

UNDERSTANDING, ASSESSING,
AND REHABILITATING

Juvenile Sexual Offenders

SECOND EDITION



Phil Rich

Understanding, Assessing, and Rehabilitating Juvenile Sexual Offenders

Second Edition

Phil Rich

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A C K N O W L E D G M E N T S

My great appreciation to John Wiley & Sons, Inc., for their seemingly endless support, the opportunities they have provided to me, and their continued willingness to publish my work. Thank you. I have many people to thank at Wiley but would like to especially thank Rachel Livsey, senior editor for Social Work and Counseling, and Kara Borbely, senior editorial assistant, as well as Kate Lindsay, senior production editor, and Debra Manette, copy editor.

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ABOUT THE AUTHOR

Phil Rich, EdD, MSW, LICSW, is the former Clinical Director and the current Director of Clinical Program Development of the Stetson School, a residential treatment program for sexually reactive children and juvenile sexual offenders in Barre, Massachusetts. He received his doctorate in applied behavioral and organizational studies in 1992 and a master's degree in social work in 1979. Phil has served as the program director of five residential and day treatment programs, and has worked extensively with troubled adolescents and adults in residential,

inpatient, day treatment, and outpatient settings. Phil presents, trains, and consults nationally and internationally on the assessment and treatment of juvenile sexual offending, including the development and operation of treatment programs. He is the author of *Attachment and Sexual Offending: Understanding and Applying Attachment Theory to the Treatment of Juvenile Sexual Offenders* and *Juvenile Sexual Offenders: A Comprehensive Guide to Risk Evaluation*, and the four *Stages of Accomplishment Workbooks for Sexually Abusive Youth*.

INTRODUCTION TO THE SECOND EDITION

Over the seven years since the first edition of this book, much has changed in our field. Many of those changes are reflected in an expanded literature and research base and some of them in our practices, but much of that change is reflected in our sensibilities about and our expectations of treatment and the way we view the children and adolescents with whom we work. Much of this change also reflects a greater sophistication and sensitivity in how we think about and approach research and practice. As a field, we now recognize complexities and subtleties of which we formerly seemed unaware. We now seem to more clearly see that treatment is not the simple process reflected in limited and black-and-white, prescriptive, and psychoeducational models such as relapse prevention, sexual assault cycles, and the simple correction of thinking errors, and that treatment involves a reciprocal and engaged relationship with our clients and not simply the tasks they must accomplish to “succeed” in treatment. We further see that the children and adolescents who are our clients are not just “juvenile sexual offenders” but whole people whose lives and behaviors can be understood only in the context of whole lives, not simply through their sexually abusive behavior.

Certainly, we were well along seven years ago in the process of evaluating our ideas about the assessment and treatment of sexually abusive youth, and were already in the process of further developing those ideas and revamping or abandoning them if necessary; nevertheless, our thinking, approaches, and tools have very clearly advanced and flowered over the course of this decade. These changes and the themes in our field that have emerged over the past few years are described in the first chapter of this

second edition and need no further description here. Instead, consider Chapter 1 as both a detailed introduction to the second edition, providing an update and overview of the ideas, themes, practices, and changes that have further developed or emerged between editions, and as the foundation for the chapters that follow, each of which discusses and elaborates on those ideas, as well as setting the pace for the integrated, holistic, and multifaceted model of treatment, described throughout the book.

Because this is a second edition of an existing book, much remains the same in the language, the focus, the ideas, and the text. In fact, a glance at the table of contents of each edition shows that, although many chapters have been retitled, this edition essentially follows the same structure and organization as the first, and covers much of the same material and content, largely in the same order. However, there is updated and new material in every chapter, and all of the early chapters have been significantly rewritten. In some cases, what was a single chapter in the first edition has become two chapters in this edition. Hence, although the sequence and much of the text from the first edition remains intact, a great deal of text has been restructured, revised, and updated and, as mentioned, significantly rewritten for this edition. In addition, there are several new chapters and four sections (instead of three) that serve to more tightly organize the content.

My intention, however, was not to simply update and revise the text but also to expand on ideas and information not fully developed in the first edition, as well as make way for and add new content. For readers new to the book, nothing is lost and, I hope, much is gained. For those readers familiar and pleased with the first edition, I hope

you will take on this second edition as well. It updates, refines, and furthers the material of the prior version and incorporates new material.

