building and four residential cottages. The facility’s capacity is 86 youth, although the facility’s average daily population is 105. The average annual cost for housing females in this facility is approximately $72,600 per female.

Upon admission to the Illinois Youth Center—Warrenville, a team of staff members assesses and evaluates each youth entering the facility. The evaluation consists of a review of the offense history, family background, social history, and behavioral adjustment in the community and in detention, mental health history and clinical issues, medical concerns, security issues and legal concerns. During this admission period, a comprehensive plan for each youth is established. The comprehensive plan is based on information collected during an intake screening, mental health screening, suicide assessment, psychological evaluations by a mental health professional, substance abuse needs assessment by a certified alcohol and drug counselor, and academic testing by School District 428 teachers. Upon conclusion of the reception process, the minors either begin participating in programming available at the Illinois Youth Center—Warrenville, or are transferred to the Illinois Youth Center—Chicago, a medium-security coed facility for female and male juveniles (see Appendix A for a map showing the location of this facility).

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9 School District 428 is the school district organized by the Illinois Department of Corrections to provide educational services to juvenile and adult inmates residing in correctional facilities across the state.
10 The Illinois Youth Center—Chicago is the only coed juvenile facility in the state. The facility generally serves as a transition center for female juveniles who are not likely to serve lengthy sentences and who are classified as requiring medium security. The facility also serves as a drop-off center for juvenile parole violators in the Chicago area. The Illinois Youth Center—Chicago has 130 beds, 44 of which are allotted for female offenders. The average annual cost for juveniles placed in the Illinois Youth Center—Chicago is approximately $82,300 per youth. See the Illinois Department of Corrections’ web site at: http://www.idoc.state.il.us/subsections/facilities/information.asp?instchoice=chi for more information.
Females housed at the Illinois Youth Center—Warrenville are offered numerous services similar to those available at most Illinois Youth Centers. These services are listed in Table 1.

**Table 1**
General Services Provided at the Illinois Youth Center—Warrenville

<table>
<thead>
<tr>
<th>General Services</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Residential Care</td>
<td>Basic living services, such as food, clothing, housing, and commissary.</td>
</tr>
<tr>
<td>Counseling/Case Management</td>
<td>Mental health and substance abuse assessment, individual and group counseling, and identification of a placement for the females’ return to the community.</td>
</tr>
<tr>
<td>Academic Programs</td>
<td>Middle and high school, GED, and special education classes.</td>
</tr>
<tr>
<td>Leisure Activities</td>
<td>Arts and crafts, religious services, bible study, and group sports.</td>
</tr>
<tr>
<td>Treatment and Clinical Services</td>
<td>Individual and group therapy, substance abuse education, crisis intervention, psychological testing and evaluations, and psychiatric evaluations. This includes clinical treatment and after-care planning.</td>
</tr>
<tr>
<td>Parole Planning</td>
<td>Parole school that prepares youth for their Prisoner Review Board hearing. During this time period, placement issues are addressed (e.g., treatment, placement options, etc.).</td>
</tr>
</tbody>
</table>


In addition to the services listed in Table 1, the Illinois Youth Center—Warrenville includes several programs developed specifically for their female clients. These include the Wells Center Substance Abuse Treatment Program, the Female Offenders with Children Uniting Safely (FOCUS) program, the Baby Think It Over program, and the Helping Paws program. A brief description of each program is provided below.
Wells Center Substance Abuse Treatment Program

The Wells Center Substance Abuse Treatment Program is a modified therapeutic community focused on meeting the specific needs of the youth at the Illinois Youth Center—Warrenville who have been diagnosed as having a substance abuse problem. The program participants are taught to work together as a community to address issues and work through difficult situations. All program staff work together to assist each youth in learning to grow and change while in this program. The services are also designed to educate youth on the effects of chemicals on the body and on behavior.

Female Offenders with Children Uniting Safely

The Female Offenders with Children Uniting Safely (F.O.C.U.S) program was developed in 2000 specifically for expectant mothers. F.O.C.U.S. runs for approximately 16 weeks. During this period, the counselor, casework supervisor and the mental health professional assigned to each youth work together to give young mothers a greater understanding of what it means to be a parent. The F.O.C.U.S. program is divided into four components, pregnancy, child wellness, family life, and choices and changes, with each component addressing the issues young mothers will encounter caring for their children.

Although the program is aimed primarily at expecting youth or young mothers, all females entering the Illinois Youth Center—Warrenville participate in F.O.C.U.S because the fourth component of the program, which covers issues such as stress and anger, life skills training, self-esteem and self-sufficiency, victimization avoidance, keeping healthy, family planning and pregnancy prevention and substance abuse topics, was deemed appropriate for all females residing at the Illinois Youth Center—Warrenville.
**Baby Think It Over**

The pregnancy prevention program Baby Think It Over uses computerized life-like dolls to help teach young females about the responsibilities of parenting and the life changes young mothers experience after giving birth. The program offers participants the opportunity to explore the physical, emotional, social, and financial consequences of parenthood.

**Helping Paws**

The Helping Paws program educates and trains females in the healthcare, grooming, and training of puppies that will be later used as service and companion dogs for the physically impaired. Additionally, the program seeks to develop patience, self-esteem, responsibility, and vocational skills in participants. To participate in the Helping Paws program, females must meet specific criteria including the approval of a counselor and casework supervisor. The program is capped at 12 participants, all of whom must be over the age of 16 with no history of abusive behavior involving children and animals.
II. TRENDS IN FEMALE AND MALE ADMISSIONS TO ILLINOIS YOUTH CENTERS

This section provides an overview of the trends in female and male new court admissions to Illinois Youth Centers from SFY 1993 to SFY 2002 and the demographic and offense characteristics of these juveniles. Female and male admission trends and characteristics were compared to identify those admission trends or characteristics unique to female juveniles during the time period analyzed.

This section answers three research questions. First, were there parallel trends in new court admissions for females and males during the time period analyzed? Second, were the characteristics of females and males admitted to Illinois Youth Centers similar? Third, have the characteristics of females and males admitted to Illinois Youth Centers changed from SFY 1993 to SFY 2002?

Method

The findings for this section of the report were based on a data extraction from the Illinois Department of Corrections’ Juvenile Tracking System for all juveniles newly committed to Illinois Youth Centers from SFY 1993 to SFY 2002. The Juvenile Tracking System is a computerized database maintained by the Illinois Department of Corrections that contains detailed information about youth admitted to Illinois Youth Centers, including demographic characteristics (e.g., sex, race, age), committing county, security level, education level, committing offense, and gang affiliation and administrative information such as sanctions received by youth, programming attended, and if and when youth are transported to different facilities. Although a vast amount of data is maintained through the Juvenile Tracking System,
this report focuses primarily on the demographic and offense characteristics of the youth newly committed to Illinois Youth Centers during the time period analyzed.

Sample

The data analyzed for this section of the report only include those juveniles who were new commitments to Illinois Youth Centers from SFY 1993 to SFY 2002. These data do not include juveniles admitted to Illinois Youth Centers for parole violations, although juveniles on parole may be considered new commitments if they commit a new offense, are tried and found guilty, and are subsequently recommitted to Illinois Youth Centers with a new sentence.

As indicated in section one, Illinois Youth Center—Warrenville, there are three general types of juveniles committed to the Department of Corrections: juveniles sentenced from adult criminal court, juveniles sentenced from juvenile court, and juveniles found delinquent in juvenile court and sent to the Department of Corrections for court evaluations (see section one for a more in-depth description). The data provided below reflect these three types of juveniles newly committed to Illinois Youth Centers.

Analysis

For this section of the report, two main analyses were conducted. First, percentages were used to identify the differences and similarities between the demographic and offense characteristics of female and male juveniles newly committed to Illinois Youth Centers. Second, trend analyses were used to examine changes over time in the rates or percentages studied.

To avoid relying exclusively on the visual inspection of figures or on calculating percent changes, a statistical process was adopted when examining trends. Although figures are a useful tool, it is possible for figures to visually display changes or differences that seem large, but are actually less important than they appear. It is also possible for figures to visually display changes
or differences that appear small, but are actually important. Additionally, calculating the percent change can be misleading, as changes in small numbers may result in a large percent change (e.g., a change from 5 to 10 is a 100 percent increase), while changes in large numbers may result in what appears to be a small percent change (e.g., a change from 900 to 1,000 is an 11 percent increase). The statistical process used relies heavily on statistics called confidence intervals, or upper and lower bounds. Appendix B explains what confidence intervals are, how they were calculated, and how they were used to examine the trends for this report.

**Trends in New Court Admissions**

From SFY 1993 through SFY 2002, 1,703 females and 16,540 males were admitted to Illinois Youth Centers. Figure 1 shows the female and male new court admission rates to Illinois Youth Centers. Caution should be taken when reviewing Figure 1 because the female rate was multiplied by six to provide better visual comparison between the female and male admission trends. From SFY 1993 to SFY 2002, the new court admission rates for females and males increased significantly. Although both rates increased, the female new court admissions rate increased at a much greater magnitude than the male rate (116.4 percent versus 22.9 percent, respectively). It is also notable that the female and male admission rates had slightly different trends during the last few years analyzed. From SFY 1993 to SFY 1999, the female and male new court admission rates followed somewhat similar patterns. There was a statistically significant increase in both rates from SFY 1993 to SFY 1997, but no statistically significant change from SFY 1997 to SFY 1999. Although the female admission rate continued to be relatively stable (the numeric decrease in SFY 2002 was not statistically significant), the male new court admission rate decreased significantly in SFY 2000 and has since remained at that lower level. The decrease in male new court admissions combined with a much greater increase
in female admissions than male admissions from SFY 1993 to SFY 2002 resulted in females accounting for a greater percentage of juveniles admitted to Illinois Youth Centers by SFY 2002 (Figure 2). In SFY 1993, females accounted for 6.4 percent of new court admissions (N=82 females), while in SFY 2002 females accounted for 10.7 percent of admissions (N=188 females).

**Figure 1**
Female and Male New Court Admission Rates to Illinois Youth Centers, SFY 1993 - 2002

*Note: a. The female rate was multiplied by 6 to provide better visual comparison.*

*Source: Illinois Department of Corrections; U.S. Census Bureau.*
Characteristics of Females and Males Admitted to Illinois Youth Centers

Females admitted to Illinois Youth Centers were comparable to their male counterparts in terms of age. The ages of females admitted to Illinois Youth Centers from SFY 1993 through SFY 2002 ranged from 13.0 to 19.6 years, with an average age of 15.8 years. The age range for males was 13.0 to 20.2 years, with an average age of 16.0 years.

Differences were found, however, in the reasons females and males were admitted to Illinois Youth Centers. As indicated previously, juveniles can be admitted to Illinois Youth Centers for various reasons, including court evaluations. Court evaluations are conducted by staff from the Illinois Department of Corrections and used to assess the mental health or treatment needs of juveniles adjudicated delinquent. The results from the court evaluations must be
reported to the juvenile courts within a 90-day time period.\textsuperscript{11} Based on the information provided in the court evaluations, juveniles can be sentenced to less restrictive options (e.g., probation), placed in residential treatment programs, or returned to the Illinois Department of Corrections to serve an indeterminate term in an Illinois Youth Center.\textsuperscript{12} Thus, juveniles admitted to Illinois Youth Centers for court evaluations differ from other juveniles admitted because these youth have not yet been sentenced to the Illinois Department of Corrections for an indeterminate term. Of those juveniles who were admitted to Illinois Youth Centers as new court admissions from SFY 1993 through SFY 2002, 34.2 percent of female and 21.6 percent of male admissions were for court evaluations.

Differences were also found in the racial and ethnic characteristics of females and males admitted to Illinois Youth Centers. Figure 3 shows the percent of female and male new court admissions to Illinois Youth Centers by race and ethnicity from SFY 1993 through SFY 2002. As Figure 3 illustrates, whites accounted for a much greater percentage of female than male admissions. From SFY 1993 through SFY 2002, 53.7 percent of females admitted were white and 38.9 percent were black, while 33.9 percent of males were white and 53.7 percent were black. Hispanics accounted for 7.0 percent of female and 11.8 percent of male admissions during this time period. Asian and American Indian juveniles, combined, accounted for less than 1 percent of admissions for both females and males.


The differences between the racial and ethnic characteristics of female and male juveniles admitted to Illinois Youth Centers were in part due to differences in the counties committing them. During the time period examined, a greater percentage of female than male delinquents were admitted from rural and urban counties (Figure 4; see Appendix A for a visual display of which counties are classified as rural, urban, and collar counties\textsuperscript{13}). In most of these counties, a large majority of the residents identify themselves as white, non-Hispanics.\textsuperscript{14} In contrast, Cook County, the largest and most racially and ethnically diverse county in Illinois and the location of

\textsuperscript{13} Collar counties are those counties adjacent to Cook County, and include DuPage, Kane, Lake, McHenry, and Will counties.

\textsuperscript{14} Based on data from the U.S. Census Bureau.
the City of Chicago, accounted for the largest percentage of males admitted to Illinois Youth Centers.  

**Figure 4**

Percent of New Court Admissions to Illinois Youth Centers by Committing County and Sex, SFY 1993 – 2002

Female and male delinquents committed to Illinois Youth Centers also differed in terms of the holding offense type. As Figure 5 indicates, a greater percentage of females than males were admitted for offenses against persons and property offenses, while a smaller percentage of females than males were admitted for drug or sex offenses.

15 The reasons for these differences are not clear. It is possible that these differences exist for several different reasons including discrepancies in how some juvenile justice professionals interpret female delinquent behaviors or the availability of programming for female delinquents in communities. Additional research, however, is needed to determine why these differences exist. See the Recommendation section of this report.

