



Treatment Considerations




Current Statistics:

Crime and Victimization in Indian Country

- Average annual violent crime rate among American Indians –
 - 124 per 1,000 persons age 12 or older - approximately 2.5 times national rate
- Rates of violent victimization for both males and females are higher among American Indians than for all races.




Crime and Victimization in Indian Country

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- The rate of violent crime experienced by American Indian women is nearly 50% higher than that reported by Black males




Crime and Victimization in Indian Country

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- On a per capita basis, 1995 data indicate approximately 1 substantiated report of a child victim of abuse or neglect for every 30 American Indian children age 14 or younger



Crime and Victimization in Indian Country




Each year about 150 American
Indians become murder
victims



CHILDREN WITH SEXUAL BEHAVIOR PROBLEMS

Early literature indicated erroneously:

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- Severe psychopathology
 - High levels of sexual abuse history
 - Significantly dysfunctional families


ETIOLOGY

Current Theories:

- Result of being sexually abused
 - Learned behavior
 - Attempts to master abuse
- Result of being inappropriately exposed to sexual behavior
 - Re-enacting
 - Curiosity
- Result of other affective or behavioral disturbances




COGNITIVE-BEHAVIORAL GROUP THERAPY (CBGT)

- 
- Highly structured
 - Directly addresses sexual behavior
 - Therapists are directive
 - Less interactions among children
 - Few differences across groups




ISSUES ADDRESSED IN CBGT

- 
- Acknowledging sexual behavior
 - Learning rules for sexual behavior
 - Decreasing impulsive behavior
 - Sex education
 - Prevention of re-abuse





TECHNIQUES USED IN CBGT

- 
- Sexual behavior rules
 - Projective Storytelling Cards
 - Turtle Technique
 - Weekly Knowledge Assessment
 - Stickers/chart




SEXUAL BEHAVIOR RULES

1. It's OK to touch your private parts when you are alone.
 2. It's not OK to touch other people's private parts.
 3. It's not OK for other people to touch your private parts.
 4. It's not OK to show your private parts to other people.
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(Bonner, B.L., Walker, C.E., & Berliner, L., 1992)





ISSUES IN CBTG PARENT GROUP

- 
- Safety measures
 - Expected sexual behavior in children
 - Using the Sexual Behavior Rules and Turtle Technique
 - Talking to child about sexuality
 - Sexual rules in the home





TREATMENT PROGRAM

- Open ended treatment, 4- 6 months
 - Children self evaluate weekly
 - Children rated monthly
 - Parent-child sessions monthly
 - Children meet criteria for graduation
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TECHNIQUES

- Social skills - compliment chain
 - Feelings related to problem behavior
 - Apology letters
 - Reinforcement jar
 - Graduation caps and party
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CRITERIA FOR TERMINATION

- 
- Attend at least 80 % of all scheduled meetings
 - Satisfactory attention and participation
 - Know and apply Sexual Behavior Rules





CRITERIA FOR TERMINATION

- 
- No inappropriate sexual behavior for a minimum of 3 months
 - Appropriate social interactions in group
 - Apply impulse control techniques





SIGNALS FOR PARENTS AND COUNSELORS

- Unusual sexual knowledge or focus
 - Exaggerated interest in sexual activities
 - Sexual play with older/younger children
 - Approaches unfamiliar children for sex play
 - Bribes or forces children into sexual behavior
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- 





SIGNALS FOR PARENTS AND COUNSELORS

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- 
- Confusion regarding rights of others
 - Tries to get children/adults to touch genitals
 - Harms own genitals
 - Children complain about child's sexual behavior
 - Continues behavior after being told to stop



SIGNALS FOR PARENTS AND COUNSELORS

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- 
- Responds emotionally to sexual topics
 - Unusual toileting behaviors
 - Drawings depict genitals as major feature
 - Sexual behavior with animals
 - Painful and/or continuous erections; vaginal discharge



ADOLESCENT SEX OFFENDERS


Definition

- Ages 13-18

Boys and girls who have been charged with, convicted of, or have disclosed involvement as perpetrators in illegal sexual behavior




FOCUS ON ADOLESCENT SEX OFFENDERS

- 
- Studies on adult offenders
 - Crime statistics
 - Similarities found between adult and adolescent sex offenders





INCIDENCE AND PREVALENCE

- 
- Exact number unknown
 - All sex crimes significantly underreported
 - Crime statistics show 20% of rapes and 30%-50% of child sexual abuse committed by offenders under age 18




