Chapter 1

A Portrait of Juvenile Offending in the United States

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High-profile incidents of youth crime often shape public perceptions of juvenile offending (Newman, Fox, Harding, Mehta, & Roth, 2004; Snyder & Sickmund, 2006). For example, after Americans watched on television the mass shootings that occurred in middle and high schools in the late 1990s, youth crime was seen as rising and getting worse (Bennett, DiLulio, & Walters, 1996; Glassner, 2003; Zimring, 1998). The public perception was that youth offenders are qualitatively different from previous generations in the viciousness of their crimes. The media presented an image of young, cold-blooded, super-predators pumping bullets into toddlers, parents, retirees, and one another (Glassner, 2003).

Although part of the reality of crime, such incidents are not representative of the full array of juvenile offending. Rather, they represent a distorted image, just as the image seen in a carnival mirror reflects something that is real but twisted out of shape (Reiman, 2004). A less distorted portrait of juvenile offending and the characteristics of juvenile offenders, therefore, is important for the public as well as for elected officials, youth service workers, and juvenile justice profession-

als who develop crime control policy and engage in crime control practice. The purpose of this chapter is to present a defensible portrait of juvenile offending in the United States, and in doing so, to address the extent of criminal offending among youth in this country, including whether a subgroup of youth is more heavily involved and therefore requires more focused interventions The portrait is produced by empirically addressing four fundamental questions.

The first question bears on trends in juvenile offending: Has it increased, decreased, or remained relatively constant in recent years? The second question pertains to the prevalence of juvenile offending: How common or widespread is it in this country, and are all youth equally likely to offend; or is the prevalence of offending differentially distributed across basic social characteristics of youth, such as their gender, ethnicity, or age? The third question is more methodological in nature, although it has implications for justice system responses to juvenile offending: How does survey-based identification of juvenile offenders compare with justice system identification of these offenders in terms of their distribution by gender and age? Addressing the fourth question reveals whether a subgroup of youth is repeatedly (high frequency) and chronically (persistence) involved in criminal offending; specifically, is repeated or high-frequency offending confined to a small percentage of youth, and do those youth persist in their offending patterns over time, unlike most, who stop or reduce their involvement as they move out of the teenage years and into adulthood? To answer the first question, we review recent reports on trends of juvenile offending, with an emphasis on violent criminal offending and homicide. The remaining questions are addressed using two primary sources described below.

Sources of Requisite National Data

Posing these four questions is seemingly straightforward, but addressing them through an analysis of existing national data is a bit more difficult. The reason is that such data typically come from one of two sources: (1) surveys in which youth are asked about their own involvement in crime as either an offender or victim (self-reported surveys), and (2) official records of juvenile offending, such as arrest records, court records, or confinement records. The challenge is that self-reported surveys and official records often yield different portraits of juvenile offending in the United States—they do not necessarily present the same national portrait (see any introductory criminology text,

e.g., Barkan, 2006, for a discussion of the strengths and limitations of survey and official data on crime).

The advantage of self-reported data is that information is collected directly from youth involved (or not involved) in juvenile offending, independent of any action by the juvenile justice system. These data are typically considered more valid and reliable than data drawn from the official records of processing juvenile offenders through the system. Nonetheless, self-reported data have their own limitations. Youth may not consider what they did as a crime and thus may not report behavioral involvement in a survey. They may forget what they did in the past or refuse to divulge sensitive information even if they accurately remember it. They may confuse their role as the offender or the victim in a particular behavioral incident. For example, the "true" perpetrator of an aggravated assault believes he or she was the victim because the "true" victim threw the first punch. Whatever the reason, nonreporting or inaccurate reporting can produce bias in self-reported data.