16 The categories used for this report are similar to those used by the Illinois Department of Corrections. According to the Illinois Department of Corrections, crimes against a person include “battery, robbery, armed violence weapon offenses, and those offenses which implied a high risk of personal injury.” For more information see Appendix B in Illinois Department of Corrections (1999). *Statistical Summary Presentation 1999*. Springfield, IL: State of Illinois, Illinois Department of Corrections.
Table 2 shows the 10 most frequent offenses for which females and males were admitted to Illinois Youth Centers, in order from the most to the least frequent offense. Although assaults and batteries accounted for the largest percentage of admissions for females and males, assaults and batteries accounted for a much greater percentage of female than male admissions (32.9 percent versus 14.1 percent, respectively). The information presented in Table 2 also suggests that females tended to be committed to the Illinois Youth Centers for either assaults and batteries and property crimes, while males were admitted for a larger range of crimes against persons (e.g., assaults and batteries, robbery, armed robbery), property offenses, and violations of the Controlled Substances Act.
Table 2
Top 10 Offenses for Which Females and Males Were Admitted to Illinois Youth Centers, SFY 1993–2002

<table>
<thead>
<tr>
<th>Offense</th>
<th>Female (N=1,598) Percent</th>
<th>Male (N=16,115) Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Assault/Battery</td>
<td>32.9 %</td>
<td>14.1 %</td>
</tr>
<tr>
<td>Theft</td>
<td>9.0 %</td>
<td>13.0 %</td>
</tr>
<tr>
<td>Residential Burglary</td>
<td>8.7 %</td>
<td>11.9 %</td>
</tr>
<tr>
<td>Criminal Damage to Property</td>
<td>7.1 %</td>
<td>9.7 %</td>
</tr>
<tr>
<td>Retail Theft</td>
<td>6.8 %</td>
<td>8.4 %</td>
</tr>
<tr>
<td>Motor Vehicle Theft</td>
<td>5.8 %</td>
<td>7.9 %</td>
</tr>
<tr>
<td>Burglary</td>
<td>5.0 %</td>
<td>5.6 %</td>
</tr>
<tr>
<td>Controlled Substance Violation</td>
<td>3.4 %</td>
<td>5.3 %</td>
</tr>
<tr>
<td>Forgery/Deception/Fraud</td>
<td>3.0 %</td>
<td>4.9 %</td>
</tr>
<tr>
<td>Bribery</td>
<td>2.9 %</td>
<td>4.6 %</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>84.6 %</strong></td>
<td><strong>85.5 %</strong></td>
</tr>
</tbody>
</table>

Source: Illinois Department of Corrections.

Given the differences in the offenses for which females and males were committed to Illinois Youth Centers, it is not surprising differences were also found in terms of offense class. From SFY 1993 through SFY 2002, a greater percentage of female than male new court admissions were for misdemeanors and Class 3 felonies, while a higher percentage of males than females were admitted for more serious felony offenses (e.g., Class X, Class 1, and Class 2 felonies; Table 3).
Table 3
Percent of Female and Male New Court Admissions to Illinois Youth Centers
by Offense Class, SFY 1993-2002

<table>
<thead>
<tr>
<th>Offense Class&lt;sup&gt;a&lt;/sup&gt;</th>
<th>Female (N=1,596)</th>
<th>Male (N=16,112)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Murder</td>
<td>0.8%</td>
<td>1.2%</td>
</tr>
<tr>
<td>Class X</td>
<td>4.4%</td>
<td>10.0%</td>
</tr>
<tr>
<td>Class 1</td>
<td>11.5%</td>
<td>17.7%</td>
</tr>
<tr>
<td>Class 2</td>
<td>15.0%</td>
<td>27.0%</td>
</tr>
<tr>
<td>Class 3</td>
<td>25.9%</td>
<td>13.9%</td>
</tr>
<tr>
<td>Class 4</td>
<td>8.1%</td>
<td>15.5%</td>
</tr>
<tr>
<td>Misdemeanor</td>
<td>34.5%</td>
<td>14.7%</td>
</tr>
<tr>
<td>Total</td>
<td>100%</td>
<td>100%</td>
</tr>
</tbody>
</table>

Note: <sup>a</sup> Murder, Class X, and Classes 1 through 4 are felony offenses.
Source: Illinois Department of Corrections.

Changes in the Characteristics of Females and Males Admitted to Illinois Youth Centers

From SFY 1993 through SFY 2002, there were no significant changes in the mean ages of female or male delinquents admitted to Illinois Youth Centers, nor were there significant changes in their racial or ethnic characteristics. There were, however, changes over time in the reasons for which juveniles were admitted (e.g., court evaluation). Figure 6 shows the percentage of admissions that were for court evaluations for females and males from SFY 1993 through SFY 2002. Although there was a numeric increase in the percentage of female admissions that were for court evaluations, this increase was not statistically significant when the percentage in SFY 1993 was compared to the percentage in SFY 2002. For males, there was a significant
increase in admissions for court evaluations; in SFY 1993, court evaluations accounted for 18.6 percent of male admissions, and by SFY 2002 this had increased to 27.7 percent.

**Figure 6**
Percent of Female and Male Admissions for Court Evaluations, SFY 1993 - 2002

The types of counties committing juveniles to Illinois Youth Centers also changed over time; however, these changes were again only significant for males. Although Figure 7 suggests that there were some numeric changes in the percentage of female admissions committed by the various county types examined, overall, these changes were not statistically significant when the percentages in SFY 1993 were compared to those in SFY 2002. For males, there was a statistically significant decrease in admissions from Cook County and a significant increase in admissions from rural counties (Figure 8).
Figure 7
Percent of Female Admissions Committed by County Type,
SFY 1993 - 2002

Source: Illinois Department of Corrections.

Figure 8
Percent of Male Admissions Committed by County Type,
SFY 1993 - 2002

Source: Illinois Department of Corrections.
Additionally, for females, the only significant change experienced in the offense type for which they were admitted was an increase in the percentage of admissions accounted for by drug offenses (Figure 9). In SFY 1993, no females were admitted to Illinois Youth Centers for drug offenses. By SFY 2002, this offense type accounted for 5.3 percent of all admissions. Males experienced two changes: a significant decrease in the percentage of offenses that were offenses against persons, and a small, albeit significant increase, in the percentage accounted for by drug offenses (Figure 10).

**Figure 9**

Percent of Female New Court Admissions by Person, Property, Drug, Sex, and Other Offenses, SFY 1993 – SFY 2002

Source: Illinois Department of Corrections.
Additionally, there were no significant changes over time in the offense classes for which females were admitted to Illinois Youth Centers. For males, however, there were significant decreases in the murder and Class X felony offenses and a significant increase in Class 4 felony offenses.

**Summary**

Based on the data examined it was found that the female new court admission rate to Illinois Youth Centers was much lower than the rate for males from SFY 1993 to SFY 2002. Although both rates increased overall when the rates in SFY 1993 were compared to those in SFY 2002, the female admission rate increased at a much greater magnitude than the male admission rate. Moreover, the female admission rate followed a slightly different trend; unlike
the male admission rate that decreased beginning in SFY 2000, the female admission rate has remained relatively stable since SFY 1997.

It was also found that the demographic and offense characteristics of females were different than males admitted to Illinois Youth Centers. A greater percentage of females than males were white, admitted for court evaluations, and committed from rural or urban counties. Moreover, a greater percentage of females than males were admitted for property and person offenses, assaults and batteries, and Class 3 felony and misdemeanor offenses.

Across the years analyzed, there was only one change in the demographic and offense characteristics of females admitted to Illinois Youth Centers from SFY 1993 to 2002: a slight increase in admissions for drug offenses (drug offenses accounted for no admissions in SFY 1993 and 10 admissions in SFY 2002). All other characteristics remained stable. However, there were several changes in the characteristics of males. A greater percentage of males were admitted for court evaluations in SFY 2002 than in SFY 1993. Additionally, there was a significant increase in the percentage of males committed by rural counties and a decrease in admissions from Cook County. There were also significant decreases in the percentage of male admissions that were for person, murder, and Class X felony offenses, but significant increases in admissions for drug and Class 4 felony offenses.
III. CHARACTERISTICS OF FEMALES COMMITTED TO THE ILLINOIS YOUTH CENTER—WARRENVILLE

This section offers a detailed profile of the backgrounds and needs of a sample of female delinquents committed to the Illinois Department of Corrections. These data include information on these females’ demographic characteristics, family information, physical and sexual abuse histories, academic backgrounds, mental and physical health histories, substance abuse histories, and criminal histories. Additionally, this section provides information on the mental health and substance abuse treatment services received by these females prior to their incarceration.

Method

The data analyzed for this section of the report were collected from three secondary data sources: (1) presentence social history reports submitted to the Department of Corrections; (2) the Juvenile Tracking System maintained by the Department of Corrections; and, (3) intake and administrative documents maintained in the paper files of female delinquents residing in the Illinois Youth Center—Warrenville.

Presentence social history reports are completed by the committing county’s juvenile probation department and submitted to judges at the sentencing hearing. Social history reports are only completed if the juvenile has been tried and found delinquent in juvenile court. Juveniles that are committed from adult criminal court may also have presentence reports submitted to the Department of Corrections, however, these reports tend to lack the detail of the social history reports from the juvenile court system. If a youth is sentenced to the Department of Corrections or if a youth is committed for a 90-day court evaluation from juvenile court, the social history report is submitted to the Department of Corrections within 60 days of a youth’s commitment. The social history reports may contain information about a youth’s prior drug and
alcohol abuse history, prior arrests, academic history, mental health history, medical and physical health history, and family information.

It is important to note the social history reports examined for this study were not consistent across counties. The social history reports completed by one county’s juvenile probation department may contain extensive information about a youth and her family, while another county’s juvenile probation department may develop social history reports containing a limited amount of information, usually focusing on past delinquent behaviors, probation violations, and the current offense(s). Moreover, social history reports from one county may contain more or less information depending on the individual probation officer completing the report. The lack of consistency between the social history reports is important to note because it affected our ability to draw strong conclusions from the data described below. For instance, does the absence of information about a youth’s drug use in the social history report indicate this youth has never used drugs in the past? The lack of such information may be due to three reasons (a) the probation officer was not aware this youth had used drugs in the past; (b) the probation officer knew the youth had used drugs in the past, but thought it was not important to include in the social history report (or, maybe, such information is never included in that county’s social history reports); and, (c) the youth never used drugs in the past, and therefore, such information was not included in the report. Because we were unable to determine why information was absent from social history reports (i.e., we could not verify which of the three reasons was the underlying cause), when information was not available we coded these as missing data. Thus, it is possible our percentages or numbers underreport the experiences of the female delinquents in our sample.\textsuperscript{17}

\textsuperscript{17} For instance, it is possible that more females in our sample were victims of sexual abuse than indicated in this report.
To supplement the information collected from the social history reports, we also collected data from the Juvenile Tracking System and from the females’ paper files maintained at the Illinois Youth Center—Warrenville. As indicated in the previous section, the Juvenile Tracking System is a computerized database maintained by the Department of Corrections that contains detailed information about youth admitted to Illinois Youth Centers, including demographic characteristics (e.g., sex, race, age), committing county, security level, education level, and committing offense, and administrative information such as sanctions received by youth, programming attended, and if and when youth are transported to different facilities. The females’ paper files, in addition to a copy of the social history reports submitted by the committing county, included intake information collected by staff at the Illinois Youth Center—Warrenville. The intake information is based on a combination of self-reported data and data taken from the social history files. Additionally, these files included several assessments completed by staff at the Illinois Youth Center of the females in our sample that appraised their mental health and substance abuse treatment needs. Table 4 lists the various types of information collected from these three data sources.
Table 4
Information Collected by Category

<table>
<thead>
<tr>
<th>Category</th>
<th>Information Collected</th>
</tr>
</thead>
<tbody>
<tr>
<td>Demographic and General Background</td>
<td>• Date Admitted</td>
</tr>
<tr>
<td></td>
<td>• Most Recent Admission Type (parole violator, new court commitment)</td>
</tr>
<tr>
<td></td>
<td>• Date of Last Social History&lt;sup&gt;a&lt;/sup&gt;</td>
</tr>
<tr>
<td></td>
<td>• Race/Ethnicity</td>
</tr>
<tr>
<td></td>
<td>• Birth date</td>
</tr>
<tr>
<td></td>
<td>• Citizenship</td>
</tr>
<tr>
<td></td>
<td>• Committing County</td>
</tr>
<tr>
<td></td>
<td>• Primary Language Spoken</td>
</tr>
<tr>
<td></td>
<td>• DCFS Ward</td>
</tr>
<tr>
<td></td>
<td>• DCFS Involvement</td>
</tr>
<tr>
<td></td>
<td>• Religious Affiliation</td>
</tr>
<tr>
<td></td>
<td>• Living w/ Prior to Incarceration</td>
</tr>
<tr>
<td></td>
<td>• Type of Attorney (Public defender, Private)</td>
</tr>
<tr>
<td></td>
<td>• Gang Affiliation/Membership</td>
</tr>
<tr>
<td></td>
<td>• Parenting/Pregnant</td>
</tr>
<tr>
<td>Family Information</td>
<td><strong>Parents/Guardians</strong></td>
</tr>
<tr>
<td></td>
<td>• Age</td>
</tr>
<tr>
<td></td>
<td>• Living/Dead</td>
</tr>
<tr>
<td></td>
<td>• Criminal History</td>
</tr>
<tr>
<td></td>
<td>• Prior Incarceration</td>
</tr>
<tr>
<td></td>
<td>• Mental Health History</td>
</tr>
<tr>
<td></td>
<td>• Physical Health Problem</td>
</tr>
<tr>
<td></td>
<td>• Substance Abuse Histories</td>
</tr>
<tr>
<td></td>
<td><strong>Siblings</strong></td>
</tr>
<tr>
<td></td>
<td>• Age</td>
</tr>
<tr>
<td></td>
<td>• Living/Dead</td>
</tr>
<tr>
<td></td>
<td>• Criminal History</td>
</tr>
<tr>
<td></td>
<td>• Prior Incarceration</td>
</tr>
<tr>
<td></td>
<td>• Mental Health History</td>
</tr>
<tr>
<td></td>
<td>• Physical Health Problem</td>
</tr>
<tr>
<td></td>
<td>• Substance Abuse Histories</td>
</tr>
<tr>
<td></td>
<td>• Physical or Sexual Abuse Histories</td>
</tr>
<tr>
<td>Physical, Emotional, Verbal, and Sexual</td>
<td><strong>Date(s) of Incident (or age(s) at incident)</strong></td>
</tr>
<tr>
<td>Abuse Histories (includes physical</td>
<td><strong>Description of Incident</strong></td>
</tr>
<tr>
<td>neglect)</td>
<td><strong>Was the Incident Reported to Police/DCFS</strong></td>
</tr>
<tr>
<td></td>
<td><strong>Was the Incident Indicated as Abuse by DCFS</strong></td>
</tr>
<tr>
<td></td>
<td><strong>Offender(s) Age</strong></td>
</tr>
<tr>
<td></td>
<td><strong>Victim/Offender(s) Relationship(s)</strong></td>
</tr>
<tr>
<td>Category</td>
<td>Information Collected</td>
</tr>
<tr>
<td>--------------------------------</td>
<td>----------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td><strong>Academic Background</strong></td>
<td>• Last Grade Attended&lt;br&gt;• Last Grade Completed&lt;br&gt;• Grade(s) or Grade Point Average&lt;br&gt;• Special Education Attended&lt;br&gt;• Graduated from High School/ Received GED&lt;br&gt;• Dropped Out of School (date and reason)&lt;br&gt;• Truancy, Suspension, and Expulsion Histories (including dates and reasons for the suspensions and expulsions)</td>
</tr>
<tr>
<td><strong>Mental and Physical Health</strong></td>
<td>• Prior Sexual Activity (date at first experience)&lt;br&gt;• History of Sexually Transmitted Diseases (date and type of STD)&lt;br&gt;• Mental Health Diagnosis (date of diagnosis, diagnosis)&lt;br&gt;• Hospitalization for Mental Health Issues (date, length of stay, reason for hospitalization)&lt;br&gt;• Physical Illnesses or Aliments (date of diagnosis, type of illness/aliment)&lt;br&gt;• Hospitalization for Physical Health Reasons (date, length of stay, reason for hospitalization)&lt;br&gt;• Medications Taken and Reasons for Medication</td>
</tr>
<tr>
<td><strong>Substance Abuse History</strong></td>
<td>• Date of First Use (age at first use)&lt;br&gt;• Type(s) of Drug Used</td>
</tr>
<tr>
<td><strong>Criminal History</strong></td>
<td>• Committing Offense(s)&lt;br&gt;• Previous Contacts with Police (date, reason)&lt;br&gt;• Runaway History&lt;br&gt;• Prior Arrest(s) (date, reason, victim information)&lt;br&gt;• Result of Arrest (e.g., conviction, sentence, etc.)&lt;br&gt;• Prior Detainment (date, reason, length of stay)&lt;br&gt;• Prior Incarceration (date, reason, length of stay)</td>
</tr>
<tr>
<td><strong>Mental Health and Substance Abuse Treatment History</strong></td>
<td>• Date of Treatment&lt;br&gt;• Type of Treatment (e.g., in-patient/out-patient)&lt;br&gt;• Reason for Treatment&lt;br&gt;• Whether Treatment was Successfully Completed</td>
</tr>
</tbody>
</table>

