



Sexual and Reproductive Health Among Youth Who Experience the Justice System

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Introduction

Adolescence and the transition to young adulthood involve physical, emotional, and social changes that have implications for a young person's sexual and reproductive health. This summary describes existing research and data about sexual and reproductive health among youth who experience the justice system to inform youth-supporting professionals about youths' sexual and reproductive health and the health-related supports professionals may offer youth. We address the following four domains: (1) sexual activity, (2) condom use, (3) sexually transmitted infections (STIs), and (4) pregnancy and childbearing.

This research summary describes data from 16 studies of the sexual and reproductive health of youth who experience the justice system. The data are found within research studies focused on youth who are or were detained or incarcerated in a justice system facility and youth who experience justice system involvement without detention or incarceration at the time of the study (e.g., youth who have been arrested or who are or were on probation). Many studies are about youth under age 18 and are based on small, local samples rather than on large, national samples. To help contextualize these data, Appendix Table 1 provides information about the studies referenced in this summary, including information about sample size, geography, and study participant characteristics (e.g., age range, participant sex).

In addition to describing available data analysis about sexual and reproductive health among youth who experience the justice system, each sub-section provides high-level takeaways about the data and references for additional information to enhance practice. An infographic that visualizes key takeaways about youths' sexual and reproductive health accompanies this summary ([Sexual and Reproductive Health Among Youth Involved in the Justice System](#)).

Activate: The Center to Bring Adolescent Sexual and Reproductive Health Research to Youth-Supporting Professionals bridges the gap between research and practice in support of the Office of Population Affairs' aims to promote adolescent health and prevent unintended teen pregnancy. Activate translates research and creates research-based resources for use by professionals who support young people experiencing the child welfare and/or justice systems, homelessness, and/or disconnection from school and work (i.e., opportunity youth).

Summary of Findings

In 2023, on any given day, about 22,000^a youth under age 21 in the United States were detained or incarcerated in juvenile justice facilities.¹ For every youth whose contact with the justice system results in their detention, three more are not detained and have their cases dismissed, handled informally, or diverted

^a This count includes youth who were in detention centers, boot camps, or long-term secure facilities. If youth in residential treatment facilities are included, the count increases to roughly 27,000 youth.

to a community-based program.² Additionally, approximately 180,000 young adults ages 18 to 24 are incarcerated in adult jails or prisons.^{3,4} Regardless of their justice system experiences, all of these young people benefit from information about their sexual and reproductive health and from access to appropriate, youth-friendly sexual and reproductive health care services.

Sexual activity

Most youth who experience the justice system are not sexually active during their early teenage years, but they are more likely than other youth to become sexually active during those years.

In the general population of youth in the United States, it is rare to be sexually active before or during the early teenage years. In 2023, approximately 3 percent of high schoolers reported first having sex before age 13.⁵ Studies have found that both female and male youth who experience the justice system were first sexually active at an early age more frequently than the general population of high school students. Further, the ages at first sex measured in several of these studies (for example, age 13) were earlier than the age of consent in most states. However, the five studies reporting age at first sex did not discuss the connections among early sex, perceived consent, legal age of consent, and abuse and neglect. Additionally, only two studies reported the exact age of the first sexual experience (the remainder reported it as above/below a particular age).^{6,7,8,9,10}

The table below presents specific statistics from reviewed studies. More information about the studies, including sample sizes and participant ages, can be found in Appendix Table 1.

Studies of Detained/Incarcerated Youth	Studies of Youth with Other Justice System Involvement
- The average age at first sex among a sample of predominantly male youth in a detention facility was 13.¹¹ - The median age at first sex among a sample of previously incarcerated young men who had sex with women was 14.¹² 38% of sexually active female youth in one detention facility reported having sex before age 14.¹³	10% of a sample of sexually active female youth with recent justice system involvement or police contact reported having sex before age 13.¹⁴ 75% of a sample of youth involved with both the juvenile justice and child welfare systems reported having sex before age 15, including 15% who reported having sex before age 11.¹⁵

Research with a representative sample of adults has found that early age at first sex was significantly more likely among those who had experienced childhood adversities such as physical, psychological, or sexual abuse; neglect; or parental incarceration.¹⁶ Youth who experience the justice system are more likely to experience such adversities, on average, than their peers without justice system involvement.¹⁷ Further, adolescents who experience commercial sexual exploitation or sex trafficking are more likely to be arrested than those who do not experience such exploitation.¹⁸ While some states have laws that protect sexually exploited minors from being prosecuted for sex work-related crimes, such policies are not universal.¹⁹ Because of this, some young victims of commercial sexual exploitation may encounter the justice system as a result of that exploitation.

