

2007

## Youth Who Have Sexually Abused: Registration, Recidivism, and Risk

David Prescott

Follow this and additional works at: <http://lawcommons.luc.edu/pilr>

 Part of the [Criminal Law Commons](#), [Health Law and Policy Commons](#), [Juvenile Law Commons](#), and the [Sexuality and the Law Commons](#)

---

### Recommended Citation

David Prescott, *Youth Who Have Sexually Abused: Registration, Recidivism, and Risk*, 12 Pub. Interest L. Rptr. 178 (2007).  
Available at: <http://lawcommons.luc.edu/pilr/vol12/iss3/4>

This Feature is brought to you for free and open access by LAW eCommons. It has been accepted for inclusion in Public Interest Law Reporter by an authorized administrator of LAW eCommons. For more information, please contact [law-library@luc.edu](mailto:law-library@luc.edu).

# YOUTH WHO HAVE SEXUALLY ABUSED: REGISTRATION, RECIDIVISM, AND RISK

*by* DAVID PRESCOTT

Recent years have seen a dramatic shift in how the public thinks about sexual violence and youth who have sexually abused.<sup>1</sup> Public policy and the legal system have turned to increasingly harsh punishments for sexual abuse in the form of tougher dispositions, community notification, and registration. Waiving youth to adult courts has become commonplace, and efforts to enforce lifetime registration for youthful sexual abusers are occurring at the state and national level. Even the sealing of young peoples' criminal records upon their entry into adulthood is no longer a core philosophy of the legal system. These changes have accompanied dramatic shifts in public perspective. Where adults once considered juvenile delinquents of all types to be in need of education about accountability, public outcry increasingly demands that they

be *held* accountable. Ironically, this has occurred in tandem with research demonstrating that base rates for sexual recidivism are lower than once believed<sup>2</sup>, and that youthful criminality is often limited to adolescence.<sup>3</sup> The policies accompanying increased media coverage and public furor have in many cases proven the adage that “bad cases make bad law.” Recently, Iowa reconsidered its law about residence restriction, and over half the states in the U.S. required juveniles adjudicated for sex crimes to register despite the lack of evidence of either enhanced public safety or any reduction in recidivism<sup>4</sup>.

This article contains several cautions that those who make and enforce laws and public policy should take into account when considering registration and public notification of youth who have sexually abused.

CAUTION #1: THERE REMAINS NO EMPIRICALLY VALIDATED METHOD FOR DETERMINING THE LIKELIHOOD OF A YOUNG PERSON TO ABUSE AGAIN.

Although this simple fact can speak for itself, it is worthwhile to note that even the most recent proposed tools for risk assessment have yet to be validated. Their authors go to pains to describe their limitations and warn against their misuse. Such instruments include the JSOAP-II<sup>5</sup>, THE ERASOR<sup>6</sup>, AND THE JSORRAT – II<sup>7</sup>

CAUTION #2: YOUNG PEOPLE CHANGE.

In our rush to classify individuals, it is easy to forget that adolescence is a time of dramatic change, with or without treatment interventions. In their introduction to their risk assessment tool, the JSOAP – II, Prentky and Righthand observe that “No aspect of their development, including their cognitive development, is fixed or stable. In a very real sense, we are trying to assess the risk of ‘moving targets’.”<sup>8</sup> For this reason, they recommend that youth be re-assessed every six months.<sup>9</sup> Additionally, the factors that contribute to their behavior are subject to change.<sup>10</sup> In a recent review of the general recidivism literature regarding juveniles, Quinsey, Skilling, Lalumiere, and Craig note that the best predictors of juvenile delinquency among general youth change from ages six through eleven and ages twelve through fourteen.<sup>11</sup> The authors go on to describe three types of adolescent antisociality: “adolescence-limited delinquents,

. . . early-starting life-course-persistent antisocial individuals whose behaviors are associated with neuropathology resulting from prenatal, perinatal, and/or postnatal problems, sometimes in combination with family and neighborhood adversity”, and “early-starting life-course-persistent antisocial individuals” without neurodevelopmental pathology.<sup>12</sup> They note that this third category appears to comprise a distinct class of individual, or taxon, different from other antisocial individuals”.<sup>13</sup>