*Note. a. Some files contained several social history reports.*
Sample

The information provided in this section is based on the characteristics, backgrounds, and experiences of 154 female delinquents residing in, or committed to, the Illinois Youth Center—Warrenville during a three-month data collection period in the fall of 2002. The sample includes females who returned to secure custody with the Department of Corrections for parole violations; females committed for 90-day court evaluations;18 females who were convicted and sentenced in juvenile court and were serving their sentences in the Illinois Youth Center—Warrenville; and females who were sentenced to the Department of Corrections from adult criminal court and were still residing at the Illinois Youth Center—Warrenville at the time when these data were collected.

Readers should understand the information provided in this report reflect the demographic and background characteristics and experiences of this particular sample. It therefore cannot be assumed these data reflect all female juvenile delinquents in Illinois, as juveniles committed to the Department of Corrections represent a specific type of female delinquent (after all, few female juveniles are referred to court, and even fewer are ultimately committed to the Department of Corrections).19 Finally, these data should not be used to make generalizations about all female delinquents committed to the Department of Corrections.

Analysis

Basic descriptive statistics, such as percentages and averages, were used to create a profile of the types of females committed to the Juvenile Division of the Department of Corrections.18 Juveniles tried and found guilty in juvenile court may also be committed to the Illinois Department of Corrections for court evaluations. Court evaluations are used to assess the needs of juveniles found guilty in juvenile court. The results from the evaluations are reported to the juvenile court within a 90-day time period. Based on the court evaluations, juveniles can be released (e.g., a minor may be sentenced to probation instead) or returned to an Illinois Youth Center to serve indeterminate terms.

Corrections. It should be noted the analyses used for this report limit how these data can be used. For instance, one cannot infer the demographic and background characteristics or the experiences had by these particular females are the reasons why they were ultimately committed to the Department of Corrections. In other words, the purpose of this study was to describe who these female are, not predict or explain why they became delinquent.

**Demographic and General Background Characteristics**

Table 5 presents the demographic and general background characteristics of our sample. As Table 5 indicates, 44.8 percent of the females in our sample were white and 44.8 percent were black. It should be noted that these characteristics are slightly different than the overall characteristics of females newly committed to the Department of Corrections in SFY 2002 (56.4 percent were white and 38.3 percent were black). A greater percentage of the females in our sample are black. This difference is likely due to sampling error.\(^\text{20}\)

A majority of the females in our sample were juveniles tried, found delinquent, and subsequently sentenced to the Department of Corrections from juvenile court. Few had been sentenced to the Department of Corrections from adult criminal court. Moreover, the majority of the females in our sample were currently serving their original sentences. Only 22.1 percent were residing in the Illinois Youth Center—Warrenville for violating their parole orders.

As indicated in the previous section, most females committed to the Department of Corrections were committed from urban or rural areas. This was true with our sample, with most females being committed from urban or rural counties (see Appendix A for a map of Illinois by county type and the location of the facilities that house female delinquents). Additionally, about

\(^{20}\) For instance, it is probable that our sample includes a higher percentage of black females because it just happened that there were more black females residing in the Illinois Youth Center—Warrenville at the time of the study. Data on the percentages of newly committed females to the Department of Corrections for SFY 2002 supports this hypothesis.
half of our sample were committed from counties in central Illinois (see Appendix C for a map of Illinois counties by northern, central, and southern regions).

Forty-four percent of the females had been identified as previously involved with the Department of Children and Family Services, the state’s child welfare agency. Involvement was defined as having any case opened or investigation initiated. For instance, if a youth’s social history report indicated her parents had been under investigation for neglect or some type of abuse, this was recorded as having been involved with the Department of Children and Family Services. Additionally, 16.2 percent were identified as being wards of the Department of Children and Family Services. Wards were defined as minors whose social history reports specifically stated youth were wards of the state or the parents had lost all parental rights. The most frequent reason these youth were wards of the Department of Children and Family Services was physical and/or sexual abuse or neglect indicated in the home. Other reasons include parents relinquishing their rights due to the youth’s delinquent behavior or being unable or willing to care for the youth, death of a parent, and parents being unable to care for the minor due to their own mental or physical illness.

Over three-quarters of these females were living with either a biological parent or relative prior to their commitment to the Department of Corrections, with the largest percentage of these females living with only their mother. Almost 20 percent had been living in some type of placement through the Department of Children and Family Services, such as foster homes and residential care facilities.
Over three-quarters of the females in the sample were identified as being sexually active.\(^{21}\) Eleven percent were identified as having been treated for a sexually transmitted disease,\(^{22}\) and 13.0 percent had reportedly miscarried during a pregnancy at some point in their lifetime. Eighteen percent had at least one child prior to their last commitment to the Department of Corrections. The majority had children that were infants or toddlers (i.e., aged 1 to 3 years old) at the time of their commitment to the Department of Corrections. Almost 8 percent of the females in our sample were reportedly pregnant when they were committed to the Department of Corrections. Some of these females eventually gave birth to their children while serving their sentences.

Table 5
Characteristics of Females Residing in or Admitted to Illinois Youth Center—Warrenville

<table>
<thead>
<tr>
<th>Characteristic</th>
<th>Percent/Average</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age</td>
<td>Range: 13-19 years; Average: 15.7 years</td>
</tr>
<tr>
<td>Race</td>
<td></td>
</tr>
<tr>
<td>White</td>
<td>44.8 %</td>
</tr>
<tr>
<td>Black</td>
<td>44.8 %</td>
</tr>
<tr>
<td>Hispanic</td>
<td>7.1 %</td>
</tr>
<tr>
<td>Other</td>
<td>3.2 %</td>
</tr>
<tr>
<td>Admission Type</td>
<td></td>
</tr>
<tr>
<td>Court Evaluation</td>
<td>16.9 %</td>
</tr>
<tr>
<td>Sentenced from Juvenile Court</td>
<td>79.2 %</td>
</tr>
<tr>
<td>Sentenced from Adult Criminal Court</td>
<td>3.9 %</td>
</tr>
<tr>
<td>Parole Violator</td>
<td>22.1 %</td>
</tr>
</tbody>
</table>

\(^{21}\) This figure is slightly lower than that reported in other studies using self-report data. For more information, see Morris, R., Harrison, E., Knox, G., Tromanhauser, E., Marquis, K., Watts, L. (1995). *Health risk behavioral survey from 39 juvenile correctional facilities in the United States. Journal of Adolescent Health, 17*, 334-344.

\(^{22}\) This percentage is much lower than that reported by other researchers, who, based on data collected from the medical files of youth residing in correctional facilities in the United States, found that 44 percent of the females had reported being diagnosed with a sexually transmitted disease in the past. See Canterbury, et al. (1995). *Prevalence of HIV-related risk behaviors and STDs among incarcerated adolescents. Journal of Adolescent Health, 17*, 173-177.
Table 5
Characteristics of Females Residing in or Admitted to Illinois Youth Center—Warrenville (continued)

<table>
<thead>
<tr>
<th>Characteristic</th>
<th>Percent/Average</th>
</tr>
</thead>
<tbody>
<tr>
<td>Committing County</td>
<td></td>
</tr>
<tr>
<td>Cook County</td>
<td>16.2 %</td>
</tr>
<tr>
<td>Collar Counties</td>
<td>12.3 %</td>
</tr>
<tr>
<td>Urban Counties</td>
<td>47.4 %</td>
</tr>
<tr>
<td>Rural Counties</td>
<td>24.0 %</td>
</tr>
<tr>
<td>County Region</td>
<td></td>
</tr>
<tr>
<td>Northern Illinois</td>
<td>35.7 %</td>
</tr>
<tr>
<td>Central Illinois</td>
<td>50.6 %</td>
</tr>
<tr>
<td>Southern Illinois</td>
<td>13.6 %</td>
</tr>
<tr>
<td>DCFS Involved</td>
<td>44.2 %</td>
</tr>
<tr>
<td>DCFS Ward</td>
<td>16.2 %</td>
</tr>
<tr>
<td>Living with Prior to Incarceration</td>
<td></td>
</tr>
<tr>
<td>Mother Only</td>
<td>40.9 %</td>
</tr>
<tr>
<td>DCFS Placement</td>
<td>19.5 %</td>
</tr>
<tr>
<td>Other Relative</td>
<td>16.2 %</td>
</tr>
<tr>
<td>Both Biological Parents</td>
<td>10.4 %</td>
</tr>
<tr>
<td>Father Only</td>
<td>8.4 %</td>
</tr>
<tr>
<td>Other</td>
<td>4.5 %</td>
</tr>
<tr>
<td>Sexually Active</td>
<td>76.6 %</td>
</tr>
<tr>
<td>Sexually Transmitted Disease</td>
<td>11.0 %</td>
</tr>
<tr>
<td>Miscarriage During Pregnancy</td>
<td>13.0 %</td>
</tr>
<tr>
<td>One or More Children</td>
<td>17.5 %</td>
</tr>
<tr>
<td>Pregnant at Admission</td>
<td>7.8 %</td>
</tr>
</tbody>
</table>

Note. N=154. May not equal 100% due to rounding.
Family Background

Information about the characteristics and backgrounds of the biological mothers and fathers of these females was sparse. Although the social history reports from some counties provided detailed information about the biological mothers and fathers’ criminal histories, prior incarcerations, and substance abuse histories, this was the exception rather than the rule. Therefore, what is known about the characteristics of these females’ biological parents is limited. Table 6 presents those data that were available.

Table 6
Mother and Father Characteristics and Backgrounds

<table>
<thead>
<tr>
<th>Characteristic</th>
<th>Mother</th>
<th>Father</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alive</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Yes</td>
<td>86.4 %</td>
<td>66.9 %</td>
</tr>
<tr>
<td>No</td>
<td>7.1 %</td>
<td>6.5 %</td>
</tr>
<tr>
<td>Not Reported/Unknown</td>
<td>6.5 %</td>
<td>26.6 %</td>
</tr>
<tr>
<td>Total</td>
<td>100 %</td>
<td>100 %</td>
</tr>
<tr>
<td>Criminal history</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Yes</td>
<td>32.5 %</td>
<td>33.1 %</td>
</tr>
<tr>
<td>No</td>
<td>12.3 %</td>
<td>9.7 %</td>
</tr>
<tr>
<td>Not Reported/Unknown</td>
<td>55.2 %</td>
<td>57.1 %</td>
</tr>
<tr>
<td>Total</td>
<td>100 %</td>
<td>100 %</td>
</tr>
<tr>
<td>Prior incarceration (jail or prison)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Yes</td>
<td>18.8 %</td>
<td>23.4 %</td>
</tr>
<tr>
<td>No</td>
<td>16.2 %</td>
<td>11.7 %</td>
</tr>
<tr>
<td>Not Reported /Unknown</td>
<td>64.9 %</td>
<td>64.9 %</td>
</tr>
<tr>
<td>Total</td>
<td>100 %</td>
<td>100 %</td>
</tr>
<tr>
<td>Used Alcohol or Drugs in Past</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Yes</td>
<td>34.4 %</td>
<td>28.6 %</td>
</tr>
<tr>
<td>No</td>
<td>12.3 %</td>
<td>6.5 %</td>
</tr>
<tr>
<td>Not Reported /Unknown</td>
<td>53.2 %</td>
<td>64.9 %</td>
</tr>
<tr>
<td>Total</td>
<td>100 %</td>
<td>100 %</td>
</tr>
</tbody>
</table>

Note. N=154. May not equal 100% due to rounding.
As indicated in Table 6, a majority of the youth in our sample had mothers who were alive. There were, however, several females who had already lost their mothers either due to some type of terminal disease (e.g., cancer), violence in the home, or some other unknown cause (i.e., the social history reports did not specify the cause). Additionally, 66.9 percent of the females in our sample had fathers that were alive at the time of the last social history report. As Table 6 shows, data on these females’ fathers were less frequently available than that for mothers. This was due to a lower percentage of these youth having recent contact with their biological fathers prior to their incarceration as compared to their biological mothers. As indicated above, a much greater percentage of females in our study were living with their mothers prior to their incarceration or last arrest than with both biological parents or only their fathers. In some instances, the youth in our sample had never met their fathers, or their fathers’ whereabouts were unknown at the time of the last social history report.

Less information was available on the mothers and fathers’ criminal history backgrounds, prior incarcerations, and substance use—for over half of the females in our sample, there is little or no information (Table 6). Despite this limitation, we were able to collect criminal history information for some of the females’ parents. As Table 6 indicates, about one-third of the females’ files indicated their mothers and/or fathers had criminal histories, and nearly 19 percent of the mothers and 23 percent of the fathers had been previously incarcerated in jail or prison. Additionally, almost one-third of these youths’ mothers and fathers had reportedly used either alcohol and/or drugs in the past. Although the social history reports did not necessarily specify if the mothers and fathers had substance abuse problems that warranted treatment, several of these parents had reportedly used illicit substances either alone or in combination with alcohol
The most frequent types of illicit drugs reportedly used by these individuals were marijuana, crack cocaine, and heroin.