The proportion of youth who experience the justice system who are sexually active increases as youth enter their mid-to-late teenage years, and many of those youth have had multiple sexual partners by their late teens.^b Findings from several studies suggest that youth who experience the justice system have more sexual partners than the general population of high schoolers.

Studies of Detained/Incarcerated Youth	Studies of Youth with Other Justice System Involvement
90% to 94% of a sample of predominately male youth in a juvenile detention facility (average age of 16) reported ever having had sex and an average number of lifetime sexual partners between 9 and 10.²⁰ 59% of female youth in one juvenile detention facility who had ever had sex (average age of 15) reported having had 3 or more sexual partners.²¹ - The median number of lifetime female sexual partners reported by a sample of previously incarcerated (in juvenile or adult facilities) young men (median age of 20) who had sex with women was 7.²²	43% of a sample of female youth (average age of 14.5) with recent juvenile justice system involvement or recent police contact reported ever having had sex.²³ 39% of a sample of youth with first-time juvenile court involvement (average age of 14.5) reported having ever had sex, and those who had had sex reported an average of 1 partner.²⁴ - A sample of youth on community supervision (average age of 15) reported 4 sexual partners, on average.²⁵

Although many youth involved with the justice system may have their first sexual experiences at younger ages and have more total sexual partners by their mid-teens, relative to their peers, youth involved with the justice system do not appear to have multiple recent sexual partners (i.e., within the past two or four months).^{26,27,28}

Professionals who support youth who experience the justice system become more informed about youths' sexual and reproductive health when they receive more information about sexual activity. For example, professionals may consider ways to support youths' sexual and reproductive health needs and access to care.^a For additional information, youth-supporting professionals can refer to the Activate resources: [6 Tips for Youth-Supporting Professionals for Talking with Youth About Sexual and Reproductive Health, Seeking, Giving, and Receiving Consent for Sexual Activity](#), and [Seven Dimensions of Access to Sexual and Reproductive Health Care for Youth](#).

^b Nationally, [about half of 12th graders](#) report ever having had sex (47% of female youth, 49% of male youth). By the end of high school, 9 percent of female youth and 11 percent of male youth report having had [four or more](#) sexual partners.

Condom use^c

In most studies, about half of sexually active youth who experience the justice system reported using a condom the last time they had sex. Studies examining condom use at last sex involved nonincarcerated samples.

Research is limited about the consistency of condom use among youth with histories of juvenile justice system contact. However, existing studies have generally found that slightly more than half of nonincarcerated youth who experience the justice system used condoms consistently and that less than half of incarcerated or previously incarcerated youth used condoms consistently.

Studies of Detained/Incarcerated Youth	Studies of Youth with Other Justice System Involvement
• Among a sample of female youth in a juvenile detention facility who reported ever having had sex, youth reported using condoms during an average of 64% of recent (past 30 days) sexual encounters.²⁹ • 32% of a sample of previously incarcerated (in an adult or juvenile facility) young men who had sex with women reported consistently using condoms with all partners during the previous 2 months.³⁰ • Reviewed studies did not examine condom use among youth who were detained/incarcerated during the last instance of having sex.	• 64% of a sample of youth reported using a condom the last time they had sex.³¹ • 59% of a sample of youth with first-time juvenile court involvement reported consistent condom use (always or almost always using a condom during the past 4 months).³² • 59% of a sample of female youth with recent justice system involvement or police contact used a condom at last sex, and 80% used some form of birth control, including condoms.³³ • 59% of a sample of youth who were involved with the juvenile court for the first time (51% of female youth and 66% of male youth) reported using a condom the last time they had sex.³⁴

Youth-supporting professionals can find more information about condom use among justice-involved youth in Activate's fact sheet [Understanding the Research on Condom Use Among Youth Involved with Systems or Experiencing Homelessness](#).

^c None of the studies reviewed report the use of specific methods of hormonal contraception such as the pill, patch, shot, implant, or IUD.

Sexually transmitted infections

Current or lifetime sexually transmitted infection (STI) rates among youth who experience the justice system vary substantially across studies.