The advantage of data from official records is that they are readily available and thus a convenient source of information on juvenile offending. However, the prevalence of such behavior will undoubtedly be underestimated, to some extent, by official records. Consider a cascading sequence of events that support this claim. Some behaviors, although technically criminal, may not be defined as such by those involved, whether perpetrators, victims, or witnesses. Even if defined as criminal, such behaviors may not be reported to the police. If police are notified or are witnesses to the behavioral incidents, they may or may not make an arrest. Upon arrest, youth may or may not be referred to juvenile court, and depending on the seriousness of the offense, they may or may not be confined. Cases of crime at each juncture in the sequence are lost, resulting in an undercount. Moreover, if some cases are more likely to be lost than others (e.g., low-income youth are more likely to be arrested, referred to court, and confined than their wealthier counterparts), the resulting portrait is likely to be distorted. The likelihood of distortion increases the more official records are removed from the scene of the crime, which is to say that data on confinement are more likely to be distorted than data from court records, but those data are more likely to be distorted than data from arrest records. The fundamental issue is whether the portrait revealed from an analysis of official records at any juncture resembles the reality of juvenile offending or merely reflects the juvenile justice system's response to it. One approach to assessing this distinction empirically is to compare results from an analysis of official data with

those from self-reported data, which is the approach applied in this chapter.

A Portrait of Juvenile Offending Using Self-Report Data from Add Health

Self-reported survey data are drawn from two of three waves of the National Longitudinal Study of Adolescent Health (Add Health). Add Health is a nationally representative, probability-based survey of youth in the United States. Wave I was conducted in 1995 and included youth from grades 7 through 12. Wave II covered the same grades in 1996, and wave III was conducted with the same participants in 2001–2002, when the youth interviewed in wave I were 18–26 years of age. The Add Health data are well suited for this analysis because they provide information on self-identified juvenile offenders, covering violent and nonviolent offenses and more minor forms of crime. Moreover, recent assessments of juvenile offenders and victims have drawn information from other surveys of youth (e.g., Snyder & Sickmund, 2006; U.S. Department of Health and Human Services, 2001), but Add Health data have not been analyzed for this purpose. Hence, these data provide a new addition to presenting a portrait of juvenile offending in the United States.

Add Health is based on a multistage cluster design in which the clusters were sampled with an unequal probability (Harris et al., 2003). At the first stage, 26,666 high schools were sorted into five categories, including school size, school type (public, Catholic, private), level of urbanization, and percent white. High schools were randomly ordered in these categories, and 80 were randomly selected. Of these 80 schools, 52 agreed to participate, with 28 replacement schools selected from these clusters. A replacement school was the school that followed the initially selected school on the randomly sorted list. A single-feeder school (middle or junior high school) was also selected for each of the 80 high schools. The feeder's probability of selection was proportional to the percentage of the incoming class attributable to the feeder. Four high schools did not have an eligible feeder because incoming students came from numerous sources, and 20 high schools basically were their own feeder because they included seventh and eighth grades.

A total of 90,118 students in the participating schools completed an in-school survey. At the second stage of sampling, youth and parents were sampled from stratified school rosters from all the schools. The strata included gender, grade level, and school level, with simple sizes being roughly equal for all strata. Participants were administered

a 1½-hour in-home interview. In 1996, the wave II in-home questionnaire was administered to youth only. In wave III, in-home interviews were conducted between July 2001 and April 2002, with participants moving from adolescence into young adulthood (ages 18–26).

Data for the present analysis were drawn from youth who participated in waves I and III (N = 14,322) and self-reported their involvement in different forms of crime. Wave I data are used to calculate prevalence rates for the entire youth sample and to show the distribution of those rates by gender, ethnicity, and age. Wave III data are used to estimate persistence in criminal offending into late adolescence and early adulthood. Three categories of offending are analyzed: violent offenses, nonviolent offenses, and more minor forms of crime. Violent offending is measured through responses to the following questions:

- How often did you get into a serious physical fight?
- How often did you hurt someone badly enough to need bandages or care from a doctor or nurse?
- How often did you use or threaten to use a weapon to get something from someone?
- How often did you take part in a fight where a group of your friends was against another group?

The referent period for these questions, as well as those for nonviolent offenses and minor crimes, is "in the past 12 months," and response categories for all questions bearing on all types of criminal offending included *never, one or two times, three or four times,* and *five or more times.* An additive composite index was constructed by summing responses across these four categories (alpha = .74 for wave I and .63 for wave III). Similarly, an additive composite index was formed for nonviolent offenses by summing responses to the following questions (alpha = .66 for wave I and .60 for wave III):

- How often did you deliberately damage property that didn't belong to you?
- How often did you drive a car without its owner's permission?
- How often did you steal something worth more than $50?
- How often did you go into a house or building to steal something?