**Physical, Emotional, Verbal, and Sexual Abuse Histories**

Table 7 shows the percentage of females in our sample who reportedly had been physically, emotionally, verbally, and sexually abused. As Table 7 indicates, over half of the females in our sample had reportedly experienced physical and/or sexual abuse in their lifetime. Of these youth, 43.3 percent had experienced physical, emotional, and verbal abuse or neglect and sexual abuse, 31.1 percent had experienced only sexual abuse, and 25.6 percent had experienced only physical, emotional, and verbal abuse or neglect.

As shown in Table 7, 40.3 percent of our total sample reported some type of physical, emotional, or verbal abuse in their lifetime. Of those females who were reportedly victims of physical, emotional, and/or verbal abuse, over one-third reported being victimized by more than one offender. For the 62 females recognized as being victims of such abuse, 75 separate offenders were identified. Of these 75 offenders, nearly all were individuals these females knew (e.g., parents, relatives, boyfriends, and mothers’ boyfriends), the highest percentage of which was parents, stepparents, and relatives. Readers should also note the percentage of females that identified their boyfriends as their abusers—nearly 11 percent reported being engaged in intimate relationships involving some type of physical, emotional, and/or verbal abuse.

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23 This includes physical neglect.

24 This percentage was much lower than that reported by Acoca and Dedel (1998); 92 percent of the female delinquents interviewed reported physical, emotional, and/or sexual abuse. This may be due to the differences in how these data were collected. See Acoca, L. (1999). Investing in girls: A 21st century strategy. *Juvenile Justice, 6* (1), 3-13. Additionally, a study conducted for the Florida Department of Juvenile Justice also found higher percentages than those reported here, with 70 percent of the females interviewed reporting physical or sexual abuse. See Florida Department of Juvenile Justice (2001). *2001 outcome evaluation report*. State of Florida, Florida Department of Justice.
Forty-four percent of the females in our sample were reportedly sexually abused or assaulted at some point in their lifetime.\textsuperscript{25} Of those females who reported being sexually abused or assaulted, nearly one-third were victimized by more than one offender. Females sexually victimized by more than one offender may have been victimized once in their lifetime by more than one offender (e.g., gang raped) or victimized by several offenders at multiple points in their lifetime. For the 67 females identified as being sexually victimized in the past, 83 different offenders were identified. Of these offenders, almost three-quarters were individuals these females knew, with family members or parental figures (e.g., stepparents) accounting for over 40 percent of the alleged sexual abuse incidents. In over one-fourth of the instances documented there was not enough information available to determine the relationship between a female and her offender. It is possible that in some of these cases the females knew the alleged offenders.

Although researchers attempted to collect information about whether the alleged incidents of abuse were reported to either the police or the Department of Children and Family Services and the outcomes of these cases (e.g., were offenders arrested or did the Department of Children and Family Services indicate that the alleged abuse occurred), in many instances such information was not available. For instance, the incidents were mentioned in the social history reports or in the intake forms, but no reference had been made indicating if the incident had been reported to the authorities. What is known is that 63.9 percent of the cases of physical, verbal, emotional abuse or physical neglect identified had been reported to either the police or the Department of Corrections (n=62), and 66.7 percent of the incidents involving sexual abuse or sexual assault were reported (n=67).

\textsuperscript{25} Morris et al. (1995) reported similar findings, with 45.6% of the incarcerated females (i.e., those females detained in detention or correctional facilities) reporting sexual abuse in the past. See Morris, et al. (1995). \textit{Health risk behavioral survey from 39 juvenile correctional facilities in the United States. Journal of Adolescent Health, 17}, 334-344.
Less information was available indicating if those incidents that were reported were subsequently indicated by the Department of Children and Family Services as being abuse or if there was an offender consequently arrested by the police. Of the 39 cases of physical, verbal, emotional abuse or physical neglect reported, 29 were identified as being indicated as abuse by the Department of Children and Family Services. Nineteen of the 44 sexual abuse or assault cases reported were indicated as abuse by the Department of Children and Family Services or resulting in arrest and/or conviction of the offenders. It is unknown how many, or why some cases were not substantiated.

### Table 7
Physical, Emotional, Verbal, and Sexual Abuse

<table>
<thead>
<tr>
<th>Characteristic</th>
<th>Percent/Average</th>
</tr>
</thead>
<tbody>
<tr>
<td>Physical and/or Sexual Abuse (N=154)</td>
<td>58.4 %</td>
</tr>
<tr>
<td>Physical, Emotional, and Verbal Abuse (N=154)</td>
<td>40.3 %</td>
</tr>
<tr>
<td>Age at First Abuse</td>
<td>Range: Infants – 18 years old; Average: 8.6 years</td>
</tr>
<tr>
<td>Number of Offenders (n=62)</td>
<td></td>
</tr>
<tr>
<td>One Offenders</td>
<td>62.9 %</td>
</tr>
<tr>
<td>Two or More Offenders</td>
<td>37.1 %</td>
</tr>
<tr>
<td>Total</td>
<td>100 %</td>
</tr>
<tr>
<td>Relationship to Offender</td>
<td></td>
</tr>
<tr>
<td>Father, Mother, Stepfather/mother</td>
<td>61.3 %</td>
</tr>
<tr>
<td>Other Relative</td>
<td>17.3 %</td>
</tr>
<tr>
<td>Boyfriend</td>
<td>10.7 %</td>
</tr>
<tr>
<td>Mother’s Boyfriend</td>
<td>8.0 %</td>
</tr>
<tr>
<td>Otherc</td>
<td>2.7 %</td>
</tr>
<tr>
<td>Total</td>
<td>100 %</td>
</tr>
<tr>
<td>Sexual Abuse (N=154)</td>
<td></td>
</tr>
<tr>
<td>Age at First Abuse</td>
<td>Range: 1 – 16 years old; Average: 9.4 years</td>
</tr>
</tbody>
</table>
Table 7
Physical, Emotional, Verbal, and Sexual Abuse
(continued)

<table>
<thead>
<tr>
<th>Characteristic</th>
<th>Percent/Average</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Number of Offenders (n=67)</strong></td>
<td></td>
</tr>
<tr>
<td>One Offenders</td>
<td>70.1 %</td>
</tr>
<tr>
<td>Two or More Offenders</td>
<td>29.9 %</td>
</tr>
<tr>
<td>Total</td>
<td>100 %</td>
</tr>
<tr>
<td><strong>Relationship to Offender</strong></td>
<td></td>
</tr>
<tr>
<td>Father/Stepfather/Mother</td>
<td>20.5 %</td>
</tr>
<tr>
<td>Mother’s Boyfriend</td>
<td>15.7 %</td>
</tr>
<tr>
<td>Brother</td>
<td>7.2 %</td>
</tr>
<tr>
<td>Other Relative</td>
<td>13.3 %</td>
</tr>
<tr>
<td>Other Acquaintance</td>
<td>15.7 %</td>
</tr>
<tr>
<td>Other/Unknown</td>
<td>27.7 %</td>
</tr>
<tr>
<td>Total</td>
<td>100 %</td>
</tr>
</tbody>
</table>

Note. N=154. a. Includes physical neglect. b. Of the 62 females who reportedly were physical, emotional, verbal abused and/or physical neglected, 75 different offenders were identified. c. Includes foster parents. d. Of the 67 females who were reportedly sexually abused, 83 different offenders were identified.

**Academic Backgrounds**

Table 8 shows the academic background for those females for whom information was available. Most of the females in our sample entered the Illinois Youth Center—Warrenville having completed some middle school (6th-8th) or early high school (9th-10th). Few had earned their high school diplomas or GED. This is not surprising given that the average age at the time of admission was 15.7 years. Almost one-quarter of the females had taken special education classes, and nearly 20 percent were identified as having been placed in a behavior disorder classroom. Several of the females had been truant from school and/or suspended at least once, and 9.7 percent had been expelled. Finally, almost one-quarter had reportedly dropped out of school or had been dropped from the schools’ student rosters due to non-attendance.
Table 8
Academic Background

<table>
<thead>
<tr>
<th>Characteristic</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Last Grade Completed</td>
<td></td>
</tr>
<tr>
<td>5th – 6th grade</td>
<td>3.2 %</td>
</tr>
<tr>
<td>7th – 8th grade</td>
<td>51.9 %</td>
</tr>
<tr>
<td>9th – 10th grade</td>
<td>36.4 %</td>
</tr>
<tr>
<td>11th – 12th grade</td>
<td>5.8 %</td>
</tr>
<tr>
<td>Unknown</td>
<td>2.6 %</td>
</tr>
<tr>
<td>Earned GED or High School Diploma</td>
<td>4.5 %</td>
</tr>
<tr>
<td>Attended Special Education Classes</td>
<td>22.7 %</td>
</tr>
<tr>
<td>Attended Behavior Disorder Classrooms</td>
<td>19.5 %</td>
</tr>
<tr>
<td>Truant</td>
<td>69.5 %</td>
</tr>
<tr>
<td>Suspended At Least Once</td>
<td>44.8 %</td>
</tr>
<tr>
<td>Expelled At Least Once</td>
<td>9.7 %</td>
</tr>
<tr>
<td>Dropped Out of School or Dropped From School</td>
<td>21.4 %</td>
</tr>
</tbody>
</table>

Note. N=154.

Mental and Physical Health Histories

Table 9 presents some information regarding the females’ mental health histories. As Table 9 indicates, a large percentage had been previously diagnosed with a mental health disorder or problem. Over three-fourths of the females diagnosed with a mental health disorder or problem had been identified as having two or more diagnoses (78.3 percent). For instance, one female may have been diagnosed with conduct disorder, depression, and bipolar disorder. On average, the females diagnosed had three mental health disorders or problems identified in their lifetime. The most common diagnoses were conduct disorder, depression, oppositional defiant disorder, attention deficit/hyperactivity disorder, and bipolar disorder.
<table>
<thead>
<tr>
<th>Characteristic</th>
<th>Percent/Frequency</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mental Health Diagnosis</td>
<td>71.4 %</td>
</tr>
<tr>
<td><strong>Top 10 Diagnoses</strong>a</td>
<td></td>
</tr>
<tr>
<td>Conduct Disorder</td>
<td>41</td>
</tr>
<tr>
<td>Depression</td>
<td>33</td>
</tr>
<tr>
<td>Oppositional Defiant Disorder</td>
<td>32</td>
</tr>
<tr>
<td>Attention Deficit/Hyperactivity Disorder</td>
<td>31</td>
</tr>
<tr>
<td>Bipolar</td>
<td>24</td>
</tr>
<tr>
<td>Major Depressive Disorder</td>
<td>19</td>
</tr>
<tr>
<td>Posttraumatic Stress Disorder</td>
<td>14</td>
</tr>
<tr>
<td>Homicidal Ideation</td>
<td>12</td>
</tr>
<tr>
<td>Attention Deficit Disorder</td>
<td>8</td>
</tr>
<tr>
<td>Borderline Personality Disorder</td>
<td>8</td>
</tr>
<tr>
<td>Suicidal Ideation</td>
<td>38.3 %</td>
</tr>
<tr>
<td>Suicidal Attempt</td>
<td>26.6 %</td>
</tr>
<tr>
<td>Hospitalized in Psychiatric Unit</td>
<td>28.6 %</td>
</tr>
<tr>
<td>Medicated in Past</td>
<td>61.7 %</td>
</tr>
<tr>
<td><strong>Top Ten Medications Prescribed</strong>b</td>
<td></td>
</tr>
<tr>
<td>Depakote</td>
<td>21</td>
</tr>
<tr>
<td>Paxil</td>
<td>20</td>
</tr>
<tr>
<td>Zoloft</td>
<td>19</td>
</tr>
<tr>
<td>Risperdal</td>
<td>17</td>
</tr>
<tr>
<td>Ritalin</td>
<td>10</td>
</tr>
<tr>
<td>Adderall</td>
<td>10</td>
</tr>
<tr>
<td>Welbutrin</td>
<td>9</td>
</tr>
<tr>
<td>Seroquel</td>
<td>9</td>
</tr>
<tr>
<td>Prozac</td>
<td>9</td>
</tr>
<tr>
<td>Trazodone</td>
<td>8</td>
</tr>
</tbody>
</table>

Note. N=154. a. One youth may be counted more than once in these frequencies if she had been identified as having more than one mental health disorder or problem (e.g., conduct disorder and depression). b. One youth may be counted more than once in these frequencies if she had been identified as having been than one type of medication had been prescribed in the past.
Over one-third had reported having suicidal thoughts in the past and over one-quarter had attempted suicide at least once in their lifetime. Additionally, almost 29 percent had been previously hospitalized in a psychiatric unit at least once in their lifetime. The most frequently cited reasons for hospitalization were suicidal thoughts, suicidal attempts, or severe depression. Finally, well over half of the females had been prescribed medication for some type of mental health problem in the past. Of the top 10 medications prescribed to these youth, six were identified by research staff as being typically used to treat depression (Paxil, Zoloft, Risperdal, Adderall, Welbutrin, Prozac, and Trazodone).

As indicated in past research, sexual, physical and emotional victimization can lead to several other negative outcomes for female victims, including posttraumatic stress disorder (PTSD), depression, anxiety, alcohol and substance abuse, and problems developing and maintaining relationships with others. Almost 63 percent of the females diagnosed with a mental health disorder or problem, and 74.6 percent of the females who had reported suicidal thoughts or attempts, had experienced physical and/or sexual abuse in their lifetime.

In terms of mental health treatment, 62.3 percent of the youth in our sample had previously been engaged in some type of mental health treatment. The types of treatment received included individual counseling, family counseling, group therapy, and in-patient and out-patient mental health services. Medication was frequently prescribed as part of the mental health treatment these youth received.

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Many females also had physical health problems prior to their incarceration; 28.6 percent were identified as having health problems in the past. The most common health related problem was asthma—36.4 percent of the females identified as having health problems were asthmatic. Other types of ailments identified included chronic headaches, ulcers, ovarian cysts, and seizures. Moreover, 11.0 percent had been hospitalized in the past for physical ailments. Reasons for hospitalization included surgery, injuries related to victimization (e.g., sexual abuse), and overdosing on drugs and alcohol.

**Substance Abuse Histories**

Table 10 shows the substance use history for the females in our sample. As Table 10 indicates, a majority of the females had reported using alcohol and/or drugs at some point in their lifetimes. The most frequently reported drug used was marijuana. Although data were not available in terms of how frequently these youth used alcohol or drugs (i.e., if these youth were alcohol or drug dependent or recreational users), we do know the age at first use for most of the females identified as having used these substances. For alcohol and marijuana, the average age at first use was 12 years. For the remaining substances listed in Table 10, the average age at first use was 14 years.

