AJPH July 2021, Vol 111, No.

The Case for Conceptualizing Youth-Police Contact as a Racialized Adverse Childhood Experience

Dylan B. Jackson, PhD

ABOUT THE AUTHOR

Dylan B. Jackson is with the Department of Population, Family, and Reproductive Health, Johns Hopkins Bloomberg School of Public Health, Baltimore, MD.

్ద్రి See also Geller, p. 1300.

n comparison with other age groups, youths are disproportionately subjected to increased surveillance by and involuntary contact with the police. Youths' overexposure to the police is partly attributable to their regular and extensive use of public spaces, the ongoing deployment of proactive policing tactics (i.e., strict enforcement of minor crimes to deter criminal behavior), and police presence in schools. In 2018, more than 10 million US youths and young adults (approximately one in four) experienced a police encounter, and approximately two thirds of these were police initiated. Recent findings from national data indicate that such encounters can produce significant deleterious impacts to health and wellbeing.² Still, these seemingly ubiquitous police-initiated interactions with young people in the United States are not randomly distributed, but instead are more heavily concentrated in underresourced communities of color and serve as conduits for racial stratification in the criminal legal system. Specifically, abundant evidence indicates that Black youths—

particularly those in disadvantaged, marginalized communities—are disproportionately stopped by the police.³ Many questions remain, however, about police hypersurveillance of youths, including whether the distribution of specific interactional features of youth-police encounters is also racialized on a national scale.

In this issue of AJPH, Geller (p. 1300) illuminates this critical gap in our collective knowledge with her analysis of national data measuring youth–police contact in urban areas of the United States. Geller's analysis focuses on how race intersects with age, sex, and class to predict interactional features of youth–police encounters and, in doing so, expands on existing evidence linking aggressive policing to emotional distress, stigma, and posttraumatic stress among this sample of youths.²

She finds that nearly one in three youths reporting police-initiated contact was first stopped by the police when they were between 8 and 12 years of age. Furthermore, vicarious police contact was exceedingly common among

these youths, with 69% reporting indirect exposure to police stops through family, friends, neighbors, and associates. Although vicarious stops were largely unrelated to race in this sample, Geller's analysis revealed that Black boys in particular were most likely to experience direct police-initiated contact, and more than two thirds of those stopped reported officer aggression or intrusiveness during their most salient stop. By contrast, this was the case for only one in four White boys who were stopped. Experiences of officer intrusion were also concentrated among Black girls and virtually nonexistent among White girls. Exposure to aggressive policing was, therefore, heavily racialized among boys and girls. Still, these disparities were concentrated among low socioeconomic status youths. For boys, moreover, racial disparities were largest at higher levels of delinquency, despite persisting across youths' behavioral profiles.

Geller's work powerfully underscores the burdens of inequitable youth-police interactions and unequivocally reveals these experiences in the lives of Black youths for what they are—adverse childhood experiences, or "events that pose a serious threat to a child's physical or psychological well-being."⁴ The descriptor of Black youths' exposures to aggressive policing as adverse childhood experiences, therefore, is not only apt, but completely harmonious with Geller's findings. But let me be perfectly clear these youth-police encounters are not only adverse for Black youths but also traumatic, as they are experienced as "extremely frightening, harmful, or threatening"⁴ and have the capacity to trigger recurring negative emotions and physiological symptoms. The posttraumatic stress associated with these events is evidenced by recent population-based research,² studies

examining physiological stress biomarkers,⁵ and qualitative research grounded in youth voices. 6-8 When Black youths describe the police, they describe them as dangerous, controlling, untrustworthy, and prejudiced, and their encounters (or anticipated encounters) with them as overwhelming, emotionally draining, and serving only to exacerbate and "compound everyday adversities."6-8 One Black youth in Baltimore even referred to the police as his "number one fear in life."