Minor crime offending was measured through an additive composite index constructed from these questions (alpha = .68 for wave I and .57 for wave III):

- How often did you paint graffiti or signs on someone else's property or in a public place?
- How often did you take something from a store without paying for it?
- How often did you steal something worth less than $50?
- How often were you loud, rowdy, or unruly in a public place?

The alpha coefficient for wave III is low because only two items were available in this wave of data collection, and one of them was not identical to the wave I items (buying, selling, or holding stolen property).

Given these composite indices, prevalence rates of criminal offending are represented as the percentage of age, gender, or ethnic-specific populations that self-identify as violent, nonviolent, or minor criminal offenders (i.e., scored above zero on each of the indices).

A Portrait of Juvenile Offending Using Uniform Crime Report Arrest Data from *Crime in the United States*

Official data on juvenile offending are taken from "persons arrested" in the Federal Bureau of Investigation (FBI) Uniform Crime Report (UCR), specifically *Crime in the United States* (CIUS). This annual publication (available online, *www.fbi.gov/ucr/ucr.htm*) reports the number and rate of "crimes known to the police" for eight major felonies, four of which are violent crimes (murder, forcible rape, aggravated assault, and robbery), three that are property crimes (burglary, larceny–theft, and auto theft), and arson. CIUS also provides data on clearance rates and law enforcement employees. Relevant to the present analysis, the number and percent distribution of persons arrested by age and gender are provided for 29 offenses.

These data allow the calculation of percent distributions of juvenile offenders by age for each of the three offense categories: violent offenses, nonviolent offenses, and minor crimes. Percent distributions can also be constructed by gender and age, but the CIUS does not provide arrest data by ethnicity and age; therefore, ethnic distributions for juvenile offenders cannot be presented. This limitation with the CIUS data underscores the importance of self-reported surveys for presenting a more complete portrait of juvenile offending in the United States. For comparative purposes, arrest data are obtained for the same time period for which prevalence rates are calculated from the Add Health survey data (Federal Bureau of Investigation, 1995).

Comparing the Two Sources of Data on Juvenile Offenders

An important conceptual distinction must be maintained when comparing Add Health survey data with UCR arrest data from the CIUS annual report. Each source of information answers a slightly different question. Add Health data allow us to address the extent to which violent, nonviolent, or minor offending is a problem in the youth population. The CIUS arrest data address this question: Among youthful offenders, how much of their offending is a violent, nonviolent, or minor crime problem? Stated in statistical terms, the denominator of Add Health prevalence rates is the number of youth of a specific age, gender, or ethnicity in the sample, with the numerator being the number within those categories reporting involvement in some form of criminal offending (e.g., males 12–13 years of age who reported committing violent offenses, divided by the number of males 12–13 years of age in the sample). For CIUS arrest data, the denominator is the number of arrested juvenile offenders in a specific gender or age category, with the numerator being the number of those offenders who were arrested for a specific type of criminal offending (e.g., the number of males 12–13 years of age arrested for committing violent offenses, divided by the number of arrested males 12–13 years of age).

Given this distinction, the rates derived from the two data sources are not directly comparable. To address this comparability issue, alternative rates are calculated. Specifically, juvenile offenders are identified from self-reports of youth in the Add Health survey data, and percentage distributions by gender and age are calculated based on this subgroup. These distributions are more directly comparable to UCR arrest distributions because both are based on subgroups of juvenile offenders, not youth in the general population.

Evidence Bearing on the Four Questions

Drawing on Add Health survey data and the UCR official arrest data from the CIUS annual report, the discussion now moves to addressing empirically the four fundamental questions of this chapter.

- *Question 1: What have been the recent trends in juvenile offending?*

Empirically documenting trends requires tracking juvenile offending over time, ideally with annual estimates of prevalence over an extended time period. Trends have been previously estimated using longitudinal designs, particularly panel studies of youth. Although they are tremendously rich in detail and have yielded considerable

insight into the sources of juvenile offending, they have not been national in scope, being limited to local samples (see Thornberry & Krohn, 2003, for a comprehensive review). Other survey-based longitudinal studies are national in scope but tend to focus on specific types of offending, such as alcohol, drug, and tobacco use (e.g., Johnston, O'Malley, Bachman, & Schulenberg, 2006), school crime (e.g., Centers for Disease Control and Prevention, 2006), and gang presence and activity (e.g., Egley, Howell, & Major, 2006), or they have been limited to the number of years covered (e.g., Bureau of Labor Statistics, 2002). Nonetheless, these national surveys have been used effectively in recent reports on trends and patterns in juvenile offending and victimization (e.g., Snyder & Sickmund, 2006; U.S. Department of Health and Human Services, 2001).