Based on the social history files, 49.4 percent of the females in our sample had previously received some type of substance abuse treatment in the past. The types of treatment identified include substance abuse education, in-patient and out-patient substance abuse treatment, and Alcoholic or Narcotics Anonymous.
Table 10
Substance Abuse History

<table>
<thead>
<tr>
<th>Characteristic</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alcohol and/or Drug Abuse History</td>
<td>93.5 %</td>
</tr>
<tr>
<td>Alcohol</td>
<td>81.8 %</td>
</tr>
<tr>
<td>Marijuana</td>
<td>86.4 %</td>
</tr>
<tr>
<td>Cocaine (powder &amp; crack)</td>
<td>19.5 %</td>
</tr>
<tr>
<td>Club drugs (e.g., ecstasy, GHB)</td>
<td>11.0 %</td>
</tr>
<tr>
<td>Hallucinogens</td>
<td>7.8 %</td>
</tr>
<tr>
<td>Methamphetamine</td>
<td>6.5 %</td>
</tr>
<tr>
<td>Heroin</td>
<td>5.0 %</td>
</tr>
<tr>
<td>Other</td>
<td>11.0%</td>
</tr>
</tbody>
</table>

Note. N=154.

Criminal Histories

Table 11 provides the arrest history for the females in our sample. According to the social history files, these females had an average of five arrests prior to incarceration. These arrests exclude those for status offenses.28 These arrests were for a combination of violent (e.g., assaults/battery, robbery, murder) and non-violent offenses (retail theft, motor vehicle theft, burglary). Additionally, 13.6 percent had been arrested at least once in their lifetime for a drug offense (e.g., violation of the Controlled Substances Act, Cannabis Control Act, etc.), and a small handful had been arrested on a weapons offense. Many of these females had also been

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28 A status offense is a crime that is not considered an offense if committed by an adult. Types of status offenses include underage drinking, truancy, curfew violation, and running away. When arrests for status offenses were included, the average number of arrests increased to seven.
arrested for at least one status offense, and a large majority was identified as having runaway from their homes or placements in the past.

A majority of these females were also identified as having engaged in aggressive behavior in the past. Aggressive behavior was defined as having threatened or used physical force. These include incidents in which these youth were not arrested. For example, a youth was identified as having engaged in aggressive behavior if she had been involved in a physical altercation in school, but was not subsequently arrested (in most of these cases the minor was suspended or expelled from school).

Importantly, it is not known why the females in our sample engaged in aggressive behaviors because the social history reports did not always provide the context surrounding such incidents. This is important because some researchers have found that females may engage in physically aggressive behavior or violence in response to a threat made against them, or following victimization (e.g., mom hits the minor and she responds to that incident by hitting back).29 What these data do indicate is that these females are willing to use aggressive behaviors to deal with the conflict or circumstances in their lives.

Not surprisingly, most of these females were on probation prior to their incarceration and many had been detained temporarily in juvenile detention either following an arrest, during court proceedings, or following a finding of guilt while waiting for placement in a residential facility or transfer to the Department of Corrections.

Table 11
Arrest History and Other Deviant Behaviors

<table>
<thead>
<tr>
<th>Characteristic</th>
<th>Percent/Average</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of Arrests</td>
<td>Average: 5 arrests</td>
</tr>
<tr>
<td>Arrests for Violent Offenses</td>
<td>74.0 %</td>
</tr>
<tr>
<td>Arrests for Non-Violent Offenses</td>
<td>78.6 %</td>
</tr>
<tr>
<td>Arrests for Drug Offenses</td>
<td>13.6 %</td>
</tr>
<tr>
<td>Arrests for Weapon Offenses</td>
<td>5.2 %</td>
</tr>
<tr>
<td>Arrests for Status Offenses</td>
<td>42.2 %</td>
</tr>
<tr>
<td>Runaway History</td>
<td>83.8 %</td>
</tr>
<tr>
<td>Aggressive Behavior in Past</td>
<td>81.8 %</td>
</tr>
<tr>
<td>Probation Prior to Incarceration</td>
<td>89.6 %</td>
</tr>
<tr>
<td>Previously Placed in Juvenile Detention</td>
<td>90.3 %</td>
</tr>
</tbody>
</table>

Note. N=154. a. Excludes arrests for status offenses. b. Includes incidents in which the minor was not arrested.

Table 12 provides the top five most serious crimes and the statutory classes of the crimes for which the females were committed to the Department of Corrections. Again, assaults and batteries accounted for the highest of percentage commitments to the Department of Corrections, followed by property crimes. Additionally, as indicated in Table 12, Class 3 felonies and Misdemeanor A offenses accounted for the highest percentages of commitments.
Table 12
Most Serious Offenses for Which Females Were Committed to the Department of Corrections

<table>
<thead>
<tr>
<th>Characteristic</th>
<th>Percent</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Top 5 Most Serious Offenses</strong></td>
<td></td>
</tr>
<tr>
<td>Assault/Battery</td>
<td>38.3 %</td>
</tr>
<tr>
<td>Burglary</td>
<td>18.8 %</td>
</tr>
<tr>
<td>Theft</td>
<td>9.7 %</td>
</tr>
<tr>
<td>Motor Vehicle Theft</td>
<td>9.1 %</td>
</tr>
<tr>
<td>Possession of Controlled Substance</td>
<td>4.5 %</td>
</tr>
<tr>
<td><strong>Statutory Class (Most Serious Offense)</strong></td>
<td></td>
</tr>
<tr>
<td>Murder and Class X</td>
<td>5.8 %</td>
</tr>
<tr>
<td>Class 1</td>
<td>14.3 %</td>
</tr>
<tr>
<td>Class 2</td>
<td>15.6 %</td>
</tr>
<tr>
<td>Class 3</td>
<td>34.4 %</td>
</tr>
<tr>
<td>Class 4</td>
<td>8.4 %</td>
</tr>
<tr>
<td>Misdemeanor A</td>
<td>21.4 %</td>
</tr>
</tbody>
</table>

Note. N=154.

Approximately 97 percent of the females in our sample had allegedly committed offenses involving victims (some females had only committed victimless crimes, such as possession of a controlled substance or disorderly conduct). Most of these females had perpetrated crimes against more than one victim. For instance, a youth may have allegedly battered a schoolmate, committed retail theft, and was arrested for battery of a police officer. Of those females identified as having committed at least one offense against a victim, 88 had enough information in their social history files to identify at least one of their alleged victims. Based on this information there were four major types of victims identified: family members, authority figures, acquaintances, and retail stores or businesses. The most frequent type of victim was family members; 39 of the 88 females whose social history files reported victim information had allegedly perpetrated offenses against at least one family member (e.g., mom, stepfather, uncle,
grandmother). Twenty-six had allegedly committed offenses against at least one authority figure. Authority figures included police officers, school teachers or principles, residential placement or treatment staff, and Department of Children and Family Services employees. Fifteen of these females had committed offenses against someone they knew. These acquaintances tended to be schoolmates and other children in the care of the Department of Children and Family Services. Fourteen of these females had allegedly committed an offense against store owners or businesses (these incidents were mostly retail thefts).

**Summary**

Based on the information collected from the social history files it was found that:

- Most of the females in our sample were committed to the Illinois Youth Center—Warrenville after being tried and found delinquent in juvenile court, and most were being committed from other urban or rural counties (i.e., counties outside of Cook County and the collar counties).
- Some of these females were dually involved in the child welfare and juvenile justice systems.
- A majority had been sexually active in the past. Some of these youth had already been treated for sexually transmitted diseases, had a miscarriage, and/or had children.
- Although information about the parents was limited, what is known is that some of these youths’ parents had been previously arrested and/or incarcerated. Some parents had also reportedly used illegal drugs in the past.
- Over half of these females had experienced some type of abuse, whether physical, emotional, verbal, or sexual, at least once in their lifetime. Some of these females allegedly endured abuse at the hands of more than one offender. Overall, a large percentage of the physical or sexual abuse perpetrators were individuals these females knew (e.g., family members, boyfriends, other relatives, etc.).
• Many of the females in our sample were reportedly having difficulty in school. Some had missed school due to truancy and suspensions, and some had been expelled or dropped out of school.

• Nearly three-quarters of the females in our sample had been diagnosed with a mental health disorder or problem. Of these females, over three-fourths had been dually diagnosed (i.e., diagnosed with more than one mental health problem or disorder). The most common diagnosis was conduct disorder, followed by depression. Many had also reported suicidal thoughts and 26.6 percent had already attempted suicide at least once. Sixty-two percent had been prescribed medicine for a mental health disorder or problem in the past. The most frequently prescribed medicines were those typically used to treat depression.

• Some of these females also reported physical health problems, the most common being asthma.

• Nearly all of the females in our sample had tried alcohol and/or drugs. The most frequently cited drug was marijuana.

• Many of the females entering the Department of Corrections had extensive arrest histories; the average was five prior arrests. Nearly three-quarters had been arrested for violent offenses. Assault and battery was the offense for which the highest number of females were committed to the Department of Corrections.

• Eighty-two percent had been identified as having engaged in aggressive behaviors in the past. Aggressive behaviors were defined as having threatened or used physical force.

• Most of the females in our sample had allegedly committed offenses against at least one victim. For those females in which information about their victims was available, it was found that family members, authority figures (e.g., police, school personnel, etc.),
acquaintances (e.g., school mates, etc.), and store owners or businesses were the most frequently identified victims.
IV. WORKING WITH FEMALE DELINQUENT COMMITTED TO THE ILLINOIS DEPARTMENT OF CORRECTIONS

This section presents findings from three focus groups with correctional staff regarding the barriers they experienced while working with delinquent females. It includes a description of the roles staff believed they took on as they worked with female delinquents and a list of recommendations staff made in terms of how community-based programs and the correctional system can better serve female delinquents. Although, as indicated in the introduction section of this report, the overall purpose of this study was to provide a description of female delinquents residing in the Illinois Youth Center—Warrenville, in an attempt to learn more about the services such females may need, focus groups were conducted to inform agencies interested in developing programs for this population what it is like to work with these youth. Additionally, these focus groups were conducted because research about the experiences of individuals working with female delinquents, particularly in a confined setting, is limited.

Working With Female Delinquents: Past Research

What research exists on this topic has overwhelmingly reported juvenile justice professionals and social service providers believe females are more difficult to work with than males. Practitioners who reported difficulty working with females often characterized females in more negative ways, such as reporting that females have more negative attitudes than males.


or that they are manipulative and uncooperative.\textsuperscript{32} Although one study reported practitioners did not believe females were more difficult to work with than males, even this study found some practitioners reported females being manipulative, controlling, and at times engaging in sexually inappropriate behaviors, such as flirting with male staff.\textsuperscript{33} These studies have also noted other barriers practitioners have reported, including the lack of resources and programming available to females,\textsuperscript{34} their family and neighborhood environments,\textsuperscript{35} and the juvenile justice system.\textsuperscript{36} Staff burnout and low wages were also indicated as barriers to maintaining consistent staff to work with female juveniles.\textsuperscript{37}

Additionally, researchers have noted that male practitioners in particular have reported more difficulties working with female juveniles than males.\textsuperscript{38} Chesney-Lind and Okamoto (2000) and Okamoto (2002) report male practitioners are principally concerned about potential legal ramifications that could result from working with female juveniles. The challenges male practitioners identified included dealing with the perceived sexual behaviors of female juveniles,


sexual abuse allegations, and physically restraining young females. In fact, Chesney-Lind and Okamoto (2000) found the level of fear of liability reported by male practitioners increased as the proportion of female clients on their caseloads increased.

**Method**

Three focus groups were conducted with staff working with female delinquents committed to or paroled from the Illinois Department of Corrections. Focus groups were chosen as the method for this portion of the study because they would allow participants to give detailed descriptions of their experiences working with female delinquents and provide participants the opportunity to listen and react to the experiences or perceptions of other staff members. To ease discussion, the groups were arranged so persons with similar jobs were in the same focus groups. For instance, parole officers participated in one focus group, while correctional counselors, social workers, and treatment staff participated in another. This strategy was also used so researchers could compare and contrast the experiences of one group (i.e., parole officers) with another group (i.e., counselors and treatment staff). Potential participants were given a copy of the questions that would be asked during the focus groups to afford them the opportunity to think about their experiences working with female delinquents prior to the focus groups. Table 13 lists the questions posed to focus group participants. Other than questions asking participants to clarify their comments, these were the only questions posed to participants.

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Table 13
Questions Presented to Focus Group Participants

- If you were to tell an outsider that has never worked with girls what it is like to work with girl delinquents, how would you describe your experiences overall?
- What are some of the barriers you’ve experienced while working with girls?
- What are some of the successes you’ve experienced while working with girls?
- What do you think are some of the reasons girls are becoming involved in the juvenile justice system?
- Are boys are easier or harder to work with than girls? Why or why not?
- What do you think is your role as it pertains to working with these girls?
- What are some programs that you think would benefit these girls?
- How do you think the Department of Corrections could better serve girls?
- How do you think Department of Corrections could better assist their staff in working with girls?

Sample
Twenty-one adults participated in three focus groups. All of the participants were working for the Department of Corrections when the focus groups were conducted. Their job titles ranged from social workers, correctional counselors, and vocational education instructors to correctional maintenance, correctional officers, and parole agents. Sixty-two percent of the focus group participants were female. Forty-eight percent classified themselves as white, 33.3 percent were black, 9.5 percent were Hispanic, and 9.5 percent identified themselves as bi-racial. Most of the participants had completed some education beyond their high school diplomas: 47.7 percent had associate or bachelors degrees and 28.6 percent had graduate degrees. The length of time participants had working with females sentenced to the Department of Corrections ranged
from four months to 19 years, with the average length of time being almost seven years. Ten of the 21 participants reported they had worked with female juveniles prior to working at the Department of Corrections, 12 participants indicated they had previously worked with male delinquents committed to the Department of Corrections, and 8 indicated they had worked with male juveniles outside working at the Department of Corrections.

**Analysis**

All three focus groups were audio taped to allow research staff to transcribe the focus groups word for word. Each transcript (one per focus group) was analyzed for themes or topic areas discussed during the focus groups, after which the topic areas were compared across focus groups to identify if and when similar topics were discussed. Topics that were discussed during more than one focus group were identified as being especially important. To help readers identify when a topic area was discussed during more than one focus group, the findings below are qualified with statements indicating how many focus groups discussed a particular topic.

Readers should note that one limitation of the information provided below is that it is based solely on the opinions and perceptions of practitioners working with female delinquents. This study did not allow confined or paroled female juveniles to express their own opinions about what it is like to live in correctional facilities or their neighborhoods, or whether they had programming ideas they thought would be helpful. This has also been a limitation of many previous studies examining practitioners’ perceptions of female delinquents’ problems and behaviors.