Finally, Levenson and Hern summarize research showing that social stability is important to successful re-entry into the community by sexual and other criminal offenders.<sup>14</sup> They further argue that measures such as residence restrictions can disrupt the individual’s attempts at community reintegration, thereby increasing their risk for future harm.<sup>15</sup> For young people, consequences of registration can include completing their education as well as securing safe employment.<sup>16</sup>

**CAUTION #3: SEXUALLY ABUSIVE YOUTH ARE AT HIGHER RISK TO CAUSE OTHER KINDS OF HARM, AND SOME ARE MORE LIKELY THAN OTHERS.**

Many authors, such as Serin and Brown and Monahan have emphasized the importance of taking rates of re-offense into account in classifying dangerousness.<sup>17</sup> However, studies of adolescent sexual recidivism have not been prolific and have yielded varying results across populations and jurisdictions.<sup>18</sup> It appears that studies conducted outside North America find higher base rates of re-offense<sup>19</sup>. However, the available studies in North America often find lower re-offense rates than one might think. In one meta-analysis including 1,025 juveniles, Alexander found recidivism rates of 5.8% for rapists, 2.1% for child molesters, and 7.5% for “unspecified” adolescent abusers.<sup>20</sup> Of note, all had been “treated.”<sup>21</sup> There could be any number of reasons for these discrepancies (including the presence of “status offenders” in North American samples), but none have been tested.

Further, Worling and Curwen followed 148 Canadian youth for an average of six years.<sup>22</sup> They found that those who received “abuse specific” treatment had a 72% reduction in sexual recidivism.<sup>23</sup> The untreated youth recidivated at 18% in the follow-up period, while the treated youth recidivated at a rate of 5%.<sup>24</sup> More recently in 2006, in a meta-analysis of nine studies, Reitzel and Carbonell found that youth who had received abuse-specific treatment recidi-

vated at a rate of 7.37% while youth who received no treatment recidivated at a rate of 18.93%.<sup>25</sup> Taken together, these results show a very encouraging effect of treatment on recidivism. Other authors have noted that on their own, incarceration and intermediate sanctions have no effect on recidivism.<sup>26</sup> Clearly, all of these results require cautious interpretation. First, ethical considerations have prevented the highest-quality randomized treatment/no-treatment comparisons due to concerns that it would be unacceptable to deny youth access to opportunities for change. Even if these were possible, the specific “active ingredients” of treatment have yet to be determined, although community-based multi-systemic treatment (MST) appears particularly promising.<sup>27</sup> Second, recidivism rates are susceptible to adults’ ability to detect re-offense (i.e. not every sexual crime is detected by authorities). One may argue that these rates are gross underestimates given that victims often do not report crimes. On the other hand, because youthful sexual abusers often have high rates of recidivism for nonsexual crimes, they are not particularly adept at evading detection. One might further argue that upon arrest for sexually abusive behavior, many youth have far less opportunities for re-offense due to increased supervision. Finally, one might argue that the measurement treatment effect is obscured by attrition.

**CAUTION #4: UNAIDED ATTEMPTS TO ASSESS DANGEROUSNESS HAVE NO EMPIRICAL SUPPORT.**

It is very tempting to believe in one’s ability to tell how dangerous another individual is. Many busy professionals are forced into quick decisions based on thin information, while others are just plain wrong. Many people pride themselves on their ability to observe and understand, but their ability to assess risk has gone largely untested.

Hanson and Bussiere found that typical clinical judgment yielded an average correlation not much better than chance ( $r=.10$ ), while having prior convictions on their own correlated at .20.<sup>28</sup> That is, convictions prior to whatever charge brought the individual to the attention of authorities.<sup>29</sup> Further complicating matters, some authors have observed that including too much information in the decision-making process can result in reduced accuracy of assessments.<sup>30</sup> Quinsey, Harris, Rice, and Cormier observe that “More importantly, the amount of information available to the clinician was unrelated to accuracy but was highly related to the degree of confidence in the judgment”,

and that humans “are, in fact, most confident when making extreme judgments”.<sup>31</sup>

These findings are challenging. Accurate risk classification should be objective and include only the critical information, while comprehensive assessments will include information vital to guiding treatment but are not necessarily predictive. There is evidence that risk assessments by treatment providers can become less effective the longer a professional is in contact with the subject.<sup>32</sup> Many argue against treatment providers engaging in risk assessment.<sup>33</sup>

**CAUTION #5: ELEMENTS THAT MIGHT SEEM IMPORTANT HAVE NO EMPIRICAL BASIS.**

Put simply, much of what the field of sexual offender assessment believed to be true in past decades has turned out to be unsupported. Nowhere is this more apparent than in the tenuous relationship between items that seem important but haven’t been demonstrated in the literature.