However, considerable attention has been given to tracking and accounting trends in lethal violence involving juvenile offenders (e.g., Blumstein, 1995; Blumstein & Rosenfeld, 1998; Cook & Laub, 1998, 2002; Cork, 1999; Fingerhut, Ingram, & Feldman, 1998; Fox & Zawitz, 2006; Messner, Raffalovich, & McMillan, 2001). The trend since the mid-1980s is well known. Youth homicide rates accelerated rapidly to epidemic proportions between 1984 and 1993–1994. At that point in time, youth 18–24 years of age had the highest homicide rates in the country, followed by 14- to 17-year-old youth, which was a historic elevation for this latter age group. Moreover, homicide rates for all other age groups declined during this period. Since 1993–1994, youth homicide rates for all groups have declined precipitously, although an upturn in arrests for homicide involving youth under 18 years of age between 2001 and 2005 has been reported (Federal Bureau of Investigation, 2005). Whether this recent increase in youth homicide is the beginning of a new pattern of escalation or a temporary spike in the time trend remains to be seen.

Concerning trends in nonlethal youth violence, Snyder and Sickmund (2006) recently compared UCR arrest data and National Crime Victimization Survey (NCVS) data for youth 12–17 years of age between 1980 and 2003. The NCVS is an ongoing survey of a nationally representative sample of 77,200 households including nearly 134,000 persons. Data on a wide variety of criminal victimization experiences are collected from all household members 12 years of age or older. The annual survey has been ongoing in the United States since 1973, with a redesign occurring in 1992.

Even though the focus of the NCVS is on victimization, respondents reporting violent victimization are asked to estimate whether the age of at least one offender (or the only offender) involved is between 12 and 17. Snyder and Sickmund (2006) found that the number of vic-

timizations is substantially greater than the number of arrests for every year in the 24-year time period, meaning much more victimization occurs nationally than appears in UCR arrest records. Nonetheless, they made the numbers comparable by plotting percent differences of each year in the interval from the 24-year average for arrests and for victimizations, respectively. The standardized trends show comparable patterns of variation between 1980 and 2003. Specifically, both the arrest trends and the perceived offender to violent victimization trends slightly declined between 1980 and 1985–1987, but then they increase sharply until 1993–1994, with a sharp downturn from that point in time through the end of the period. In short, nonlethal violent juvenile offending appears to have followed a similar trend to lethal juvenile violence. Whether nonlethal youth violence will show an increase in more recent years, as reported for lethal violence, also remains to be seen. That said, an increase in arrests of youth under 18 has been reported for robbery, but arrests for nonviolent property crimes have continued to decline (Federal Bureau of Investigation, 2005).

- *Question 2: What is the prevalence of juvenile offending, and how is it distributed?* According to the Add Health survey data, violent juvenile offending is quite prevalent, with an estimated 41.3% of the 14,322 youth in grades 7–12 reporting having engaged in some form of violence one or more times during the preceding 12 months, as of 1995. Youth involvement in nonviolent offenses is not as prevalent. An estimated 26.6% of those youth reported engaging in such offenses one or more times in the past year. Not surprisingly, the most common type of juvenile offending involves minor crimes. Of all youth in wave I of the Add Health survey data, more than half (58.6%) indicated that they had committed a specific minor crime one or more times during the 12-month referent period.

Although the prevalence rates of juvenile offending vary across types of criminal offenses (i.e., violent, nonviolent, and minor crimes), the distribution of these rates within each type of criminal offense by gender and ethnicity is virtually identical. As shown in Table 1.1, the prevalence rates for males are quite similar to those of females for each category of crime. That pattern holds true for ethnicity as well. The prevalence rates for each type of criminal offending are comparable across ethnic categories, including non-Hispanic white, African American, Latino, and other ethnicities. Stated in statistical terms, the small variations by gender or ethnicity for each type of criminal offending are statistically insignificant, with the exception of nonviolent offending. For this category of crime, Asian–Pacific Islanders have a slightly elevated prevalence rate (31.7%).

