

**MANDATORY REGISTRATION
FOR JUVENILES CONVICTED
OF A SEXUAL OFFENSE
AND
INCREASED
RISK OF RECIDIVISM**

JUVENILE LAW CONFERENCE

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30+ YEARS INFORMAL RESEARCH

1000+ Victims of sexual trauma

500+ Accused or convicted sex offenders

300+ Accused or convicted juvenile sex offenders

PURPOSE OF REGISTRATION

- *Protect the Public*
- *Inform the public so that they can protect themselves and their families*
- *Decrease victimization*
- *Decrease recidivism*
- *Allow enhanced access for law enforcement*

ALLURE OF TRUTHINESS

“It used to be, everyone was entitled to their own opinion, but not their own facts. But that’s not the case anymore. Facts matter not at all. Perception is everything.”

Stephen Colbert in a January 26, 2006, interview about truthiness, a word he coined to parody political arguments based on gut feelings to the exclusion of, or contradicting, facts and data.

IT SOUNDS SO GOOD, DON’T CONFUSE US WITH THE FACTS

“JUVENILE SEX OFFENDERS BECOME ADULT SEX OFFENDERS

“ALL JUVENILE SEX OFFENDERS ARE THE SAME AS ADULT OFFENDERS”

“MANDATORY REGISTRATION FOR JUVENILE SEX OFFENDERS WILL PROTECT THE PUBLIC”

Apologies to Dr. Mark Chaffin, “Our Minds Are Made Up-Don’t Confuse Us With the Facts: Commentary on Policies Concerning Children With Sexual Behavior Problems and Juvenile Sex Offenders

Sex Offenses Recidivism

The vast majority of individuals convicted of a sexual offense regardless of their age have only offended once.

Percentage of Offenders with only One Conviction for Sexual Offense

88% Adults

84 % Juveniles

Federal Probation, Volume 70 Number 3, December 2006.

RECIDIVISM RATES FOR PREVIOUS SEX OFFENSES

Adults 5.3%-13%

Juveniles 2%-7%

Juveniles convicted of other offenses commit more sexual offenses than do convicted juvenile sex offenders.

JUVENILE LOW RECIDIVISM

For the most part, Juveniles convicted of a sexual offense do not re-offend.

Juveniles who receive even 3 months of Cognitive Behavior Treatment in conjunction with family treatment, have a 2% re-offense rate.

The majority of juveniles adjudicated to treatment participate in treatment for more than one year.

MYTHS ABOUT JUVENILE SEX OFFENDERS

They are all the same

They are the same as adult sex offenders

They are very high risk

They represent a population with permanent anti-social personality traits, highly resistant to change.

JUVENILES SEX OFFENDERS ARE A VERY HETEROGNEOUS POPULATION

Youth labeled as juvenile sex offenders include:

Teens reacting to their own victimization

Normal early adolescent boys curious about sex

Acting experimentally

Immature/impulsive teens acting without thinking

Misinterpretation by teens of consent/mutuality

Romeo and Juliet cases

Children imitating TV/video/games/older sibs

Teens responding to peer pressure

Kids swept away by sexual arousal of the moment

Teens under the influence of drugs/alcohol

Youth ignorant of the law or the potential consequences of their actions

PREVALENCE ESTIMATES OF CHILDHOOD SEXUAL ABUSE

Frequently reported as 1 of 4 girls, 1 of 7 boys

1984 Survey 3,132 adults	Overall rate	5.3%
	Women	6.8%
	Men	3.8%

American Journal of Epidemiology Vol. 126, No. 6: 1141-1153 1987

Meta Analysis			
45 studies 21,999	Women	27%	
26 studies 13,704	Men	14%	

A Meta-Analytic Examination of Assumed Properties of Child Sexual Abuse Using College Samples Psychological Bulletin, 1998

NORMAL VS. DELINQUENT

“Keep in mind that delinquent behaviors are fairly common in the general adolescent population, as the majority of adolescents who engage in behavior which, if caught, could lead to arrest. Therefore, those adolescents we refer to as delinquent, are at times, merely those who have been caught.”

“Some sexually inappropriate behavior in children e.g. obscene phone calls, voyeurism, lewd sexual gestures, genital exposure, and even frotteurism, can be thought of as developmentally appropriate.”