*Empathy* is considered to be of fundamental importance in assessment and treatment, and yet its role in re-offense is not well established. However, its measurement and contribution to abusive behavior have been the source of much discussion and debate.<sup>34</sup> In one study with adolescents, the well-known Interpersonal Reactivity Index<sup>35</sup> did not tap victim empathy.<sup>36</sup> Hanson has observed that some offenders genuinely do not understand the harm they have caused while others do understand but remain willing to abuse.<sup>37</sup> Meanwhile, the human brain’s pre-frontal cortex, where empathy is located, continues to develop well into adulthood.<sup>38</sup> While how much of a youth’s capacity for empathy remains to be developed into adulthood is open to speculation, this single element of adolescent development will give assessors of risk reason for caution.

For many years practitioners working with sexual abusers assumed that *denial* was related to sexual re-offense risk. However, recent meta-analyses found no correlation between denial and risk.<sup>39</sup> There are many views on how this may be. It could be that researchers are measuring denial differently than practitioners. It might also be that denial is more closely related to readiness and motivation for treatment, or to the responsivity principle, so that its connection to re-offense is not as direct and “washes out” of research findings. It could also be as

simple as denial indicating that the person is not ready to admit what they have done.

Professionals entering the field of risk assessment are surprised to find that aspects of the youth's most recent offense (sometimes known as the "instant" or "index" offense) have not proved to be predictive of re-offense risk.<sup>40</sup> Rather, it is the past history of sexual aggression that is predictive.<sup>41</sup> In other words, it is not the youth's willingness to abuse on one occasion that predicts, but rather the youth's persistence that can be predictive of future harm. Although professionals should not discount that the youth has, at least on one occasion, engaged in harmful behavior, there is no consensus in the literature that the referral offense in itself is predictive. Likewise, victim penetration has generally not proven to be associated with risk for sexual recidivism among youth, although it has been associated with elevated risk for violence.<sup>42</sup> However, victim penetration has been associated with deviant sexual arousal patterns in the case of same-sex child molestation by adolescent males.<sup>43</sup>

#### CAUTION #6: THE UNCERTAINTY OF SEXUAL AROUSAL.

There is little question that sexual arousal to children is a powerful predictor of sexual recidivism among adult abusers.<sup>44</sup> However, the clarity appears to end there for risk classification purposes. Arousal to rape among adults has not been shown to be predictive of subsequent sexual re-offense, although this may be due in part to the methods employed (*ibid.*).<sup>45</sup> There is growing consensus, however, that sexual arousal in youth is more dynamic than once believed, that its changing nature prevents it from being an effective predictor, and that it is therefore less of a treatment target for youthful sexual abusers than for their adult counterparts.<sup>46</sup> Hunter observes:

A minority of sexually abusive youth manifest paraphilic (deviant) sexual arousal and interest patterns. These arousal and interest patterns are recurrent and intense, and relate directly to the nature of the sexual behavior problem (e.g., sexual arousal to young children). Deviant sexual arousal is more clearly established as a motivator of adult sexual offending, particularly as it relates to pedophilia. A small subset of juveniles who sexually offend against children may represent cases of early onset pedophilia. Research has demonstrated that the highest levels of deviant sexual arousal are found in juveniles who exclusively target young male children, specifically when penetration is involved. In general, the sexual arousal patterns of sexually abusive

youth appear more changeable than those of adult sex offenders, and relate less directly to their patterns of offending behavior.<sup>47</sup>

In summary, the sexual arousal patterns of youth have proven to be malleable, and their specific relevance to dangerousness difficult to ascertain. They are, therefore, elusive targets for both assessment and treatment.