Additionally, data from focus groups can be limited because it may not represent all of the participants’ beliefs and concerns. For instance, some participants may feel uneasy about sharing their ideas in front of their coworkers, especially if they feel others may not agree. On
the other hand, some participants may feel very comfortable discussing certain topics in front of their peers. These individuals may inadvertently steer the focus group discussion toward topic areas of their interest (i.e., these individual may have a lot of influence about what is talked about during the focus group). Moreover, some participants may agree with the statements of others simply because they are sitting with a group of their peers. Others may disagree with comments made by other participants but choose to stay silent. Therefore, although these data provide important insights to what it is like working with female delinquents, readers should keep in mind the limitations inherent in the methodology used.

**Working With Female Delinquents: What is it Like?**

Differences were found in how correctional employees described what it was like working with female delinquents. Some staff described the females they worked with in negative ways. When asked how they would describe what it is like to work with female delinquents, they described working with confined females as challenging and emotionally draining. They frequently described the females themselves as needy, moody, too emotional, manipulative, disrespectful, and as having bad attitudes. When compared to male delinquents, these females were described as being more dramatic, not as straightforward with what they wanted, more likely to hold a grudge against another inmate for long periods of time, more disrespectful, and as having poorer attitudes. Below are some examples of the ways in which such these staff described working with female delinquents or the females themselves.

*Excerpt 1*: Emotionally draining. The girls are needy, they require a lot of attention. So that’s probably the biggest thing. Just listening and giving them ideas or advice; it can be very draining. . . I mean [the girls] are just so emotional. You know, something about their roommate, the she said he said, the gossip, the drama, you name it. They’re very social creatures. So it is very emotionally draining and you have to be up for that challenge.
Excerpt 2: I would say that with the boys you knew what to expect, what they were coming at. Basically you knew what you were going to get. With the girls, their moods change a lot more. One day they might be fine, and then you see them the next week and everything caved in on their life. You know, everything just gets unraveled. So with the girls you have to keep an open mind, you don’t . . . know what to expect.

Excerpt 3: [The girls] will often try to play on your sympathy . . . They’ll come in and they’ll tell you their stories of trauma, various terrible things that have happened to them, and then they try to play on that to make you feel some responsibility for what has happened to them. Like it is the system’s fault, that all men are like this and that, and they try to get you to take some responsibility for what has happened to them. They try to get you to do things.

Although staff often portrayed female delinquents in negative ways, most provided reasons why they believed these females behaved in such manners or why working with these females was so challenging. Overall, the most frequently cited reasons were the traumatic life events these females had experienced or their family and home environments. Below are some examples of these types of explanations.

Excerpt 1: I think the emotional drain goes with the fact that you are sitting with the girls and they’re telling you their stories. Not a single one of these girls comes from a home where both their parents cared and loved for them on a daily basis, where you’ve got food on the table every night and they felt safe. There are very few of those girls, if any in this place. So what you are doing is listening to stories of trauma, after trauma, after trauma. You start to feel, when you’re sitting in front of them, you go numb to it. But as soon as they walk out of your office, you’re overwhelmed with all of the emotion that they projected onto you with this life that they had been leading. And you know they are 14 years old and they’ve lived far more than you ever will. I think that is what the drain really comes from.

Excerpt 2: I think the manipulation in here is more like survival skills for them. . . . You are talking about kids who are coming from parents and a home [where] they might play the parent. In most of the cases the parents don’t care. [Stated as if parent talking to child:] ‘If you want to kill yourself, go ahead and kill yourself.’ That is what most of the girls share with me. So they come into manipulation; whatever they have to do to survive they will do it.

In contrast, some staff felt females were easy to work with. At least one parole officer reported that prior to working with females he thought females would be difficult to work with, but has since found that males are more difficult to supervise. This agent indicated that females
were easier to work with than males because female parolees reoffended less than the males, although not all parole agents agreed with this conclusion (some believed their female parolees reoffended more than the male juveniles they supervised). Parole agents, specifically, felt the ease of working with parolees was not due to whether or not a client was male or female but rather differences in where their clients lived (e.g., they felt that clients living in impoverished areas were more difficult to supervise than those living in higher income neighborhoods; see the subsection titled *Family and Neighborhood Environments* below for more on this topic).

Although most parole agents did not believe females were more difficult to work with than males, male parole agents did express concerns about working alone with female clients. These discussions centered on the legal ramifications that could ensue while working with female clients. One male parole agent shared this story to illustrate his point,

> The nightmare scenario: I had this girl. I called and told her that I would be contacting her that day and she said that if you knock on the front door there will be no one home, so go out back and I will be sunbathing. ‘No you are not!’ That is all I could tell her, that no you are not. You are going to be fully dressed. I know that the boys will not do [that]. But sometimes you will see a girl dressed up just like she is going out to a nightclub when she goes to see her parole agent . . . It is more of an issue in that situation about what can be said about you. You are going into a backyard seeing some young girl in a bikini. You don’t want that risk.

**Working With Female Delinquents: Barriers**

Throughout the focus groups, participants identified several barriers to working with female delinquents. These barriers fell within four categories: family and neighborhood environments, females’ sexual relationships, the juvenile justice system and other agencies, and the correctional institution. Below is a description of each of these barriers.

*Family and Neighborhood Environment*

All three focus groups identified these youths’ families and neighborhood environments as barriers to helping them. Participants cited such things as parental encouragement or
acceptance of criminal behavior; lack of supervision; families that did not nurture and care for their children; parents that participated in or allowed sexual abuse to occur in their homes; and neighborhoods where criminal behavior was not only acceptable, but commonplace, as examples of the types of issues these females faced when they returned home. Most participants also felt the home environments these females eventually returned to undermined the progress made during treatment while they were confined. As one participant indicated,

Another barrier is treating someone and trying to help them make changes and seeing some progress, yet knowing that you are sending them to the same dysfunctional place that they came from . . . I think that is one of the biggest barriers. You invest all of this time and you send them right back to where the problem began knowing that they will be back in a couple of months. People wonder why the recidivism is so high. Well, it is because we send them right back to the same home.

Another indicated that he felt parents lacked motivation to change themselves and the parents often believed it was only the youth that needed to change. This is how he explained it,

The first thing the parents will say is, ‘Gosh, I hoped she’s changed this time.’ You know, it is all on the child. All of the responsibility falls on the child. There is no responsibility on the parent. Sometimes you set up services for family therapy, but how often is that followed? It is just that the parents are not motivated . . .

Some parole agents described instances in which they would show up to a youth’s home for a visit only to find the parents incapacitated due to alcohol or drugs. Other agents talked about their concerns about leaving females with families or in homes where they may be at risk for victimization, either at the hands of their parents, guardians, or boyfriends. One parole officer offered this story,

I’ve got a girl on right now, and it is nothing that I did to keep her out of trouble because she was already doing that. But I was watching her dad; her dad was drunk the whole time. And I stayed there longer than I usually do because the way he was looking at his daughter—looking at his daughter sexually. I pulled her aside and asked her if anything has happened and she said no. I asked if she was afraid something is going to happen. And she hemmed and hawed, and I said, ‘if I could tell you that you could move today would you move today?’ And she was like, ‘yes.’ It was being there at the right time to see what her father was like to give her that option. She would have stayed there for a
year on parole in a house where her father was attracted to her. And he did not hide it. He looked at me when I’d go through the parole steps like I was a sexual competitor.

Parole agents also specifically identified the neighborhoods as being a big barrier. They felt low income or poor neighborhoods provided youth with more opportunities to “get into trouble” and where criminal behavior was accepted. These parole agents felt youth in these neighborhoods may not have the skills, self-esteem, or adult support to resist some of the negative influences in their neighborhood, such as gangs.

All three of the focus groups stated they believed some youth returned to the facility because their home environments were so horrible the institution was perceived by these youth as a better option. They felt the institution fulfilled some of these youth’s needs that were not being met in the community. The types of needs identified were food, a safe place to sleep, medical and dental care, and a place where there were adults that cared about them.

**Females’ Sexual Relationships**

During two focus groups, sexual relationships between female inmates were identified as one of the barriers to their work. Some staff reported feeling trapped between knowing that such behaviors existed between female delinquents and their abilities to actually prevent these behaviors despite institutional rules prohibiting such interactions. In these instances, staff felt that although they attempted to ensure youth followed the institutional rules prohibiting such interactions, the institution’s policies undermined their attempts. For example, staff reported difficulty preventing such sexual activities when two females are housed in one cell. In fact, some staff reported they felt these relationships had become so pervasive that little could be done to ensure they were not placing females in living quarters where they could begin a sexual relationship. One participant described it this way,
I think it [sexual relationships between girls] is pretty common now. Usually when they come in they swear up and down they would never get down like that, swear up and down, and . . . the next thing you know, 3 months later . . . they usually turn. There is heavy pressure from the peers. . . And [now] you are housing two individuals who are sexually attracted to each other, whereas you would never do that with the boys, you would never house them with a girl. It is basically the same thing . . . We have created a situation where we are putting girls together for sexual relations, and there is no way to avoid it. We are not doing it as a policy, we are taking precautions to avoid that, but there is no way to avoid it because it is so prevalent.

Some participants also thought some females focused too much of their attention on their sexual relationships with each other, which distracted them from other things, such as engaging in and learning from the programs offered at the institution.

Although a few participants stated their concerns in a manner that suggested they felt such interactions were inappropriate because it was not the “proper” behavior of young females, others indicated they were concerned these females may enter relationships due to peer pressure. Some also felt these females did not fully understand the consequences of such behaviors. They thought these females might not realize that sexually transmitted diseases can be transmitted during sex between two females. As one participant indicated, “A person does not know what another person has [in terms of disease]. We don’t tell them that information. They think they are not paying for what they are doing.”

Participants offered several reasons why they believed such relationships were being formed. The most frequently cited reasons were that these females were starved for affection, love, and security, and that they formed these relationships to meet those needs. For instance, some participants felt the sexual relationships that these females formed were more than just for sexual gratification. They thought these relationships provided an avenue for which these females could express their care and love for other individuals, but also have such feelings reciprocated. A few participants also felt such relationships may be expressions of curiosity.
about their own sexual identities and sexuality, which they felt was common among all adolescents.

*The Juvenile Justice System and Other Agencies*

Some participants also felt the juvenile justice system was itself a barrier to working with female delinquents. A few participants thought the juvenile justice system did not react to these youths’ delinquent behaviors until they committed serious crimes or until they had committed several offenses. One participant believed the increase in the commitments of female delinquents was primarily due to more females being prosecuted for offenses that may have not been prosecuted in the past, or judges who were less willing to offer female delinquents a second chance (whereas in the past, several alternatives to the Department of Corrections would have been considered first).

Others felt the Department of Corrections was a dumping ground for females who could be better served in their communities. In particular, they thought the Department of Children and Family Services used the juvenile justice system as a way to get rid of those youth who are difficult to work with or place in foster homes or services, particularly those youth with more severe mental health issues. In fact, participants in one focus group identified the Department of Children and Family Services as a “big barrier,” particularly when a youth on their caseload was getting ready to leave the institution. Here is how one participant described it,

They are not really accessible. Especially if you have a kid who has been a real knucklehead in the community, they don’t want her back. This is a good place to dump them for a while. Once they are here, somebody is taking care of them, everything is good. That is one less thing they have to worry about. It is basically a burden off their back. And as soon as we release them into the community, then that is another problem that they have to deal with. It is a lot easier for them to just drag their feet. The longer it takes for them to find a placement the better for them. And when you are coming down to the wire and the kid is about ready and we need to present this kid to the [Parole] Board, you know, this kid has done her time, that’s when they are the least accessible.
Another participant offered the following explanation about why caseworkers from Department of Children and Family Services were often inaccessible and the impact of this on the females with which she worked.

. . . The turnover in caseworkers. You’ll have a girl and she has had three caseworkers in the past couple of years. There is not a lot of consistency. They will get attached to one caseworker and then they will get reassigned to a new one. And then this caseworker will say that ‘you are going here when you get out,’ but when it gets close to the time when they are going to be paroled, ‘Oh, well, we can’t get you into this place, or this family can’t take you right now,’ and the kids are waiting and it appears like they are being blown off, as well as myself too. And then we are hounding them. Back to that trust issue, the parents weren’t really there, now you have this person who is supposed to be a caseworker and you can’t really trust what they tell you when they come to visit. Or they will tell you on the phone ‘Oh, yeah, I’ll have a foster home for you next month,’ and next month comes and goes and the kid is still sitting here. And then we don’t know what to tell them. You know, it is really hard. It’s heartbreaking.

It should be noted that these participants did report that some improvements have been made, specifically the hiring of a Department of Children and Family Services liaison. However, this problem was also brought up by and discussed during the focus group with parole officers. Some parole officers reported difficulty working with the Department of Children and Family Services with youth already in the community. One officer in particular believed “once [the caseworkers] find out that they have a parole agent they don’t feel like they have to offer any more services. They stop doing their job.”

The Department of Children and Family Services was not the only agency identified as being a barrier. Parole agents identified schools as being barriers. They felt when administrators or teachers from public schools found out a youth was on parole they would “give them the hardest time and try to get them kicked out.” Location, availability of services, and social workers’ abilities to engage youth were all cited as potential barriers to getting appropriate and effective treatment once released from the institution. One participant felt the community service providers treated youth coming from the Department of Corrections differently. He thought
service providers often threatened parolees with calling their parole officers to force youth into complying with treatment. This parole agent felt such tactics damaged trust and resulted in the youth disengaging in treatment. This same officer also believed some staff providing treatment to the youth in the community did not have the skills or confidence to work with the types of youth involved with the Department of Corrections.

The Correctional Institution

There were two main issues discussed relating to the correctional institution as a barrier to working with female delinquents: communication within the facility and the programs currently offered. Participants in the two focus groups with staff who worked in the facility identified communication as a barrier. One focus group in particular spent a large amount of time during the focus group discussing this particular issue. Overall, participants felt there was a lack of communication between staff and the female inmates and between staff members. In terms of the communication between staff and female inmates, participants felt staff were inconsistent in how they interacted with the youth, particularly in terms of communicating to youth what behaviors were expected of them. For instance, participants felt the rules that existed in the facility were inconsistently applied (e.g., the rules applied to some youth but not others) or were sporadically applied to individual youth (e.g., one day a behavior would be overlooked, while the same behavior another day would result in a disciplinary action). Additionally, staff reported discipline was not reliably handed out across staff. At least one participant felt inconsistency was due to the various personalities of staff. He believed some staff had more mild tempers and would hand out more appropriate disciplines, while others with more “vicious” personalities would try to discipline youth in an excessive manner. Both focus groups also reported feeling the decisions they made when dealing with the youth, either in terms of their treatment or discipline,
were sometimes reversed by the facility’s administrative personnel or by other staff. They felt this created an atmosphere where the youth could easily pin one staff member against another. One participant, providing an example of how the youth pinned staff against each other, stated this often happens when one staff member would discipline a youth only to have another staff member “erase” it. She felt in such instances youth would then throw the incident in the staff’s face to show the staff that he or she had little authority over the youth. Another example discussed in both focus groups was how youth would attempt to get something from a staff member and if that staff refused, the youth would go a step higher until they found someone willing to give them what they wanted. Interestingly, both focus groups identified younger staff members who were not much older than the inmates as having the most difficulty setting appropriate boundaries and consistently administering discipline. Both focus groups felt older, more experienced staff were better equipped to deal with such youth.