TABLE 1.1 Prevalence of Offenses by Gender and Ethnicity Using Add Health

	Offense		
	Violent	Nonviolent	Minor
Gender			
Male	40.9	26.1	58.2
Female	41.8	27.1	59.0
Ethnicity			
Non-Hispanic white	40.8	26.4	58.0
African American	43.6	25.3	57.9
Latino	40.1	26.5	59.3
Asian–Pacific Islander	40.2	31.7	62.1
Other	41.1	26.8	59.1

A different pattern emerges concerning the relation between age and criminal offending. As shown in Figure 1.1, the prevalence rates are relatively similar from ages 13 to 18, but they decline significantly from 19 to 21 years of age. Irrespective of the type of criminal offending, these shifts by age are statistically significant, as indicated by the likelihood ratio chi square statistic, with 10 degrees of freedom (violent offending, 57.5, $p = .00$; nonviolent offending, 23.5, $p = .01$; minor criminal offending, 18.2, $p = .05$). This distribution corresponds to the well-documented pattern of desistance in crime by age (e.g., Thornberry, 2004).

• *Question 3: How do Add Health survey data compare with UCR arrest data from the CIUS annual report?* Now, consider comparisons between Add Health survey data and the UCR official arrest data. Once again, self-identified offenders in the Add Health survey were compared to arrested offenders in the FBI's CIUS report. Table 1.2 displays the distribution of offenders by gender from both sources of data by type of criminal offense. Observe that the gender differences of juvenile offenders from Add Health are again virtually identical regardless of the type of criminal offending. Approximately half are male and half are female across criminal offense categories. Conversely, sharp gender differences are apparent and persistent across those categories concerning the CIUS arrest data. The ratio of males to females in the gender distribution of arrests is almost six-to-one (5.75) for violent offenses, three-to-one (2.77) for nonviolent offenses, and two-to-one (1.79) for minor crimes. These varying gender patterns between the two sources of data on juvenile offenders suggest that

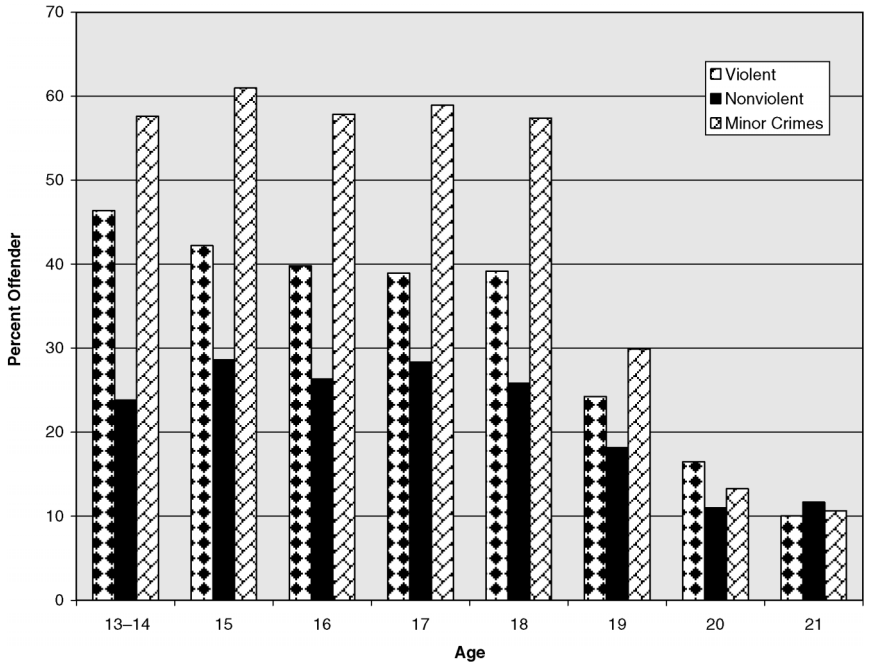

FIGURE 1.1. Prevalence by age using Add Health.