Given that adolescence is by definition a time of accelerated development, it makes sense that sexual interest and arousal is subject to change. However, adolescence is also a time when antisocial behavior is common.<sup>48</sup> There is evidence that youth are simply more willing to report behaviors that cause concern in adults.<sup>49</sup> In many instances, youth may be re-enacting their own abuse or situations that they have witnessed rather than demonstrating a long-term proclivity towards sexual dangerousness.<sup>50</sup> Given the histories of abuse, neglect, and trauma among sexually abusive youth, it may well be that harmful sexual behavior is not deviant within the context of their limited experience.<sup>51</sup>

Research suggests that youthful sexual abusers do not manifest sexual disorders in the same ways as adults.<sup>52</sup> The evidence indicates that sexual arousal is fluid and dynamic across adolescence.<sup>53</sup> Although sexually abusive youth can engage in sexually deviant behavior, it appears that the majority of them do not experience persistent and entrenched sexual deviance.<sup>54</sup>

**CAUTION #5: RISK ASSESSMENT CAN REFLECT OR CONTRIBUTE TO POOR PUBLIC POLICY.**

There are many worthwhile reasons to consider the likelihood of a young person to engage in further harm. These include community safety, the establishment of treatment targets and plans, placement/reunification decisions, consideration of making amends to victims, etc. In many instances, however, risk assessment has been used to implement policies of unknown and/or questionable impact on youth. In one case, Poole, Leidecke, and Marbibi investigated Static 99<sup>55</sup>, an adult actuarial scale for use with adolescents.<sup>56</sup> At that time the Texas Youth Commission was interested in the use of this scale for registration and community notification purposes in accordance with Texas law SB 1650 and established a high-risk cutoff score of 4 rather than the authors' recommended score of 6. From the Executive Summary:

In accordance with SB 1650, the Risk Assessment Review Committee chose the Static-99 as its assessment tool and altered the scoring procedure based

on their data. All Texas sex offenders 18 years and older are subject to assessment using the Static-99. One concern of using the Static-99 was that all sex offenders, 18-21 years of age received a score of one in the following categories: age at time of release and marriage status. In order to obtain a high-risk level, an offender needs to score a four or more on the Static-99. Therefore, everyone in this population was automatically half way to being a high-risk sex offender. Research on juvenile sex offenders suggests that other characteristics may apply to offenders who were juvenile at the time their sex crime was committed. . .

This study found that Static 99 did assign a high-risk level to all juvenile offenders (four juveniles) who were arrested for another sex offense within the four-year follow-up period. However, it also assigned to the high-risk category, 17 juvenile offenders who did not recidivate sexually. This raises questions about the rate of false positives observed in this study and the sensitivity of the instrument with adults who committed their sex crimes as juveniles. . . The high percentage of false positives is most likely attributable to the Risk Assessment Committee's decision to change the scoring system, making four or higher the High-Risk cutoff point.<sup>57</sup>

The authors conclude with a recommendation to change the scoring system.<sup>58</sup> Whatever side one comes down on with respect to policies such as notification and registration of sexually abusive youth or of changing scoring protocols, assessing risk in young people does not occur in a vacuum. Professionals will need to consult their personal and professional ethics before undertaking assessments of young people. If the purpose of an assessment is to identify treatment and management strategies, it may be best to forego the use of language such as "risk" and focus instead on ideas such as "predisposition to", "vulnerability towards", etc. in the context of a "sexual aggression assessment", "needs assessment", etc. and include the time limitations described earlier.<sup>59</sup>

**CAUTION #6: AN EXCLUSIVE FOCUS ON REDUCING RISK THROUGH REGISTRATION AND NOTIFICATION HAS THE POTENTIAL TO STEER ATTENTION AND RESOURCES AWAY FROM ASSISTING VICTIMS AND PREVENTING FUTURE ABUSE.**

As communities look to promote community safety, it is possible that the allocation of resources towards registration of young people will divert funds and attention away from necessary entities such as victim's advocate offices, rape crisis centers, and shelters for women and children seeking refuge from abusers. Given the uncertainty around the effectiveness of registration of sexual

offenders generally, it is imperative that communities not lose sight of the important safeguards they have and can develop.

CAUTION #7: REGISTRATION CAN HAVE DETRIMENTAL EFFECTS ON THE FAMILIES OF YOUNG PEOPLE, ESPECIALLY WHEN THE VICTIM AND ABUSER ARE FROM THE SAME FAMILY.