Most studies exploring STI rates or risks among youth who experience the justice system have focused on chlamydia and gonorrhea, although these youth, like all sexually active youth, are also at risk for other STIs like HIV, herpes, HPV, trichomoniasis, and syphilis. A review of STI prevalence among adolescents who were detained in the United States found prevalence rates of 8-12 percent for chlamydia, 2 percent for gonorrhea, 1-3 percent for syphilis, 0.2-0.7 percent for Hepatitis B, and 0.0-0.4 percent for HIV.³⁵

Studies of Detained/Incarcerated Youth	Studies of Youth with Other Justice System Involvement
• 33% of a sample of female youth in juvenile detention who had ever had sex reported ever testing positive for an STI.³⁶ • 17% of chlamydia screenings and 6% of gonorrhea screenings were positive among a sample of female youth entering a juvenile correctional facility.³⁷ • 6% of a sample of young men in a juvenile assessment center currently had gonorrhea or chlamydia.³⁸ • 15% of a sample of formerly incarcerated young men who had sex with women currently had chlamydia.³⁹	• 61% of a sample of youth who were arrested and referred to community-based services accepted STI screening. Of those screened, 8% tested positive for chlamydia and/or gonorrhea and 53% of those who tested positive went on to receive treatment (youth with positive tests were provided with referrals for treatment).⁴⁰ • 7% of a sample of youth on community supervision reported that they had been diagnosed with an STI, while 16% had been tested for HIV.⁴¹

The reviewed studies provide limited information about STI prevention or treatment. However, one experimental study engaging youth and young adults in a variety of HIV prevention interventions found that the odds of starting PrEP (pre-exposure prophylaxis, a medication that HIV-negative people may take to prevent HIV infection) were 80 percent lower for those who had ever been incarcerated than for their peers without incarceration experience.⁴²

Youth-serving professionals can find more information on STIs and preventive services among youth who experience the justice system in the Activate resources [Understanding the Research on Condom Use Among Youth Involved with Systems or Experiencing Homelessness](#) and [Identifying Accessible Sexual and Reproductive Health Resources in Your Community](#).

Pregnancy and births

Most studies indicate that at least one in 10 youth who experience the justice system will experience a pregnancy during their teenage years—a much higher prevalence than the teen pregnancy rate in the general U.S. population.

Studies of Detained/Incarcerated Youth	Studies of Youth with Other Justice System Involvement
26% of a sample of female youth in one detention facility who had ever had sex reported ever being pregnant (average age of 15.3).⁴³ 3% of a sample of 183 female youth admitted to 17 juvenile facilities across three states were pregnant during their incarceration, with each facility admitting 0 to 6 pregnant youth each month.⁴⁴	9% of a sample of youth who were involved with the juvenile court involvement for the first time reported ever being pregnant or causing a pregnancy (average age of 14.5).⁴⁵ 32% of a sample of youth who had experienced both the child welfare and juvenile justice systems reported ever being pregnant or causing a pregnancy (average age of 17.9).⁴⁶

Pregnant female and expectant male youth who experience the justice system may have a variety of experiences related to the intendedness, timing, or health impacts of the pregnancy or their pregnancy-related health care needs.⁴⁷ One study of pregnancy intentions found that 7 percent of youth with first-time juvenile court involvement planned to become pregnant (or cause someone to become pregnant) and thought a pregnancy was likely in the next four months; 21 percent were not planning to become (or cause someone to become) pregnant, but thought a pregnancy was likely; and 72 percent had no plans to become (or cause someone to become) pregnant and thought a pregnancy was not likely.⁴⁸

The studies we reviewed include very little information about births among youth who experience the justice system, with one exception: **A study of high school students found that the odds of becoming a parent before age 25 were 74 percent higher for young women and 70 percent higher for young men who had ever been arrested, relative to their peers who were never arrested.**⁴⁹ This five-wave study assessed arrests, delinquency, pregnancies, births, and other experiences among teenagers in Ohio as they aged into young adulthood (up to age 25).

Youth-supporting professionals can use the Activate resource [6 Tips for Youth Supporting Professionals for Talking with Youth about Sexual and Reproductive Health](#) and [Helping Young People Choose the Birth Control Method Right for Them: A Guide for Youth-Supporting Professionals](#) for guidance on holding conversations about sexual and reproductive health. Professionals can also refer to [A Conversation Guide to Support Young Fathers in Child Welfare and Juvenile Justice Systems](#) to support young parents who have justice system experience.