TABLE 1.2. Offender Distribution by Gender Comparing Add Health and CIUS Arrests

	Minor crimes		Violent		Nonviolent	
Gender	CIUS arrest data	Add Health data	CIUS arrest data	Add Health data	CIUS arrest data	Add Health data
Male	85.1	50.1	73.5	49.6	64.2	50.3
Female	14.8	49.9	26.5	50.4	35.8	49.7

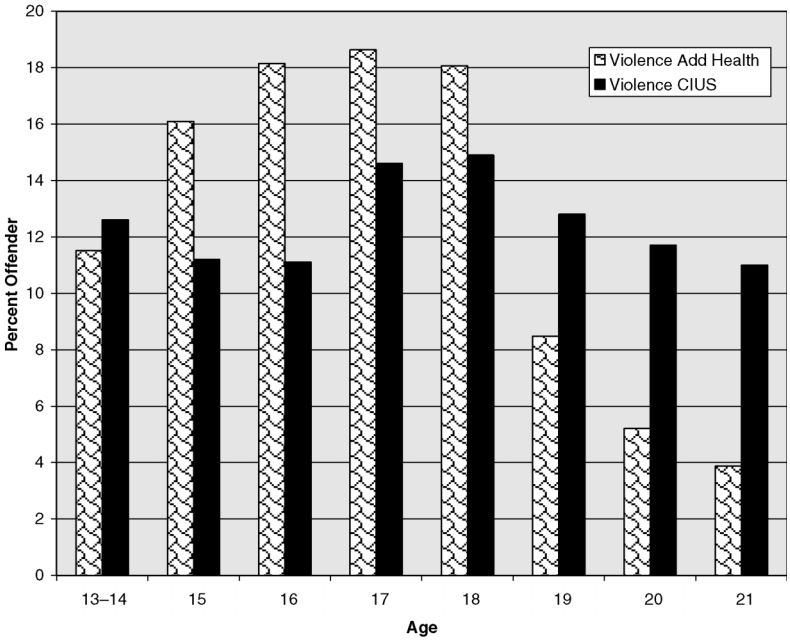

FIGURE 1.2. Offender distribution by age comparing Add Health and CIUS arrests for violent offenses.

males are more likely than females to be arrested for their criminal offending, particularly when it comes to violent crimes.

Comparisons of the offender distributions by age for Add Health survey data and CIUS arrest data are shown in Figures 1.2–1.4. For violent offending, the pattern of desistance by age is more pronounced for the Add Health data than the CIUS arrest data. Among youth arrested for violent offending (see Figure 1.1), 17- and 18-year-olds are most common, representing about 15% of those arrested. The distributions for the other age categories hover between about 11% and 13%, with no sharp desistance pattern to age 21, the last of the single-year age categories reported in the CIUS report. Concerning the Add Health data, the age of violent offenders gradually rises and peaks between 16 and 18, with a clear pattern of desistance through age 21.

These disparities between Add Health survey and UCR official data are not marked for nonviolent offenses and minor crimes. As presented in Figure 1.3, the age of nonviolent offenders increases to 17 and drops sharply for the subsample of offenders from the Add Health sur-

vey, whereas the distribution of nonviolent arrested offenders is greatest in the younger age categories and declines steadily to age 21. However, both sources of data on offenders reveal a pattern of desistance by age. For minor crimes, Add Health survey data and UCR official data reveal a similar portrait of juvenile offenders. Both show an increase with age up to about 17 (although the peak for Add Health data is 15) and then a clear decrease to the end of the age range, as displayed in Figure 1.4.