Young people who have sexually abused frequently return home to their families, whether as the result of good treatment planning or not. In many instances the victim of their sexual abuse is there. There can be many reasons why it is entirely appropriate for family members to live with each other after abuse has occurred.<sup>60</sup> Communities using registration and notification have an obligation to protect the well-being of those affected by sexual abuse, including victims and other family members.

#### CONCLUSION

Communities coming to terms with youthful sexual aggression have many reasons to be cautious in their understanding of youth and predictions of what they might do. Adults have long considered young people fundamentally unpredictable and the notion that we can reasonably predict and prevent behaviors that thrive on secrecy is testimony to both our communities' optimism and desperation. However, those who make and implement policy will want to exercise great caution in their attempts to implement registration for juveniles. The emerging consensus in the research is that young people are less likely to recidivate sexually than many might think, but more likely to recidivate for non-violent crimes if they do come into contact with the legal system. There remains no empirically validated means for classifying young people according to sexual dangerousness, and registration laws have the potential to divert resources and attention away from necessary programs for assisting survivors and preventing sexual abuse.

## NOTES

- 1 David S. Prescott, LICSW, Treatment Assessment Director at the Sand Ridge Secure Treatment Center in Mauston, Wisconsin
- 2 See e.g., Margaret Alexander, *Sexual Offender Treatment Efficacy Revisited*, 11 *SEXUAL ABUSE: A J. OF RES. & TREATMENT*, 101, 101-116 (1999); Douglas Epperson ET AL., *Actuarial Risk Assessment With Juveniles Who Offend Sexually: Development of the Juvenile Sexual Offense Recidivism Risk Assessment Tool-II*, in *RISK ASSESSMENT OF YOUTH WHO HAVE SEXUALLY ABUSED: THEORY, CONTROVERSY, AND EMERGING STRATEGIES* 118-169 (David S. Prescott ed., Wood'N'Barnes) (2006) and Lorraine Reitzel & Joyce Carbonell, *The Effectiveness of Sexual Offender Treatment for Juveniles as Measured by Recidivism: A Meta-Analysis* 18 *SEXUAL ABUSE: A J. OF RES. AND TREATMENT*, 401, 401- 422 (2006).
- 3 See Terrie Moffitt, *Adolescence-Limited and Life-Course-Persistent Antisocial Behavior: A Developmental Taxonomy*, 100 *PSYCHOL. BULL.*, 674, 674-701 (1993).
- 4 See Lisa Trivits & N. Dickon Repucci, *Application of Megan's Law to Juveniles*, 57 *AM. PSYCHOL.*, 690, 690-704 (2002).
- 5 Robert Prentky & Sue Righthand, *Juvenile Sex Offender Assessment Protocol-II (JSOAP - II)*, available at <http://www.csom.org/pubs/jsiap.pdf> (last modified Sept. 10, 2004).
- 6 James Worling, & Tracey Curwen, *Adolescent Sexual Offender Recidivism: Success of Specialized Treatment and Implications for Risk Prediction*, 24 *CHILD ABUSE AND NEGLECT*, 965, 965-982 (2000).
- 7 See Epperson ET AL *supra* note 2.
- 8 Prentky & Righthand, *supra* note 5, at i.
- 9 *Id.*
- 10 *Id.*
- 11 VERNON QUINSEY ET AL., *AM. PSYCHOL. ASS'N., JUVENILE DELINQUENCY: UNDERSTANDING THE ORIGINS OF INDIVIDUAL DIFFERENCES* 94 (2004).
- 12 *Id.*
- 13 *Id.*
- 14 See Jill Levenson & Andrea Hern, *The Impact of Sex Offender Residence Restrictions on Community Reentry* (2006) (Unpublished Manuscript on file with Justice Research and Policy).
- 15 *Id.*
- 16 *Id.*
- 17 See e.g. Ralf Serin & Shelley Brown, *The Clinical Use of the Hare Psychopathy Checklist-Revised in Contemporary Risk Assessment*, in *THE CLINICAL AND FORENSIC ASSESSMENT OF PSYCHOPATHY* 251-268 (C.G. Gacono ed., 2000) and J. Monahan ET AL., *Rethinking Risk Assessment: The MacArthur Study of Violence and Mental Disorder*, 27 *PSYCH. BULL.* 237-238 (2003).
- 18 James Worling & Tracey Curwen, *Adolescent Sexual Offender Recidivism: Success of Specialized Treatment and Implications for Risk Prediction*, 24 *CHILD ABUSE AND NEGLECT* 965, 965-982 (2000).
- 19 See e.g. Niklas Langstrom & Martin Grann, *Risk for Criminal Recidivism Among Young Sex Offenders*, 15 *J. OF INTERPERSONAL VIOLENCE* 855, 855-871 (2000) and Ian Nisbet, ET AL., *A Prospective Longitudinal Study of Sexual Recidivism Among Adolescent Sex Offenders*, 16 *SEXUAL ABUSE: A J. OF RES. & TREATMENT* 223, 223-234 (2004).