CHARACTERISTICS OF MALE ADOLESCENT SEXUAL OFFENDERS

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- 
- Adolescents are responsible for at least 20% of all sexual offense cases in the US
 - Approximately 2/3 of the cases involve younger victims
 - In general, more female victims
 - Black male adolescents are reported in greater numbers
 - More likely to have a history of physical abuse



CHARACTERISTICS OF MALE ADOLESCENT SEXUAL OFFENDERS

- 
- Frequently have a current and past history of behavioral and school problems
 - Reported to have had more sexual experiences than other groups of adolescents
 - Recidivism and preliminary treatment outcomes show reoffense rates of 10% being typical

(Davis & Leitenberg., 1987)

AGE OF ONSET OF DEVIANT SEXUAL INTEREST (N=561)


<u>Act</u>	<u>Age</u>					
	12	14	16	18	20	22
Voyeurism	28	40	60	65	70	78
Male non-incest	18	33	50	61	71	73
Frottage	0	16	46	58	62	70
Exhibitionism	15	24	40	58	63	74
Female Non-incest	8	18	37	46	55	59
Rape	4	10	23	31	48	59
Male Incest	17	33	50	64	70	74
Female Incest	7	16	22	27	30	34

Marshall, W.L., Laws, D.R., & Barbaree, H.E. (Eds.) (1990).

Handbook of sexual assault: Issues, theories and treatment of the offender. New York: Plenum Press.



FEMALE ADOLESCENT SEXUAL OFFENDERS

- 
- Very little literature available
 - Previous assumptions: rare; with male; major psychopathology
 - Questions to be answered:
 - Validity of assumptions
 - Similarity to adolescent male offenders
 - Predictive of adult offending behavior



CHARACTERISTICS OF FEMALE ADOLESCENT SEXUAL OFFENDERS

- Compared to male adolescent sexual offenders, girls...
 - ▶ Tend to victimize children; males victimize children, peers, and adults
 - ▶ Are more likely to report sexual victimization
 - ▶ Are referred for more serious offenses, not peeping, obscene phone calls, etc..
 - ▶ Are significantly less likely to be adjudicated for sexual offenses

IHS/BIA Child Protection Team Handbook-2002


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TREATMENT PROGRAMS

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- Should be based on theoretical model and thorough assessment.
 - Typically modified versions of adult programs.
 - Implemented in mental health clinics, group homes, psychiatric hospitals, and incarcerated settings.





ADOLESCENT OFFENDER PROGRAM

University of Oklahoma Health Sciences Center

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- Established in 1986; group format
 - Adolescent boys ages 13-18
 - 1.5 hours weekly; minimum of 1 year
 - Court ordered; requires parental involvement
 - Known recidivism rate: <5%





CRITERIA FOR ADMISSION

- Be court ordered to treatment; regular hearings
 - Have Probation Officer
 - Age 13-17; admit to illegal sexual behavior
 - Available for minimum of one year
 - Adequate supervision
 - Make restitution through community service
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TREATMENT COMPONENTS

- Orientation and Goal Setting
 - Disclosure
 - Empathy
 - Effects on Victim and Restitution
 - Evaluate Right/Wrong and Values Clarification
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TREATMENT COMPONENTS (cont'd)

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- Impulse Control
 - Assertion/Anger Management
 - Sex Education
 - Social Skills
 - Relapse Prevention





CRITERIA FOR TERMINATION

- 
- Satisfactory attendance and participation
 - No illegal sexual behavior (1 year)
 - No other illegal behavior (1 year)
 - Satisfactory school attendance and behavior





CRITERIA FOR TERMINATION

- 
- Satisfactory behavior at home
 - Provide group leadership
 - Obtain and keep a job
 - Present acceptable prevention plan
 - Make restitution to community





CURRENT ISSUES AND CONTROVERSIES

- 
- Lack of standardized assessment instruments
 - Use of aversive techniques
 - Reporting of additional offenses
 - Use of plethysmograph




CURRENT ISSUES AND CONTROVERSIES (cont)

- 
- Use of polygraph
 - Necessity of court involvement
 - Length of treatment
 - Risk factors for dangerousness



CURRENT ISSUES AND CONTROVERSIES (cont)

- 
- Efficacy of treatment
 - Lack of research
 - Community placement
 - Application of adult offender models