- *Question 4: How common is repeated and chronic juvenile offending?*

High-frequency juvenile offenders were identified in the Add Health data by selecting those that were one standard deviation above the mean for each of the composite indices reflecting the frequency of violent, nonviolent, and minor criminal offending. This cut score would result in the identification of 16% of the sample in the upper tier of offending, assuming that violent, nonviolent, and minor criminal offending are normally distributed. That is not the case. The distributions for all three criminal offense categories are positively skewed,

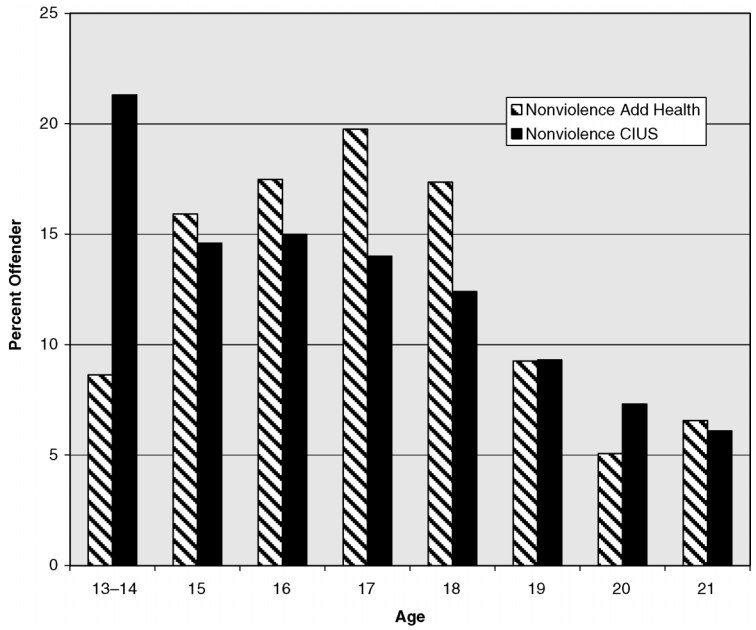

FIGURE 1.3. Offender distribution by age comparing Add Health and CIUS arrests for nonviolent offenses.

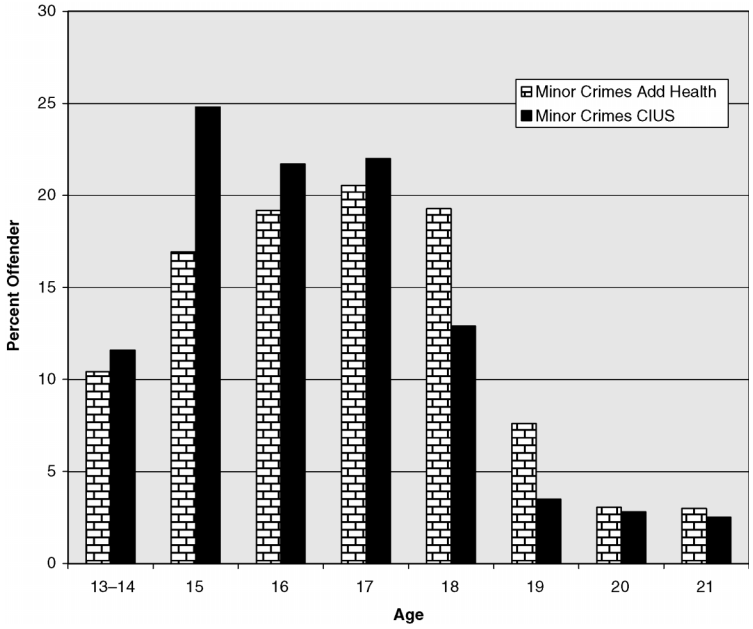

FIGURE 1.4. Offender distribution by age comparing Add Health and CIUS arrests for minor crimes.

with a preponderance of cases at the low end of the offending continuum and a steady and relatively sharp decline in the distribution of cases as the frequency of offending increases. Using this procedure, high-frequency offenders constitute 8.9% of the sample for violent offenses, 6.9% for nonviolent offenses, and 10.6% for minor criminal offenses. Only 2.3% of the 14,322 youth in grades 7–12 comprise high-frequency offenders across all three offense categories. These findings are consistent with previous research reporting a small percent of youth in the category of serious and frequent offenders (Moffitt, 2004). Moreover, although some statistically significant differences were found, the magnitude of those differences was not substantial. For example, females were significantly higher than males in high-frequency offending for nonviolent crimes, but the difference was only one percentage point (7.4 vs. 6.4%). Statistically significant differences were found by ethnicity for violent offending and minor criminal offending, but again, the differences were small, ranging from 7.4 to 10.4% for violence crimes and 9.8 to 13.6 % for minor crimes across the five ethnic categories (non-Hispanic whites, Hispanic, African American, Asian–Pacific Islander, and other ethnicities).