Research and Data Limitations

Research summarized here included studies published in 2020 or later, although studies published since 2010 were included in our review process. However, some recently published studies rely on data collected several years before publication; this may limit their usefulness, as sexual and reproductive health outcomes can change dramatically over time in response to public health efforts and broader cultural trends.⁵⁰ Additionally, some sexual and reproductive health domains, such as childbearing and contraceptive use, are studied less frequently than others like condom use or age at first sex. Longitudinal studies are rare in research among youth who experience the justice system but can provide insight into complex experiences such as the transition into parenthood.

Only a small number of recent studies report data on the sexual and reproductive health of youth who experience the justice system, and existing studies have been conducted in a variety of settings and with youth who have different justice system experiences. For example, some studies focus on youth who are incarcerated,^{51,52} while others focus on youth who were arrested or who had other contact with the justice system but who were not incarcerated at the time of the study.^{53,54,55} A few studies involve youth who reported, as part of a larger study, that they had ever been arrested or incarcerated.^{56,57,58}

The summary cites data from a variety of recent studies relying on facility-, jurisdiction-, and community-based samples of youth. Samples vary widely across studies, and each study brings strengths and limitations. Most samples are small (e.g., typically under 400 participants) and limited to a single geographic area, jurisdiction, or facility. While these studies can provide insights into the sexual and reproductive health of youth within their samples, they are not generalizable (the findings may not be broadly applicable) to all youth experiencing the justice system due to a lack of representativeness (the study participants, contexts, and other factors may not be comparable across studies). Representative national samples allow researchers to identify trends and disparities at a broader population level. However, national-level estimates are not available because none of the studies include a nationally representative sample of youth with histories of juvenile justice system involvement.

A young person's sexual and reproductive health status changes over time and may vary widely in different community or institutional contexts. Continued research is needed about the sexual and reproductive health of justice-system-involved youth in different settings, with different experiences, and from different backgrounds. Also needed are studies conducted in rural areas, studies that span jurisdictions, and studies with samples large enough to examine how sexual and reproductive health varies across groups within the overall population of justice-involved youth. Finally, researchers should apply principles of youth engagement and trauma-informed research, which can improve study rigor, enhance the utility of findings, and ensure that research activities minimize harm.^{59,60,61}

Appendix Table 1. Characteristics of included studies

Study	Details
Berezin, Javdani, & Godfrey (2022) ⁶²	Sample of 269 female youth in the Northeastern United States who were involved in or had immediate risk of juvenile justice system involvement (i.e., recent police contact); ages 11 to 17, averaging age 14.5
Cohall et al. (2024)	Sample of 307 youth receiving community-based services following arrest in New York City; 74% male, 55% Black, 35% Hispanic, and ranging from ages 18 to 24, with an average age of 21.1



Study	Details
Crooks et al. (2023) ⁶³	Sample of 188 female youth in a detention facility in Atlanta, GA; 100% Black and ranging in age from 13 to 17, with an average age of 15.3; having ever had sex was an inclusion criterion
Dembo et al. (2022) ⁶⁴	Sample of 1,141 youth in a juvenile assessment center in the Southeastern United States; participants' ages ranged from 12 to 18 and the sample was mostly (78%) male
Dembo et al. (2024) ⁶⁵	Sample of 388 male youth in a juvenile assessment center in Florida; study participants were under age 18 at entry, with an average age of 15.1
Finigan-Carr, Craddock, & Johnson (2021) ⁶⁶	Sample of 228 youth involved in both the child welfare and juvenile justice settings and currently residing out of the home; 63% male, ages 13 to 21, lived in a mid-Atlantic state
Haney-Caron, Brown, & Tolou-Shams (2021) ⁶⁷	Sample of 173 court-involved but nonincarcerated youth referred from a family court in the Northeastern United States: 53% male with an average age of 15
Kim et al. (2021) ⁶⁸	Study of 17 juvenile residential facilities that housed female youth in Maryland, Georgia, and California; across these facilities, the study assessed data from 183 youth
Landeis et al. (2021) ⁶⁹	Sample of 860 youth in Toledo, OH who were followed from high school to age 25; of this broader sample, 23.4% (women) and 41.5% (men) reported ever being arrested; this summary focuses on the findings for the subsample who were ever arrested
Logan-Greene et al. (2021) ⁷⁰	Same sample as Crooks et al. (2024)
Neeki et al. (2020) ⁷¹	Analyzed data from female youth ages 12-18 who entered a juvenile correctional facility in San Bernardino County, CA; in 2016 (the study's latest year), 382 screenings were performed.
Rosen et al. (2022) ⁷²	Sample of 288 youth who recently had their first contact with a large juvenile court in the Northeastern United States: 55% male, ages 12 to 17, average age of 14.5
Schmiege et al. (2021) ⁷³	Sample of 413 youth in a detention facility in the Southwestern United States (73-77% male, average age 15.8-15.9), as well as 124 youth in a court-ordered day program in the same region (historical control; 67% male, average age 16.1).
Stapleton et al. (2023) ⁷⁴	Sample included 1,907 Black male youth and young adults (ages 15-24) in New Orleans, LA; of this broader sample, 351 reported ever being in jail

