Research article

Sexual reoffense trajectories with youths in the child welfare system

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ABSTRACT

The present study sought to determine whether the persistence of problematic sexualized behaviors (PSBs) committed by boys in the Massachusetts child welfare system would lend support to previous taxonomies categorizing offenders as early-onset/life course-persistent, adolescence-onset/adolescence-limited, or childhood-limited in their offending behavior. We examined the persistence of PSBs in a male sample (N = 638; age range: two to 17), using a retrospective longitudinal archival design. Procedures involved a comprehensive archival review of records from the Department of Children and Families. Subsamples were established by trifurcating the sample based on age at the time of the boys’ first documented PSB, resulting in age cohorts reflecting early childhood (age two to seven), middle childhood (age eight to 11), and preadolescence/adolescence (age 12–17). Results supported the hypothesis that youths who first exhibited PSBs in early childhood would produce higher sexual reoffense rates during each of three follow-up windows (i.e., three years, five years, and seven years) than youths who first exhibited such behaviors in middle childhood, or preadolescence/adolescence (p < 0.01 for all group contrasts). Findings supported the distinctions of several taxonomies classifying youthful offenders in the juvenile justice system. Abuse reactivity, coping ability, and vulnerability to iatrogenic intervention effects are considered as some of many possible contributing factors.

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1. Introduction

Problematic sexualized behavior (PSB) is a general term used to describe a plethora of sexually inappropriate and/or coercive behaviors, ranging from exposure of genitalia to forcible rape. PSB may be exhibited by children and adolescents for reasons including sexual gratification, attention seeking, self-soothing (Chaffin et al., 2008; Grossi, Lee, Schuler, Ryan & Prentky, 2016; Solovsky & Bonner, 2003), to express aggressive impulses, and as a means of control. PSB is a societal problem that has garnered much media attention, particularly in cases wherein one or more PSB is perpetrated against a child.
Although both adults and juveniles perpetrate PSBs against children, the vast majority of research on the subject has examined adult sexual offending behaviors, and much less is known about the persistence of PSBs perpetrated by youths (Hart-Kerkhoffs, Doreleijers, Jansen, van Wijk, & Bullens, 2009; Lévesque, Bigras, & Pauzé, 2012). In particular, younger children are often not included in studies of PSB, although they are responsible for a notable percentage of such behaviors. For example, in one sample of 325 juveniles displaying sexually harmful behavior, 100 of the juveniles engaged in their first sexually harmful behavior before age 10 (McCorry, Hickey, Farmer, & Vizard, 2008). In a study by Finkelhor, Ormrod, and Chaffin (2009), one in eight offenders were under the age of 12. The researchers found age-related differences in behavior, with fondling more common among offenders under the age of 12, and rape being more common among offenders over the age of 12 (Finkelhor et al., 2009).

Underscoring the importance of increased knowledge about PSBs committed by children and adolescents, data from the Uniform Crime Report (UCR; Federal Bureau of Investigation, 2010) Program’s National Incident-Based Reporting System suggests that offenders under the age of 18 are responsible for approximately 16–20% of sexual assaults in the United States, including 33% of assaults against victims under age 18 (Latzman, Vlijmoen, Scalaora, & Ullman, 2011). Although the mental health and juvenile justice systems have recently paid increased attention to youths who exhibit PSBs (e.g., Brennan, Breitenbach, & Dietrich, 2008; Chaffin et al., 2008; Latzman et al., 2011), little is known about youths who commit PSB without adjudication through the juvenile justice system. In other terms, the large majority of studies that examine sexual recidivism by children and adolescents explore the behavior patterns of adjudicated juvenile sexual offenders (e.g., Department of Juvenile Justice samples). However, the National Crime Victimization Survey (Truman & Planty, 2012) and UCR (Federal Bureau of Investigation, 2010) indicate that a large percentage of sexual offenses are not reported, and of those that are reported, many do not result in a conviction (RAINN, n.d.). Therefore, studies of sexual recidivism with adjudicated juvenile sexual offenders may not adequately represent the full range of children and adolescents who exhibit PSBs.

The presumptive legal implications of PSBs committed by youths are considerable, as such behaviors may result in similar legal sanctions as those imposed on adult sex offenders. The Adam Walsh Act (Adam Walsh Child Protection and Safety Act of 2006, 2006), for example, requires the registration of, and community notification regarding, adolescent sexual offenders; juveniles are automatically registered on Tier III and may be subject to lifetime registration; this Act equates juvenile adjudication with adult conviction. Although legislation such as the Adam Walsh Act are meant to protect the community, little evidence supports their effectiveness in preventing sexual reoffense by juveniles (Caldwell, Ziemke, & Vitacco, 2008). In contrast, research findings indicate that registration may actually contribute to increased recidivism risk by undermining offenders’ reintegration into the community and hindering their adjustment (Levenson & Cotter, 2005). Moreover, in at least 10 states, juveniles sex offenders may be petitioned for civil commitment (Michels, 2012).

1.1. Rates of reoffense

The juvenile justice system was founded on the bedrock assumption that youths who offend can be rehabilitated. However, legislation such as the Adam Walsh Act is premised on the empirically faulty belief that juvenile sexual offenders “are on a singular trajectory to becoming adult sex offenders” (Caldwell et al., 2008: p. 105; Carpenter, Silovsky, & Chaffin, 2006). Further, the typical treatments for children and adolescents who exhibit PSBs assume that such behaviors are a sign of a chronic, increasingly serious pattern of sexual perpetration. For example, treatment typically focuses on managing deviant sexual arousal, improving impulse control, and altering distorted cognitions that maintain offending behaviors (Hunter, Figueredo, Malamuth, & Becker, 2003). However, the base rates of recidivism reported in the literature suggest that sexual reoffending is not inevitable. In their meta-analysis of 18 studies, McCann and Lussier (2008) found that sexual recidivism ranged from 1.6% to 29.9%; in marked contrast, the general juvenile recidivism rate was 53% on average.

Several factors are proposed to contribute to this variation in sexual recidivism rates. For one, the wide range of rates may be due in part to differences in the operational definition of recidivism and sources of information used to identify recidivism (McCann & Lussier, 2008). Similarly, differences in sampling procedures contribute to differences in recidivism, such that individuals flagged specifically because of problematic sexualized behaviors may be at increased risk for such behaviors moving forward. Length of follow-up can also impact recidivism rates; longer follow-ups are likely to provide higher reoffense rates than shorter follow-ups (Cally, 2012). In addition, it may be difficult to find adequate samples for research due to the low base rate of sexual reoffending (Hart-Kerkhoffs et al., 2009).

The present study aimed to address some of these challenges by examining a large high-risk sample of boys flagged within the child welfare sample due to a history of PSB. Although examining this population limited our ability to use conventional indicators of recidivism (i.e., as only a small subset of the youth were adjudicated within the juvenile justice system), to date there is a dearth of research regarding the persistence of sexualized behaviors of children and adolescents in the child welfare system.
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