In writing and organizing this second edition, one chapter from the first edition has been excluded: *Diagnosis and Assessment of Comorbidity*. However, a revised version of this chapter, as well as other additional material, is included in an online appendix placed on the publisher's Web site (www.wiley.com/go/rich) for your review, as shown on the contents page. These appendixes include a chapter on mental health and sexually abusive youth, a discussion of adolescent brain development, a brief outline of behavioral treatment, and a chapter describing an attachment and developmentally informed model of treatment.

THE GOAL OF THIS BOOK

This is a book for practitioners who provide treatment for sexually abusive and troubled children and adolescents as well as for the designers and managers of assessment and treatment programs for juvenile sexual offenders. It is designed and written to provide both a broad overview of and a detailed look at treatment for sexually abusive youth, as well as providing a specific set of tools to use in working with this group of troubled children and adolescents, and a framework from which to practice.

The book explores basic ideas that will help readers develop an understanding of the problem, the behaviors, and the factors that contribute to sexually abusive behavior among children and adolescents and provides ideas, methods, and approaches for the assessment and treatment of sexually abusive youth. It describes methods for treating sexually troubled youth that go beyond the cognitive-behavioral and psychoeducational approaches prevalent in today's treatment, marrying psychoeducational, cognitive-behavioral, and process-oriented psychodynamic treatments into a larger model that incorporates individual,

group, and family treatment into an approach that treats the whole child in the context of his or her life.

However, the book is not intended to simply be another version of how to assess and treat juvenile sexual offenders; there are already many well-written and well-developed books, chapters, and articles that address these ideas (many of which are listed as references). Instead, this book takes a look at the same issues, concepts, and models through critical eyes and presents a clear and direct pathway to assessment and treatment in a manner that will help practitioners become familiar with the ideas of the field and/or judge them, and perhaps go beyond them to create ideas of their own design that fit their own clinical orientation and experience.

The book addresses complex issues and ideas in straightforward terms, without falling short of the high ideals, integrity, and sophistication required to be instructive, knowledgeable, contemplative, and critical enough to induce original thinking in the minds of every practitioner. The book simplifies but is not simplistic, instead urging the reader toward discerning thinking. The book is both theoretically and empirically driven, with many references to historical and current research and publications, but is neither built on nor driven by research. It describes many standard ideas, models, and methods but does not support the status quo or de facto conclusions; nor does it support the idea of adopting and using existing ideas simply because that is what is in use everywhere else. If anything, this book actively cautions against adopting and using such models merely because they are "standard" treatment fare. Models and ideas should be developed and used because they work, and because we can see they work, not because they are the standards in the field, which, in turn, requires the application of critical thinking in every practitioner. This is a book for practice, then, and the development of the knowledge base and informed thinking that is required for effective practice.

THE WISH

Many of the ideas in this book are neither original nor “correct,” but they are explored, framed, and laid out in a manner that, I hope, will bring the practitioner to a clear understanding of the ideas, issues, tasks, and methods of the work. Above all, this is a book with a goal (and a passion): that of developing skills and informed, sophisticated, critical, and original thinking in those who assess and treat juvenile sexual offenders, or whatever we choose to call these troubled children.

A NOTE ON PRONOUNS

Whenever a gender-specific pronoun is required, I often (but not always) use the male variant, such as “he” or “him.” That’s because most sexual offenders, adult or juvenile, are male. However, sexually abusive behavior is not limited to males alone. Accordingly, a “she” or “her” is occasionally dropped into the text, reminding the reader that, although sexually abusive behavior is a predominately male crime, sadly we are seeing increasing numbers of girls and women engaging in such behavior.

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P A R T I

Understanding Sexually Abusive
and Sexually Troubled Youth

Introduction and Updates

Framing the Ideas and the Tasks

As described in the brief introduction, in the seven or so years that have passed since the first edition of this book, many things have changed in the field of treatment for juvenile sexual offenders, although in some ways these changes have been quite subtle. Actually, it might be more accurate to say that many things have changed in the way that we, as researchers and practitioners, see and understand the children and adolescents with whom we work, the way in which we see ourselves in relationship to the work, and the framework by which we conceptualize treatment and implement treatment interventions.

