

#### SEX OFFENDER MANAGEMENT ASSESSMENT AND PLANNING INITIATIVE smart.gov/SOMAPI

## SOMAPI Report Highlights Key Things to Know About Juveniles Who Sexually Offend

#### Juveniles commit a significant number of sex crimes.

While most perpetrators of sex crimes are adults, a significant number of sex crimes are committed by offenders who are under age 18. Estimates of the prevalence of juvenile sexual offending vary depending on the data source and method of measurement: Uniform Crime Report data show that about 15 percent of rape arrestees are younger than age 18 (FBI, 2009); victim reports, however, suggest that juvenile perpetrators may be responsible for as many as 4 out of every 10 sexual assaults (Swenson & Letourneau, 2011).

## Sexual recidivism rates for juveniles range from 7–13 percent over a 5-year follow-up period.

Results of meta-analyses, or studies combining multiple individual studies, indicate that juvenile sex offenders have a sexual recidivism rate between 7 and 13 percent. Research indicates their rate of nonsexual recidivism is between 29 and 43 percent. However, sexual recidivism rates for juvenile sex offenders and juveniles who commit nonsexual offenses are comparable, suggesting that they may be similar populations. It should be noted that sexual assault is one of the most underreported crimes with only about 1 in 4 sex assaults being reported to the police. Therefore, the number of adjudicated sex crimes by juveniles significantly underestimates the number of actual crimes.

### Research on risk factors and assessment tools for juveniles who commit sex offenses is still in its infancy.

Research has not yet produced a universally agreed upon, finite and valid set of risk factors for juvenile sexually offending behavior. The risk assessment instruments that currently are available for use with juveniles who sexually offend are not yet empirically validated. Given the developmental processes that characterize both childhood and adolescence, there is a need for juvenile risk assessment instruments and processes to focus on estimates of short-term rather than long-term risk. The current value of risk assessment instruments for these youth lies more in their ability to serve as a basis for case management and treatment rather than in their capacity to accurately predict risk. Juveniles and adults who sexually offend should be viewed as distinct populations. Tools to assess risk in juveniles are not yet validated and may serve to best inform treatment planning. Treatment can be effective in reducing their risk to reoffend, especially approaches that include group and family therapy.

# Specialized treatment for juveniles who sexually offend leads to reductions in both sexual and nonsexual recidivism.

Both single studies and synthesis research examining treatment effectiveness have become more scientifically rigorous in recent years, and these studies consistently demonstrate that treatment is effective for many juveniles. A 2010 study conducted by Worling, Litteljohn & Bookalam, for example, found that treatment reduced sexual and general recidivism by 57 percent and 33 percent, respectively, based on a follow-up period of 20 years. Treatment approaches that address multiple spheres of juveniles' lives and that incorporate cognitivebehavioral techniques along with group therapy and family therapy appear to be most promising.

#### Adult and juvenile sex offenders are different.

Scientific evidence indicates that there are significant differences between adults and juveniles not only in their capacity to plan ahead, regulate emotions, control behavior and weigh the consequences of decisions, but also in their likelihood to reoffend. Hence, juveniles and adults who sexually offend should be viewed as distinct populations.

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