Apart from high-frequency offenders, how prevalent is persistent offending in the adult years? This question was addressed by determining the percentage of the 14,322 youth in the Add Health sample who self-identified as offenders in wave I and then again in wave III, when the age range was 18–26. Similar to high-frequency offenders in the adolescent years, only a small percentage of survey participants persists in offending: 12.0% of the sample persisted into the adult years for violent offenses, 11.4% persisted in nonviolent criminal offenses, and 9.6% persisted in minor crimes. Only 2.2% of the Add Health sample had patterns of persistence across all three types of criminal offending. Moreover, no significant differences in persistence were found by gender or ethnicity across all three categories of criminal offending.

Are high-frequency offenders in adolescence more likely to persist in their offending as they transition to adulthood? The answer is no. Cross-tabulating the two dummy variables for each category (i.e., did or did not qualify as a high-frequency offender by did or did not qualify as a persistent offender) yielded no statistically significant chi square statistics and weak measures of association (gamma coefficients never exceeding .06). The cross-tabulations showed a strong pattern of desistance even for high-frequency offenders; specifically, 86.9% of the high-frequency violent offenders in adolescence desisted in young adulthood, 87.5% of high-frequency nonviolent offenders desisted, and 90% of those involved in minor crimes during adolescence desisted as they aged into their young adult years. Among those who were high-frequency offenders across all three criminal offense categories (N = 328), 76.5% did not persist in their offending patterns, as reported in wave III of the Add Health survey. Hence desistance with increasing age remains the dominant pattern, even for high-frequency offenders.

Summary and Conclusion

The results of this descriptive analysis showed that survey-based prevalence rates (juvenile offenders in the general youth population) are undoubtedly higher than those derived from official arrest data, but both sources of data show similar trends over time. Specifically, lethal and nonlethal youth violence crested in the early 1990s and declined from that point into the new millennium, with a slight upturn in recent years. Rates of nonviolent property crime have continued to decline.

Additionally, the Add Health survey data revealed that prevalence rates in adolescence are rather high and vary across type of

offending, being highest for minor crimes (almost 59%), followed by violent offending (about 41%), and then nonviolent offending (approximately 27%). However, no significant evidence was found in these data of differential involvement in violent, nonviolent, or minor criminal offending by gender or ethnicity.

Comparisons between self-identified offenders and arrested offenders documented substantial gender differences among the arrested, with males arrested at higher rates than females, especially for violent crimes. The age–juvenile offending distribution was similar between the two sources of information for nonviolent and minor criminal offending, although the pattern for violent offending was more evenly distributed across age groups for the official arrest data.

Nonetheless, both Add Health survey and official arrest data showed a clear pattern of desistance with age across all categories of criminal offending, and although small percentages of youth self-identified as repeat (high-frequency) offenders, desistance from offending was also the dominant pattern even among this subgroup. The result, of course, is that only small percentages of youth persisted in their offending behavior (approximately 10–12%).

In short, the analysis of Add Health survey data and official arrest data from the FBI's CIUS annual report produced a portrait of juvenile offending characterized by a distinct feature: For most youth, offending is prevalent and subsides with age, but for a small minority of youth, it persists into adulthood. This portrait is certainly not new. In fact, it has been the point of departure for much developmental theory and research on crime over the life course (Benson, 2002; Farrington, 2005; Sampson & Laub, 2005; Thornberry, 2004).

The analytical results reported in this chapter corroborate those of previous research on the prevalence and incidence of juvenile offending and have a common implication. Given the widespread nature of juvenile offending, the behavior is more normative than "abnormal" and, for most youth, quite possibly adaptive to developmental demands of an increasingly prolonged adolescence (Moffit, 2004). Criminalization of "adolescent-limited" behavior, culminating in detention and incarceration, has been shown to compromise transitions into conventional adult roles (e.g., Sampson & Laub, 2004). Instead of potentially jeopardizing our adolescents' futures, strength-based approaches should be used to augment positive developmental trajectories for the majority of those in adolescence. Scarce juvenile justice resources should be directed to the minority who persist in criminal offending, recognizing that even among those who persist, such offending ultimately declines with age (Sampson & Laub, 2005).

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