One focus group also thought the lack of communication between staff prevented them from being sensitive to the needs of the females with which they worked. One participant offered this story about an incident involving a female who was experiencing what this participant termed as a “flashback” to when several men had sexually assaulted her.

We had this one female that came in and—it comes back to what we are talking about communication—no one told us about this person’s history and she was having a flashback and needless to say, our mobile security was men, and they were black. The supervisor going there to review what was going on is black. So you have all of these black men coming at this individual and that is what the flashback was dealing with. Because, someone had, we are talking a bunch of men, had [raped] her. But we did not know that was what was going on. So we are trying to figure out what was going on and now we’ve added to what is going on. And it just got to the point where, we said, ‘Oh. Everyone just step away!’

This participant believed that had staff been properly informed that this youth was experiencing these problems they could have approached her in a more sensitive manner. Other
participants in this focus group reported stories where a youth received bad news and staff were never informed until after the youth had “freaked out” while in their care. They felt such information should be provided to staff to ensure not only the safety of other residents and staff, but also so staff could respond in manner that deescalated the situation. A few participants reported not understanding why the staff logs only contained cursory information (generally how many youth were counted during each shift) and not more information about who received discipline and for what reason to provide more consistency from one shift to another.

In addition to a lack of communication, the lack of programs was also cited as a barrier within the institution. In fact, all three focus groups cited this as a barrier to working with female delinquents. Those staff working in the facility felt more programs should be offered, and one focus group in particular thought females should be given the chance to choose some of the programs they attended. These staff felt giving youth control over which programs they attended would increase the likelihood the youth would engage in that program. Although these staff believed that some of the programs, particularly the FOCUS program, provided youth with important information, they felt youth who were forced to participate only did what was necessary to complete the program.

All three focus groups felt the current educational system offered at the facility was not good enough. In fact, two of the focus groups specifically mentioned they felt education was not taken seriously in the institution. They felt youth were able to “skip” or not attend school. Parole officers in particular mentioned they did not understand how older youth (those 17 years and older) could be in a facility for long periods of time without ever completing their GED or receiving their middle or high school diplomas. One focus group thought youth who were working at or above their grade levels were not challenged by the current school system, and two
focus groups mentioned youth who were well below their grade levels were not receiving the attention they needed to improve. Another focus group felt college courses should be offered to provide youth the opportunity to see what it would be like to attend a college class in hopes this could make the youth think about attending college in the future or show them they have the intelligence and skills to succeed in college.

Finally, participants in one focus group felt the correctional facility where they worked was unable to deal with some of the issues some females faced, particularly those females with severe mental illnesses. They felt the correctional facility lacked the tools that other community resources may have to deal with such issues, specifically the ability to provide these youth with intensive mental health services and to implement a behavior rewarding system that could facilitate behavioral change. As one participant noted when talking about youth with severe mental health problems coming from the Department of Children and Family Services, “The least we can do is give them their medication, individual therapy. We cannot do much about behavior rewarding.” Participants also thought placing these female clients with other youth who did not have severe mental health problems was problematic because there have been instances when the youth with mental health problems have been teased by other youth. One participant felt mixing those with mental health problems with those without these issues was detrimental to both groups. This is how this participant described it,

. . .The fact that we have so many kids here with serious mental health problems. I mean there are kids with mental illness mixed in the general population. And you get kids mimicking other kids, which is how they are ending up going on [suicide] watch. So kids who really honestly need to go on watch set the trend for kids to use that for a way to get attention. . . If we had a facility where you could help the kids with the mental illness, specifically because they have a mental illness, and you remove them from the population, there would be a benefit to both groups. The kids with the mental illness could get the attention that they need because they cannot get it here. When a kid with serious mental illness is on the same caseload as 15 to 20 other girls that don’t have mental illness, and those other girls also need to be seen on a regular basis, the girl with
the mental illness gets thrown in with the shuffle. She needs far more attention than she is
getting. And it is highly disruptive sometimes for the girls who are not mentally ill. They
don’t understand why things are going on [when a girl “freaks out”], and sometimes they
actually exasperate the problem. So neither group is being treated fairly by having these
two groups mixed.

Nearly all of the participants in this focus group felt youth with severe mental health problems
would be better served in the community or in residential placements geared specifically for
dealing this population.

For those working in the facility, the lack of programming was perceived as a barrier
because they could not provide the youth with what they needed (adequate mental health
treatment was specifically cited by one group). For parole agents, they cited lack of
programming, specifically education, as a barrier to being able to assist youth in complying with
their parole orders. As one parole agent indicated, if the youth has already completed high school
or their GED, that is one less thing the youth has to worry about as they transition home.

Working With Female Delinquents: Staff Roles

Staff in all three focus groups identified several roles they take on while working with
female delinquents. During the focus groups, at least one participant mentioned being a mentor,
teacher, role model, authority figure, counselor, or employer. In every group, one or more
participants described their role as being a surrogate parent. They described situations in which
they took on what they perceived as motherly or fatherly roles. For instance, one participant
described how she sometimes had to teach the females she worked with how to comb their hair
or brush their teeth properly; activities she felt were things parents teach children. Some
participants also felt the females themselves put staff into family roles by beginning to perceive
some staff as their aunts, uncles, mothers, fathers, or grandparents. During two focus groups staff
mentioned being concerned about taking on such roles. One participant called it a double edge
sword. This participant felt that on the one side staff are able to influence these youth by showing the youth that staff care for them and they want them to succeed in life (roles he felt were parental). However, on the other side, such interactions can result in expectations. For instance, the youth may ask staff for a favor or may want additional attention, and when such requests or needs are not fulfilled the youth feels rejected or hurt. He also mentioned (as did other staff) such interactions may result in the females not wanting to leave the institution because they have developed bonds to particular staff members or other inmates that they may not have at home or in their communities.

Only one role was perceived by two of the focus groups as being completely inappropriate; that was taking on the role of a friend. The participants thought when staff took on the role of a friend they created a situation in which there is the perception that the youth and staff are equal, or on the same “level.” These staff believed there should be clear boundaries between staff and youth, and that using friendship as a tool to get youth to comply was crossing those boundaries. Again, the participants in these groups identified younger staff as being the ones most likely to interact with youth as if they were friends.

**Working with Female Delinquents: Recommendations**

Participants offered several recommendations about how community-based agencies and the correctional system could be improved. All three focus groups identified the need for more and better programming for female delinquents in the community (although parole agents cited this as a need for all youth involved in the juvenile justice system, not just females). Participants identified the need for mentoring programs, parenting programs for parents with children involved in the juvenile justice system, more long-term mental health services, sex education, parenting classes for youth with children, more one-on-one counseling, and programs developed
specifically to help youth deal with family issues. Additionally, one focus group mentioned the need for programs with staff that were experienced in working with delinquents. All three focus groups felt community-based programs should be exhausted before youth were committed to the Department of Corrections due to the limited amount of programming a correctional institution could provide.

Participants also offered several suggestions as to how the correctional system could better serve female delinquents. They cited the need for a bigger budget to fund more programs for youth, better education, programs that act as creative outlets for youth (e.g., art classes, poetry writing), more consistency between staff (including administrative personnel), more mental health options for the seriously ill, more training on issues particular to working with females, better screening of staff, and more communication between staff (including administrative personnel). Additionally, one focus group indicated they felt bureaucratic red tape, the focus on building more prisons, and how funds were allocated interfered with staff’s abilities to effectively work with youth. For instance, some staff felt the correctional system should stop building more prisons and focus more on effectively serving inmates. Other participants reported feeling as if they spent more time proving to the administration they were doing their jobs than they actually spent doing them, while others did not understand how the state could justify buying new cars when the facility was so understaffed. They felt scarce funds and staff time should be devoted to more important things, such as working with the youth.

Parole officers felt the correctional system should develop transitional living centers for female delinquents. According to these officers the centers are needed to house youth who are no longer able to stay at home or in some other placement, either due to their own behaviors or out of concern that a youth may end up neglected or victimized. These officers thought some youth
did not necessarily need to return to secure confinement when they lost their placements.

However, because so few placements, if any, were available for females, parole officers had to consider secure confinement. As one parole officer reported,

  Where I work I can pretty much find long-term placement for a kid if they want it. For a boy. Girl, it is hard to find placement for a girl. If they lose it, if they don’t have any relatives, and if push comes to shove I can put a boy in transitional housing. I don’t have anything like that for a girl.

Finally, all of the groups recommended aftercare programs that would assist youth in transitioning from the facility to the community. Participants felt these aftercare programs were needed to help females deal with everyday life and their family problems, and to answer questions these females may have once out in the community. For instance, one participant shared an example in which a female she worked with returned home to the community and wanted to obtain birth control but did not know how or where to obtain it. This participant felt aftercare services that could help youth deal with basic issues (e.g., helping them learn how to use the bus system so they could get a job) would prevent some youth from returning to the institution. Additionally, some parole officers recommended programs be developed to provide assistance to youth as they transitioned off parole. They felt that just because a youth successfully completed parole did not mean these youth could continue on with their lives without any support. One parole officer offered this story,

  I was about to call in a visit when I found out she discharged [from parole] yesterday. I said, ‘Oh, well you discharged.’ And she said, ‘I don’t have to call in anymore?’ I said, ‘No.’ And she said, ‘You are not going to come in and check on me?’ And I said, ‘No.’ [And she said,] ‘What am I going to do?’ ‘You are going to live.’ For her, parole was a successful tool. For somebody to check on her to see if she was okay. What a parent would do. She was scared because now nobody was going to do that. Who is going to watch her?
Summary

Based on information collected, researchers found that some staff who worked in the institution described their experiences working with female delinquents in negative ways. These results mimic findings from previous studies. However, this study also found that practitioners who worked with female juveniles in the community did not report their experiences in a negative way or report females as being more difficult to work with. These differences may reflect differences in the job-related objectives, the amount of interaction participants have with females, and the differences in the setting in which these practitioners work (e.g., confined setting versus the community). If this is true, perceptions of female delinquents may be intimately linked to the jobs practitioners must carry out. However, more research is needed before such conclusions can be made.

Researchers identified four main barriers staff experienced while working with female delinquents: (1) the family and neighborhood environments; (2) females’ sexual relationships; (3) the juvenile justice system and other agencies; and, (4) the institutional environment. These barriers were primarily discussed in terms of how they impacted participants’ abilities to effectively work with female delinquents. However, some of these barriers were also discussed in terms of their impact on the females themselves. For instance, the disappointment of having a caseworker assure a youth that a placement for her would be found only to not follow through on that promise.

Additionally, researchers identified the various roles staff engaged in while working with females. The most frequently discussed role was that of a surrogate parent. Although most participants mentioned they sometimes took on the role of parents, two of the focus groups mentioned their concerns about taking on such roles. A few participants felt taking on the parental role, although at times necessary, was difficult because it could create situations in which the youth gets attached to staff and does not want to leave the institution or the staff member disciplines the youth and she feels rejected and hurt.

Finally, this study cited several recommendations focus group participants made for improving community-based programming and the correctional system. In terms of community-based programming, participants identified the need for mentoring programs, parenting programs for parents with children involved in the juvenile justice system, more long-term mental health services, sex education, parenting classes for youth with children, more one-on-one counseling, and programs developed specifically to help youth deal with family issues. As for the correctional system, participants cited the need for a bigger budget to fund more programs for youth, better education, programs that act as creative outlets for youth (e.g., art classes, poetry writing), more consistency between staff (including administrative personnel), more mental health options for the seriously ill, more training on issues particular to working with females, better screening of staff, and more communication between staff (including administrative personnel). Additionally, some staff felt the priorities of the correctional system should be reorganized, with the highest priority being serving inmates and not building new prisons. Parole officers cited the need for transitional living centers for female delinquents, and all three focus groups identified the need for aftercare services.
V. RECOMMENDATIONS

Based on the characteristics of the sample of females committed to the Illinois Department of Corrections and the findings from the three focus groups conducted with correctional personnel, research staff developed seven programming and policy recommendations, four of which are directed specifically to the Department of Corrections. Each recommendation is described in detail below.

General Recommendations

*Develop more programming for female delinquents.*

It is recommended that more programming be developed to specifically address the needs of females engaged in the juvenile justice system. Programs recommended include mentoring and tutoring programs designed to provide female delinquents with one-on-one attention; anger management and conflict resolution programs designed to assist female delinquents in understanding why they become angry and in developing and utilizing alternative strategies to dealing with conflict in their lives; sex education classes to help females learn more about their sexuality, the physical risks involved when engaging in homosexual and heterosexual intimate relationships (e.g., transmission of sexually transmitted diseases), and the community resources available to assist them in making informed decisions about pregnancy prevention and feminine hygiene; and parenting classes that teach young mothers how to interact with and care for their children.

Program administrators developing the programs mentioned above should also consider creating such programs specifically for violent or aggressive female delinquents, females with mental health problems, or females with a combination of issues (e.g., aggressive behaviors and mental health problems) because these female delinquents are likely to be underserved due to
strict program criteria that inadvertently or advertently excludes this population from services. For instance, many programs offering services to female delinquents only offer their services to non-violent offenders with few, if any, mental health problems. However, given the high percentage of females in our sample who had engaged in violent or aggressive behaviors in the past and/or who had been previously diagnosed with mental health problems or disorders, it appears prudent that programs are developed to benefit such females.

Programs also should be developed that teach and model healthy relationships and provide females with the resources and skills to leave unhealthy ones. Many of the females in our sample experienced and/or witnessed trauma and abuse in their homes or communities and almost 11 percent reported physical, verbal, and/or emotional abuse by their intimate partners. Given these statistics, it is probable some of these females have never experienced what it is like to be engaged in a healthy relationship. Therefore, these females may not know they are in unhealthy relationships, or they may continue to engage in unhealthy relationships because they have limited knowledge about the resources available to help them leave unhealthy ones.