Ultimately, what these youths convey in this work is that police-induced trauma is, in many respects, its own class of trauma; it is set apart as a uniquely potent historical, racialized, intergenerational form of trauma that is affixed to a collective experience of marginalization. It is, as Bryant-Davis and her colleagues put it, "racially motivated police brutality trauma"9(p854) that demands interpretation through the appropriate sociocultural lens. We must acknowledge that, for Black youths, police-initiated microaggressions and violence—which are often inextricably tied to assumptions of Black criminality—are toxic, modernday echoes of centuries of abuse and oppression, channeled through an institution that has been an instrument of structural racism for centuries. Such an acknowledgment also necessitates that we examine this form of adversity in context. Upon doing so, we can begin to unravel a profound paradox: although youths' exposures to aggressive policing are certainly racialized adverse childhood experiences, they also defy categorization as isolated experiences or discrete events because of the crippling and seemingly unending weight of dread and hypervigilance in which these experiences are embedded. If events characterized by these features and producing

these intense reactions do not qualify as adverse, I am not sure what does.

Moving forward, explicit examinations of exposure to aggressive policing in the context of other adverse childhood experiences are needed, including closer attention to how racialized, aggressive policing may not be fully captured by current screening tools. For instance, despite the push to expand the concept of adverse childhood experiences in recent years, few existing tools that screen for adverse childhood experiences ask about police contact¹⁰ and may consequently overlook many affected youths in need of supports and services. Ultimately, we cannot ameliorate the health inequities associated with this form of state-perpetrated violence if we are not conducting proper screenings, and thus far, there has been no systematic effort in the United States to measure and study the aggressive policing of youths in the context of other adverse childhood experiences.

Given the present findings, it may be necessary to examine racialized, aggressive policing through a culturally informed adverse childhood experiences (or C-ACE) framework, 11 which acknowledges that, in the United States, certain racism-related adversities may be especially concentrated among Black youths. Considering that aggressive policing undermines adolescent well-being,² more research is also needed to fully disentangle exactly how both direct and vicarious exposure to violent and aggressive policing might contribute to inequities in adolescent mental and physical health via racial stratification. Finally, we must identify the policy and programmatic levers capable of mitigating the trauma of racialized police encounters, such as school personnel who can and should be trained to

facilitate nonstigmatizing, culturally competent conversations about these experiences in ways that provide support and prevent retraumatization.

In 2018, the American Public Health Association released a statement concerning the pressing need to address police violence against communities of color as a public health issue. 12 Ultimately, Geller's results reaffirm that need while also beckoning us to confront the ongoing and particularly egregious crisis of overpolicing Black youths in US communities and its countless harms, which we still do not fully comprehend. It is well past the time to curtail police hypersurveillance of youths and bolster community infrastructure to promote enhanced youth participation in the bastions of civic life and engagement, such as community centers, after-school programs, and youth empowerment programs. We must honor the humanity of and potential in all youths, centering our efforts on their strengths and trusting in and enabling their boundless promise. Youths have a voice and they have spoken. Will we listen? AJPH

CORRESPONDENCE

Correspondence should be sent to Dylan B. Jackson, Department of Population, Family, and Reproductive Health, Johns Hopkins Bloomberg School of Public Health, 615 N Wolfe St., Baltimore, MD 21205 (e-mail: dylan.jackson@jhu.edu). Reprints can be ordered at http://www.ajph.org by clicking the "Reprints" link.

PUBLICATION INFORMATION

Full Citation: Jackson DB. The case for conceptualizing youth-police contact as a racialized adverse childhood experience. Am J Public Health. 2021;111(7):1189-1191.

Acceptance Date: April 5, 2021.

DOI: https://doi.org/10.2105/AJPH.2021.306324

ACKNOWLEDGMENTS

The author would like to thank Lisa Bowleg, PhD, for her comments on an earlier version of this editorial.

CONFLICTS OF INTEREST

The author has no conflicts of interest to declare.