SEVEN YEARS ON: EMERGING IDEAS, THEMES, AND MODELS

Reflected in and driven by an expanding and evolving literature, over the past seven years we have seen the consistent emergence of a number of themes within that literature, adding to a new age in the development and, from my perspective, advancement of our thinking and practice. In our approach and in our thinking, we increasingly and now more consistently than ever recognize troubled young people as “whole” people, and we recognize the need for a multifaceted,

multidimensional, and multisystemic approach to treatment.

Thus, we not only see our clients as multifaceted and multidimensional, and far more than just their sexually abusive behaviors, but we see the treatment itself as equally complex and far-reaching and more than simply the sum of its parts. There is an increasing recognition that the therapeutic relationship itself is at the heart of treatment and that treatment is not simply technique and the delivery of information. We recognize that, beyond what we teach young people through cognitive-behavioral and psychoeducational treatments, of great importance is the manner in which we approach and see them and the way in which we help them to think about themselves and others. And we recognize the power of developmental experience and social context on the formation of personality, neurological development, social connectedness, social competence, and current behavior.

Although relatively new to our still-developing field, few of these ideas are new to the larger field of mental health treatment in which sexual offender-specific treatment is embedded. Accordingly, the treatment of sexually abusive youth, and to some degree the treatment of sexually abusive adults, has

entered the larger arena of psychosocial and mental health treatment. In so doing, it has moved away from the black-and-white world of behaviorally oriented and, to some degree, cognitive-behavioral therapies and simplistic psychoeducational treatment models that formerly permeated the field of adult and juvenile work. Indeed, we see these changes in our attitudes, in our practices, and in our sensibilities. One only need look at the Good Lives Model (Ward, Polaschek, & Beech, 2006),¹ which provides an individualized and humanistic mental health approach to the treatment of adult sexual offenders, to see such changes. In addition, the influential work of the practitioners and researchers cited throughout this book has not only helped shape and reshape our thinking and approach to understanding and treating juvenile sexual offenders but has also helped introduce and import state-of-the-art ideas from the surrounding and more general world of mental health treatment.

It is not that we have concluded that our former approach to the treatment of young people with sexual behavior problems was ineffective. In fact, there is no evidence that our former treatment methods did *not* work, at least based on widely described statistics regarding juvenile sexual recidivism, which are the best and most obvious indicator of treatment effectiveness. On the contrary, although different studies have reported different rates of recidivism, the most commonly reported statistics have consistently illustrated relatively low rates of sexual reoffense among juvenile sexual offenders, rates that frankly are not likely to get much lower. Thus, changes and developments in our field reflect a change in our *perspective* about and *sense* of treatment and a shift in our thinking about what it is that makes treatment effective or ineffective as well as the manner in which we think about our clients.

The Treatment Process

With respect to our view about what makes treatment work, we have recently come to believe that it is the treatment *process* rather than the treatment *method* or technique that is most effective, or at least central, in the application of method. That is, it is the treatment process that drives effective outcomes in treatment *rather* than the techniques of treatment or the materials we use. For example, Beech and Hamilton-Giachritsis (2005) write of a change in the treatment of adult sexual offenders from a direct and confrontational style to a model built on supportive and emotionally responsive treatment relationships. Similarly, Marshall (2005) recommends that clinicians adopt a relationally based approach to treatment, writing that the attributes and behaviors of the therapist more greatly influence behavioral change than the techniques and methods of treatment manuals.

These ideas fit with those found in the general literature of psychotherapy, in which we are increasingly recognizing that what the clinician brings into treatment, in terms of attitude and characteristics, strongly affects the outcomes of therapy (Baldwin, Wampold, & Imel, 2007; Kramer, de Roten, Beretta, Michel, & Despland, 2008; Marmarosh et al., 2009). There is, then, an increasing recognition in our work with offenders, adolescent and adult, that the techniques and content of treatment are inadequate on their own and that treatment ideas and tasks are most effectively delivered and worked on through the therapeutic interaction between clinician and client, the environment in which treatment and rehabilitation occurs, and the investment of the client him/herself.

Over time, as more clinicians have come both to recognize the complex needs of the sexually abusive youth they treat and to apply critical thinking to their work, unidimensional models that consider treatment to be essentially psychoeducational or cognitive-behavioral have been increasingly replaced by more clinically

¹The Good Lives Model is described in Chapter 15.