- 20 Alexander, *supra* note 2, at 105.
- 21 *Id.*
- 22 See Worling & Curwen, *supra* note 18.
- 23 *Id.* at 971.
- 24 *Id.*
- 25 See Reitzel & Carbonell, *supra* note 2.
- 26 See e.g. PAULA SMITH ET AL., SOLICITOR GENERAL OF CANADA, THE EFFECTS OF PRISON SENTENCES AND INTERMEDIATE SANCTIONS ON RECIDIVISM: AGE, GENDER AND RACE (2002).
- 27 See SCOTT HENGGELER ET AL., MULTISYSTEMIC TREATMENT OF ANTISOCIAL BEHAVIOR IN CHILDREN AND ADOLESCENTS (Guilford Press, 1998).
- 28 Karl Hanson & Monique Bussiere, *Predicting Relapse: a Meta-Analysis of Sexual Offender Recidivism Studies*, 66 JOURNAL OF CONSULTING AND CLINICAL PSYCHOLOGY 348, 352 (1998).
- 29 *Id.*
- 30 Monahan *supra* note 17, at 88 and see Vernon Quinsey, The Violence Risk Appraisal Guide, Presentation at Sinclair Seminars' Sex Offender Re-Offense Risk Prediction Symposium, Madison, Wisconsin (March 2000) (transcript available at [www.sinclairseminars.com](http://www.sinclairseminars.com)).
- 31 Quinsey *supra* note 11, at 56.
- 32 See Mark Williams, *Aspects of the Psychology of Imprisonment*, in THE USE OF IMPRISONMENT: ESSAYS IN THE CHANGING STATE OF ENGLISH PENAL POLICY 32-42 (S. McConville, Ed) (Routledge & Kegan Paul Ltd., 1975). See also Vivienne De Vogel & Corrine De Ruiter, *Differences Between Clinicians and Researchers in Assessing Risk of Violence in Forensic Psychiatric Patients*, 15 THE J. OF FORENSIC PSYCH. AND PSYCHOL., 145-164 (2004).
- 33 See e.g. Dennis M. Doren, *What Weight Should Courts Give to Treaters' Testimony Concerning Recidivism Risk?* 6 SEX OFFENDER L. REP., 1, 1-2,15 (2005).
- 34 YOLANDA FERNANDEZ, IN THEIR SHOES: EXAMINING THE ROLE OF EMPATHY AND ITS PLACE IN THE TREATMENT OF OFFENDERS (Wood'N'Barnes, 2002).
- 35 ANNA C. SALTER, TREATING CHILD SEX OFFENDERS AND VICTIMS (Sage Publications, 1998).
- 36 Tracey Curwen, Utility of the Interpersonal Reactivity Index (IRI) as a measure of empathy in male adolescent sex offenders (May 29, 2000) (unpublished paper presented at the 6th International Conference on the Treatment of Sexual Offenders, available at [www.collectionscanada.ca/obj/s4/f2/dsk2/ftp01/MQ28703.pdf](http://www.collectionscanada.ca/obj/s4/f2/dsk2/ftp01/MQ28703.pdf)).
- 37 See Karl Hanson, *Empathy Deficits of Sexual Offenders: A Conceptual Model*, 9 J. OF SEXUAL AGGRESSION 13-23 (2003).
- 38 Phyllis Stien & Joshua Kendall, PSYCHOLOGICAL TRAUMA AND THE DEVELOPING BRAIN: NEUROLOGICALLY BASED INTERVENTIONS FOR TROUBLED CHILDREN 23 (Haworth Press, 2004).
- 39 See e.g. Hanson & Bussiere, *supra* note 28 and Karl Hanson & Kelly Morton-Bourgon, *Predictors of Sexual Recidivism: An Updated Meta-Analysis*, Public Works and government Services Canada, available at [www.mhpc-research.com/200402\\_e.pdf](http://www.mhpc-research.com/200402_e.pdf) (2004).
- 40 Geoffrey Marczyk ET AL., *Predicting Juvenile Recidivism With the PCL:YV, MAYSI, and YLS/CMI*, 2 INT'L J. OF FORENSIC MENTAL HEALTH 7, 7-18 (2003); Karl Hanson and David Thornton, *Static 99: Improving Actuarial Risk Assessments for Sex Offenders (User Report 1999-02)*, Department of the Solicitor General of Canada, available at [www.sgc.gc.ca](http://www.sgc.gc.ca) (1999).
- 41 See Marczyk et al., *supra* note 40 and Hanson & Thornton, *supra* note 40.
- 42 Niklas Langstrom & Martin Grann, *Risk for Criminal Recidivism Among Young Sex Offenders*, 15 J. OF INTERPERSONAL VIOLENCE 855, 855-871 (2000).