REFERENCES

- 1. Harrel E, Davis E. Contacts between police and the public, 2018. December 2020. Available at: https:// www.bis.gov/content/pub/pdf/cbpp18st.pdf. Accessed April 21, 2021.
- 2. Jackson DB, Fahmy C, Vaughn MG, Testa A. Police stops among at-risk youth: repercussions for mental health. J Adolesc Health. 2019;65(5):627-632. https://doi.org/10.1016/j.jadohealth.2019.
- 3. Epp CR, Maynard-Moody S, Haider-Markel DP. Pulled Over: How Police Stops Define Race and Citizenship. Chicago, IL: University of Chicago Press; 2014. https://doi.org/10.7208/chicago/ 9780226114040.001.0001
- 4. Bartlett JD, Sacks VA. Adverse childhood experiences are different than child trauma, and it's critical to understand why. April 10, 2019. Available at: https://www.childtrends.org/blog/ adverse-childhood-experiences-different-thanchild-trauma-critical-to-understand-why. Accessed April 21, 2021.
- 5. Browning CR, Tarrence J, LaPlant E, et al. Exposure to police-related deaths and physiological stress among urban Black youth. Psychoneuroendocrinology. 2021;125:104884. https://doi.org/10. 1016/j.psyneuen.2020.104884
- 6. Smith Lee JR, Robinson MA. "That's my number one fear in life. It's the police": examining young Black men's exposures to trauma and loss resulting from police violence and police killings. J Black Psychol. 2019;45(3):143-184. https://doi.org/10. 1177/0095798419865152
- 7. Nordberg A, Crawford MR, Praetorius RT, Hatcher SS. Exploring minority youths' police encounters: a qualitative interpretive meta-synthesis. Child Adolesc Social Work J. 2016;33(2):137-149. https://doi. org/10.1007/s10560-015-0415-3
- 8. Nordberg A, Twis MK, Stevens MA, Hatcher SS. Precarity and structural racism in Black youth encounters with police. Child Adolesc Social Work I. 2018;35(5):511-518. https://doi.org/10.1007/ s10560-018-0540-x
- 9. Bryant-Davis T, Adams T, Alejandre A, Gray AA. The trauma lens of police violence against racial and ethnic minorities. J Soc Issues. 2017;73(4):852-871. https://doi.org/10.1111/josi.12251
- 10. Boyd RW, Ellison AM, Horn IB. Police, equity, and child health. Pediatrics. 2016;137(3):e20152711. https://doi.org/10.1542/peds.2015-2711
- 11. Bernard DL, Calhoun CD, Banks DE, Halliday CA, Hughes-Halbert C, Danielson CK. Making the "C-ACE" for a culturally-informed adverse childhood experiences framework to understand the pervasive mental health impact of racism on Black youth. J Child Adolesc Trauma. 2020;1-5. https:// doi.org/10.1007/s40653-020-00319-9
- 12. American Public Health Association. Addressing law enforcement violence as a public health issue. November 13, 2018. Available at: https://www.apha. org/policies-and-advocacy/public-health-policystatements/policy-database/2019/01/29/lawenforcement-violence. Accessed April 21, 2021.



Oral Health in America: Removing the Stain of Disparity

Edited by: Henrie M. Treadwell, PhD and Caswell A. Evans, DDS, MPH

Oral Health in America details inequities to an oral health care system that disproportionately affects the poor, those without insurance, underrepresented and underserved communities, the disabled, and senior citizens. This book addresses issues in workforce development including the use of dental therapists,

the rationale for the development of racially/ethnically diverse providers, and the lack of public support through Medicaid, which would guarantee access and also provide a rationale for building a system, one that takes into account the impact of a lack of visionary and inclusive leadership on the nation's ability to insure health justice for all.

Place orders at aphabookstore.org. Email bookstoreservices@apha.org to request exam copy for classroom use.

ISBN: 978-087553-3056 2019, Softcover List Price: \$30 APHA Member Price: \$21