Additionally, based on the focus group recommendations and the number of females identified as having been diagnosed with mental health disorders or problems, it is recommended that more community-based mental health programs be developed to specifically address the mental health needs of females at risk for or involved in the juvenile justice system. Such programs should also include services that address the sexual and physical victimization some females have experienced because, although this study could not speak directly to the impact of victimization on these females’ lives, other researchers have noted that victimization is related to
negative outcomes for these youth, such as poor academic performance, mental health and substance abuse problems, poor self image, and violent criminal behavior.⁴¹

Finally, programs also should be created that work specifically with females and their families. All three of the focus groups convened identified the family as a barrier to working with female delinquents. Such programs should provide youth and their families with strategies to effectively deal with conflict in the home because many of the offenses for which females had been arrested had occurred in the home (e.g., domestic battery). Parents and guardians also may need to be linked to services for their own issues, such as substance abuse, domestic violence, and other trauma, that may be barriers to supervising and interacting with their children. Admittedly, not all parents and legal guardians may be willing to participate in such services. In such instances, practitioners may want to reach out to other supportive persons in these youths’ lives.

_Improve the information available in the social history reports._

As research staff reviewed the social history reports submitted to the Department of Corrections, two questions were continually brought up by research staff: What information is needed to make informed decisions about female delinquents? Can life-altering decisions be made with a limited amount of information, or is more detailed data needed? The presentence social history reports reviewed for this study varied in terms of the amount of information provided. Some contained only the most cursory level information, such as the presenting offense, prior criminal history, and prior court contacts, while others presented more detailed

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data about the family background, community characteristics where these youth lived, contact, if any, with the child welfare system, criminal histories, abuse histories, academic backgrounds, mental health and substance abuse issues, and prior treatments received. Although it is recognized that some counties, particularly those with high caseloads and/or inadequate resources, are limited in what they are able to produce during the time available to conduct a presentence social history investigation, we suggest probation administrators at minimum consider revisiting what information is being collected. It is important that the social history reports contain as much information as possible not only because it is used to make treatment and commitment decisions by the juvenile court, but also because it informs staff at the Illinois Department of Corrections about the females in their care (several focus group participants felt these reports often lacked important information, such as previous services received). Table 14 identifies the types of information county probation administrators may want consider reporting and the types of questions practitioners should try to answer.
<table>
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| Involvement in the Child Welfare System   | • Why is the youth and/or her family involved with this system?  
• What is the status of the involvement (e.g., ward of the state)?  
• What are the activities these families must comply with as part of their involvement in the child welfare system?  
• If the youth is involved with the child welfare system in relation to her own child, what activities must she engage in to comply with that system? |
| Physical, Emotional, Verbal, and Sexual Abuse History | • Has the minor reported abuse of any type?  
• Who is the alleged offender?  
• When did the alleged abuse occur?  
• Was this abuse reported?  
• Who was the abuse reported to?  
• When was the abuse reported?  
• Was the abuse indicated as abuse and/or was an offender arrested or convicted?  
• Has the minor received services to address the alleged abuse?  
• What services were provided?  
• What is the minor’s perception of the incident (e.g., does the minor continue to claim victimization despite the case being unfounded?)? |
| Minor’s Criminal History                  | • For what offenses has the youth been arrested?  
• What were the contexts surrounding these arrests (e.g. was the domestic battery committed during a family dispute?)?  
• What were the results of the arrests (e.g., station adjusted, petitioned to court)?  
• Has the minor been arrested for status offenses?  
• What were the results of such arrests?  
• Was the minor on probation at the time of the last arrest?  
• Was the minor ever screened for detainment and/or detained in a juvenile detention center? |
| Mental Health History                     | • Has the minor received a mental health assessment in the past? If so, what were the results from that assessment?  
• Were services provided based on the diagnosis? If so, what services were provided?  
• Were these services successfully completed? Why or why not?  
• Is the minor currently being medicated? |
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| Substance Abuse History      | • Has the youth been assessed for substance abuse?  
• If so, what were the results from that assessment?  
• Has the youth been referred to substance abuse treatment or counseling?  
• If so, what services were provided?  
• Were these services successfully completed? Why or why not? |
| Family Information           | • Does the youth have contact with one or both of her biological parents? Why or why not?  
• With whom is the youth living with?  
• Does the youth have a positive relationship with her biological parents or other guardians? Why or why not?  
• Are the parents or guardians supportive?  
• Do the parents/guardians have a criminal history?  
• Do the parents/guardians have other issues that may interfere with caring for the minor (e.g., substance abuse issues, victimization, abuse, etc.)?  
• Can the parents/guardians be linked to services (e.g., substance abuse treatment)? |
| Academic Background          | • What is the academic history of the youth (e.g., grades)?  
• Has the youth been placed in special education or behavior disorder classes in the past?  
• Is the youth working at grade level?  
• Is the youth chronically truant from school?  
• Has the youth ever been suspended or expelled from school? If so, for what reason(s)?  
• Has the youth dropped out of school?  
• Has the youth received any services to address her academic problems? |
| Relationship History (peers; intimate partners) | • Does the youth associate with other youth engaged in the justice system?  
• How does the youth describe her relationships with her friends? Are they supportive of her not engaging in delinquent behavior, or do they encourage such behaviors?  
• Is the youth engaged in relationships that may place her at risk for victimization (e.g., dating violence)?  
• What is the age of the person she is intimately involved with? Is he or she involved in the juvenile or criminal justice systems? |
Conduct more research on female delinquents.

More research should be conducted on female delinquents in general, not just those committed to the Department of Corrections. One limitation to this study was that the population from which our sample was drawn represents a specific type of female delinquent. Of the female juveniles arrested, petitioned to court, and found delinquent, few are ever committed to the Department of Corrections. Thus, the characteristics profiled in this report reflect a particular type of female delinquent.

Researchers should also consider collecting data on female delinquents utilizing several different methods to obtain the most comprehensive data on female delinquents. Another limitation to this study was that we were only able to collect data from secondary data sources that did not always contain the most comprehensive information. Interviews with the females, in addition to reviewing court documents and intake materials, would have provided rich, complimentary data about their lives, and how they interpreted their involvement in the juvenile justice system.

Research is needed to determine if indeed there has been an increase in the number of female juveniles arrested in Illinois, and if so, why this increase has occurred. Research is also needed to map the flow of female delinquents through the juvenile justice system to identify how females move through the various stages of the juvenile justice system, in addition to what factors predict their movement through these stages. For instance, what factors predict the likelihood of a female delinquent being diverted from the juvenile justice system versus being petitioned to court? Comparisons between male and female delinquents with similar offense and background characteristics may provide insights into if and how the juvenile justice system deals with females and males differently.
Additionally, research is needed to examine the effect of being dually involved in the child welfare and juvenile justice systems. Many of the females in our sample were already involved in the child welfare system prior to their contact with the juvenile justice system. What impact, if any, does involvement in the child welfare system have on juveniles entering the juvenile justice system? How well do these two systems communicate with each other? Are the expectations of these systems similar, or are they at times in conflict?

Finally, research is needed to determine how the Department of Corrections is being used by local juvenile justice systems. Are females being committed to the Department of Corrections because some counties lack the resources needed to effectively supervise and treat these youth? Why are more female than male delinquents being committed to the Department of Corrections for misdemeanor offenses? Are juvenile justice professionals less tolerant of females committing certain crimes (e.g., violent offenses) than males? Could some youth be better served in their communities? Are some agencies using the Department of Corrections as a temporary residency for females who have few placement options? Are state policies providing county level juvenile justice practitioners with incentives to commit females to the Department of Corrections who could be better served in their communities? For instance, are females committed to the Department of Corrections because the state will pay for the treatment, care, and supervision of these youth?

**Recommendations to the Department of Corrections**

*Revisit institutional policies.*

Institutional policies should not conflict with the rules and regulations of the institution. If correctional employees working in an institution are required to enforce institutional rules, then it is important administrative staff ensure polices are not implemented that make
enforcement difficult or impossible. For instance, during the focus groups staff stated that they found it difficult to enforce certain rules (e.g., ensuring females are not engaging in relationships of a sexual nature) given the current policies of the institution (e.g., placing more than one female in a room). Policies regarding discipline and communication should also be revisited to ensure such policies are not creating a volatile work environment (e.g., pinning staff against each other; perception of staff mistrust) and/or insensitive atmosphere for female clients. When reviewing institutional policies, administrators should be aware that it is possible that policies found effective when working with male juveniles or female adults may not be as effective when working with female juveniles.

Periodic trainings focusing on the needs and characteristics of female delinquents (e.g., mental health needs; traumatic life experiences) may also assist administrators in communicating important information to correctional staff without releasing confidential information about female clients. For instance, providing staff with training on the mental health needs of these females and workshops teaching staff how to interact with such youth can provide staff with invaluable information without violating confidentiality. These trainings could also be used as a way for administrators to communicate the most effective way for staff to interact with youth (e.g., addressing such issues as consistency; what roles staff should not engage in). Sensitivity training is also recommended to help acclimate correctional staff to working with females in general, clients who may be from different cultures and communities, or youth who have different sexual orientations.

Additionally, several participants described working with female delinquents as emotionally draining, difficult, and frustrating. Such frustrations are important to address because staff play an integral part in providing the care and services to females committed to the
Department of Corrections. If staff are feeling frustrated or overwhelmed, their interactions with the females in their care may be affected. Such frustration can also result in staff burnout, a feeling of uselessness or helplessness, and ultimately, it can create an unhealthy environment for both youth and staff. It is suggested that the Department of Corrections administrators consider developing strategies to deal with such issues. One option may be monthly meetings to allow staff the opportunity to openly discuss their frustrations or concerns. These meetings could also be used as an opportunity to bring staff together to discuss possible solutions to the problems identified during these meetings.

Implement more intensive mental health services.

Although it is recognized that not all females confined at the Illinois Youth Center—Warrenville are in need of intensive mental health services, given the number of females in our sample who had been previously diagnosed with a mental health disorder or problem, the high percentage of females who reported suicidal thoughts and/or had tried to commit suicide in the past, and based on concerns expressed during the focus groups regarding the ability of staff at the Illinois Youth Center—Warrenville to address some of the more serious mental health problems these females faced, it is recommended that the Department of Corrections develop more intensive mental health services for the females in their care. Such services may include the development of a separate wing devoted specifically to females with more severe mental health problems.

A greater focus on education.

Based on the findings from the focus groups, it is recommended that there be a greater focus on the education of females in the Illinois Youth Center—Warrenville. Most of the females in our sample entered the Department of Corrections without a high school diploma or GED;
suggesting that most of the youth should have been attending school or working toward their GED. Although it is the policy of the Department of Corrections to require juveniles to attend school all day (assuming the youth has not graduated from high school or completed their GED), findings from the focus groups suggest that such requirements are sometimes superceded by staff who allow youth to engage in other activities instead of attending school (e.g., kitchen duty, sweeping floors). Moreover, some of the focus group participants felt that the current school system was too limited in that it did not provide enough assistance to those youth who are working below their grade levels and was not challenging enough for those youth working above their grade levels.

Focus group participants offered several suggestions as to how the Department of Corrections could improve its educational system. These suggestions include having older youth attempt or complete their high school diplomas or GED prior to leaving the institution, providing more one-on-one educational services to youth working below their grade levels, and providing college courses to youth who have completed high school or their GED.

Develop aftercare services and transitional living centers.

Focus group participants identified the need for aftercare services while females are on parole and following their release from parole. Given the large caseloads of parole officers and the large geographic areas where they work, parole officers often have limited contact with the parolees on their caseloads. Thus, although parole officers provide needed supervision, they are not able to offer day-to-day support to youth as they transition back into their homes and communities. Focus group participants felt aftercare services should be developed to supplement the supervision provided through parole. Such aftercare services could link females to additional services, provide females with resources and information (e.g., where females may find a health
clinic in their area), and crisis intervention services. Focus group participants also suggested that aftercare services be made available to youth as they transition off parole to assist those with limited support networks.

Focus group participants also suggested that the Department of Corrections develop transitional living centers for female juveniles who for some reason lost their placement in the community, but need not be placed back into an Illinois Youth Center. Such centers should be used as temporary placements for youth while alternative placement is identified.
VI. REFERENCES


Researchers and practitioners often ask: how has the rate or percent changed from one year to the next. In other words, has the rate increased, decreased, or remained the same between time one and two. To determine if there are noteworthy increases or decreases over time, it is imperative that researchers take into consideration the natural fluctuation of numbers (i.e., we do not expect the same number of cases, offenses, or crimes to be reported every year). Researchers typically consider two standard errors the range in which there is uncertainty of whether or not a number has notably increased or decreased. To calculate two standard errors of a number, one would use the following equation, with \( t \) = total number.

\[
SE = 2 \sqrt{\frac{t}{n}}
\]

After calculating the standard error, the upper and lower bounds are calculated. The equations used to calculate the upper and lower bounds are listed below, with \( t \) = total number.

**Upper bound** = \( t + SE \)

**Lower bound** = \( t - SE \)

If the number of interest is the rate rather than the total number, the following equations are used to calculate the upper and lower bounds of the rate, with \( t \) = total number and \( p \) = population used to calculate the rate.

**Upper bound** = \( \frac{(t + SE) \times 100,000}{p} \)

**Lower bound** = \( \frac{(t - SE) \times 100,000}{p} \)
Upper and lower bounds can also be calculated for percentages using the following equation, with \( t \) = number of interest and \( t_2 \) = total number.

\[
Upper \ bound = \left( \frac{t + SE}{t_2} \right) \times 100
\]

\[
Lower \ bound = \left( \frac{t - SE}{t_2} \right) \times 100
\]

Once the calculations have been completed, they can be used to determine if and when significant changes occurred between two years.

**Example**

A researcher may want to know if the percentage of students suspended that were suspended more than once in the 1990/1991 academic year was significantly different than the percent in the 2000/2001 academic year. By examining the upper and lower bounds, one can identify if a significant change has occurred.

To determine if there was a significant increase or decrease, the upper and lower bounds for each of the years examined are analyzed. If the upper and lower bounds for time one (i.e., 1990/1991) overlap with the upper and lower bounds at time two (i.e., 2000/2001), then these points are not considered different. If there is no overlap, the points are considered significantly different.

Figure B.1 shows the percent of students suspended that were suspended more than once for the 1990/1991 and 2000/2001 academic years. As Figure B.1 illustrates, the upper bound for the 2000/2001 academic year overlaps with the lower bound for the 1990/1991 school year. That is, the upper bound value for the academic year 2000/2001 (68 percent) falls within the upper and lower bounds of the 1990/1991 academic year (76 and 61 percent). Therefore, it cannot be
concluded that the percent of students suspended that were suspended more than once in the 1990/1991 academic year is notably different than the percent in the 2000/2001 academic year.

**Figure B.1**  
APPENDIX C

Counties in Illinois by Region

Legend

[ ] Illinois Youth Center--Warrenville
# Illinois Youth Center--Chicag0

Northern Region
Central Region
Southern Region