- 43 John Hunter, *Understanding Juvenile Sexual Offending Behavior: Emerging Research, Treatment Approaches, and Management Practices*, Center for Sex Offender Management, available at [www.csom.org](http://www.csom.org) (1999).
- 44 See Hanson & Bussiere, *supra* note 28 and Hanson & Morton-Bourgon, *supra* note 39.
- 45 See Hanson & Bussiere, *supra* note 28.
- 46 Toni Cavanagh Johnson, *Young Children's Problematic Sexual Behaviors, Unsubstantiated Allegations of Child Sexual Abuse, and Family Boundaries in Child Custody Disputes*, 2 J. OF CHILD CUSTODY 4,4 (2005); Phil Rich, *UNDERSTANDING, ASSESSING AND REHABILITATING JUVENILE SEX OFFENDERS* (John Wiley and Sons, 2003).
- 47 See Hunter, *supra* note 43, at 3.
- 48 See Moffitt, *supra* note 3.
- 49 Stacey Zolondek ET AL., *The Self-Reported Behaviors of Juvenile Sex Offenders*, 16 J. OF INTERPERSONAL VIOLENCE 73, 73-85 (2001).
- 50 Barbara Schwartz et al., *Family Violence and Severe Maltreatment in Families of Sexually Reactive Children and Adolescents*, in *CURRENT PERSPECTIVES: WORKING WITH SEXUALLY AGGRESSIVE YOUTH AND YOUTH WITH SEXUAL BEHAVIOR PROBLEMS* 443-472 (Robert Longo & David Prescott, eds.) (NEARI Press, 2005).
- 51 *Id.*
- 52 See John Hunter & Judith Becker, *The Role of Deviant Sexual Arousal in Juvenile Sexual Offending: Etiology, Evaluation, and Treatment*, 21 CRIM. JUSTICE AND BEHAVIOR 132, 132-149 (1994).
- 53 See *Id.*
- 54 See *Id.*
- 55 See Hanson & Thornton, *supra* note 40.
- 56 See Dennis Poole ET AL., *Risk Assessment and Recidivism in Juvenile Sex Offenders: A Validation Study of the Static 99* (2001) (unpublished study on file with Texas Youth Commission).
- 57 See Poole ET AL., *supra* note 56, at 1-2.
- 58 See Poole ET AL., *supra* note 56.
- 59 *Id.*
- 60 See Joann Schladale, *Family Reconciliation and Reunification With Youth Who Have Caused Sexual Harm*, in *APPLYING KNOWLEDGE TO PRACTICE: CHALLENGES IN THE TREATMENT AND SUPERVISION OF SEXUAL ABUSERS* (David Prescott ed.) (forthcoming 2007) and Jerry Thomas & WilsonViar, *From Family Research to Practice*, in *CURRENT PERSPECTIVES: WORKING WITH SEXUALLY AGGRESSIVE YOUTH AND YOUTH WITH SEXUAL BEHAVIOR PROBLEMS* 515-546 (Robert Longo & David Prescott, eds.) (NEARI Press, 2005).