Study	Details
Swendeman et al. (2024) ⁷⁵	Sample of 895 youth and young adults ages 12-24 located in Los Angeles, CA and New Orleans, LA; of this broader sample, 16% reported ever being incarcerated; study sample was in a broader study of HIV prevention interventions; please see the study text for more information about its sample
Wendt et al. (2022) ⁷⁶	Sample of 269 male youth in juvenile justice facilities in Oregon; average age of 17 with an age range of 14 to 19

Methods

We used a multi-step process to select the sexual and reproductive health topics covered in this summary along with corresponding data. Our process included (1) updating a literature search to identify relevant research and resources and (2) gathering input from members of Activate’s Research Alliance.

We updated a literature search conducted by the Activate team in 2021 using Academic Search Ultimate, a comprehensive EBSCO database of literature, and PubMed, a database focused on health sciences. The original search focused on the same broad topics explored in this summary and the same EBSCO and PubMed databases. We included the results of both searches in the summary.

The original search used a combination of structured search strings and database filters to identify relevant studies for this summary. The search strings included terms related to sexual and reproductive health (e.g., "contraceptive access") and terms related to youth experiencing the justice system (e.g., "homeless," "justice-involved"). We filtered results to include only English-language publications involving United States-based samples published in peer-reviewed journals from 2011 to 2021. The updated search captured studies published since 2021.

We exported 39 potentially relevant articles. We then excluded five articles because they were off-topic or based on data collected outside of the United States. Altogether, we coded 34 articles from the updated search to describe the data source, characteristics of the population studied, and the measures of sexual and reproductive health that were used. We used the results of the initial coding to determine the scope of the summary. Then, the research team extracted detailed information from each article. This summary draws on a subset of 16 articles that provided relevant data on sexual and reproductive health topics of interest.

Collectively, the articles reviewed for this summary were published from 2010 to 2024. We prioritized more recent research (i.e., studies published since 2021), but cited studies identified as part of the original search when the more recent literature was insufficient. We also conducted supplemental searches for additional information when needed. For example, we conducted a supplemental search about health insurance coverage and its implications for sexual and reproductive health. In some instances, we include data from reports that are not published in peer-reviewed journals.

We solicited feedback from Activate’s Research Alliance members on the literature search findings, as well as the summary’s format, content, and data takeaways.

Acknowledgements

The authors would like to thank the many contributors to this resource. Experts who informed the resource include John Lewis (Able Works), Karla Vargas (Opportunity Youth United), and Shakira Washington, PhD (Justice + Joy National Collaborative). Thank you also to the other young people who contributed but who are not named here. We also thank other Activate project team members who assisted in the development of this resource, including Amy Dworsky, co-principal investigator, Brittany Mihalec-Adkins, research translation team member, and Gabriella Guerra, dissemination lead. We are grateful for the contributions of other Child Trends and Chapin Hall staff who contributed to this resource, including Kristen Harper. Finally, a special thank you to the Child Trends communications staff, especially Olga Morales, Catherine Nichols, Brent Franklin, and Stephen Russ.

Suggested citation: Beckwith, S., DeCoursey, J., Scott, M. E., Rust, K. V., Rivas-Koehl, M., Naylor, K., & Griffin, A. M. *Sexual and reproductive health among youth who experience the justice system*. Child Trends.

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This project is supported by the Office of Population Affairs of the U.S. Department of Health and Human Services (HHS) as part of a financial assistance award totaling \$3,384,000 with 100 percent funded by OPA/OASH/HHS. The contents are those of the author(s) and do not necessarily represent the official views of, nor an endorsement by, OPA/OASH/HHS or the U.S. government. For more information, please visit opa.hhs.gov.



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