Dr. Steven Thorne, TCDLA, October, 2008, Juvenile Assessments

Developmentally Related Sexual Behaviors Normative Sexual Behavior

<i>Question</i>	<i>Endorsement %</i>
2- to 5 YEAR OLD BOYS	
<i>Stands too close to people</i>	<i>29.3</i>
<i>Touches sex (private) parts when in public places</i>	<i>26.5</i>
<i>Touches or tries to touch their mother's or other women's breasts</i>	<i>42.4</i>
<i>Touches sex (private) parts when at home</i>	<i>60.2*</i>
<i>Tries to look at people when they are nude or undressing</i>	<i>26.8</i>

2 to 5 YEAR OLD GIRLS

<i>Question</i>	<i>Endorsement %</i>
<i>Stands too close to people</i>	<i>25.8</i>
<i>Touches or tries to touch their mother's or other women's breasts</i>	<i>43.7</i>
<i>Touches sex (private) parts when at home</i>	<i>43.8</i>
<i>Tries to look at people when they are nude or undressing</i>	<i>26.9</i>

6 to 9 YEAR OLD BOYS

Touches sex (private) parts when at home 39.8

Tries to look at people when they are nude or undressing 20.2

6 TO 9 YEAR OLD GIRLS

Touches sex (private) parts when at home 20.7

Tries to look at people when they are nude or undressing 20.5

10 TO 12 YEAR OLD BOYS

Very interested in the opposite sex 24.1

10 TO 12 YEAR OLD GIRLS

Very interested in the opposite sex 28.7

PEDIATRICS Vol. 101 No. 4 April 1998 p.e9
Normative Sexual Behavior in Children: A Contemporary Sample
William N Friedrich*, Jennifer Fisher*, Daniel Broughton*, Margaret Houston*, and Constance R. Shafran
From the Mayo Clinic, Rochester, Minnesota.
<http://intl.pediatrics.org/cgi/content/full/101/4/e9E11>

**CHANGE IN LABELLING:
NORMAL VS. CRIMINAL**

Historically "harmless" behaviors

Skinny-dipping

Streaking

Mooning

Obscene phone calling

Roadside elimination

These behaviors do not require registration to put an end to them.

They require some maturity, common sense, and education.

Registration will forever irreparably harm these individual

Youth labeled as juvenile sex offenders also include:

Severely depressed, socially isolated, or developmentally delayed teens who turn to younger children for acceptance instead of age mates

Teens with physiologically based impairments in impulse control, i.e. ADHD and Bipolar

Teens whose mental illness include hyper-focus on sexuality, i.e. Bipolar

Seriously mentally ill teens

REGISTRATION WILL WORSEN BEHAVIOR FOR THOSE WITH PSYCHOLOGICAL ISSUES

These teens whose sexual offenses grow out of significant emotional, physical, and psychological issues will NOT be less likely to re-offend if required to register. They will be much more likely as a group of vulnerable populations to become less capable, less socialized and more marginalized by the stigma and isolation that comes from registration.

Most teens adjudicated for sexual offenses fall into one of these first groups: normal kids being impulsive, teens acting out their own traumas, or adolescents who suffer from developmental delays, ADHD, or Bipolar Disorder

Youth labeled as juvenile sex offenders also include:

*Persistently delinquent teens who commit both sexual and nonsexual crimes
Generally aggressive and violent youth;
Those who are indifferent and selfishly take what they want;
High-riskers attracted to the thrill of rule-breaking*

SORNA ERADICATES TRADITIONAL JUVENILE JUSTICE GOALS

*Rehabilitation
Remediation
Best Interest of the child
Protection from long-term stigma
Confidentiality*

SORNA

*Exposes juveniles to the same
punishments as adults
without the same due process
protections.*

EFFECTS OF REGISTRATION

*Punishment
Stigmatization
Shame for self
Shame for family members
Shame for victims
Isolation
Lack of educational opportunities
Lack of vocational opportunities
Eviction
Homelessness
Victimization
Vigilantism*

**Juvenile Sex Offender Focus Group
Understanding Treatment and Accountability
in Juvenile Sex Offending
FINAL REPORT
AND
RECOMMENDATIONS
2000**

**Prepared for:
Office of Juvenile Justice and Delinquency Prevention
Training and Technical Assistance Division**

OJJDP RECOMMENDATIONS

Registration statutes are too often misapplied to sexually offending juveniles, placing children and youth at risk in multiple ways without increasing public safety.

OJJDP RECOMMENDATIONS

Offender treatment programs specifically designed for juveniles and gender specific programs should be developed.

OJJDP RECOMMENDATIONS

Victim services programs, including restorative justice, as appropriate, should be implemented.

OJJDP RECOMMENDATIONS

The rights of offending juveniles to the least restrictive environment should be maintained even for sex offenders.

OJJDP RECOMMENDATIONS

Primary and secondary prevention standards and programs can prevent sexual perpetration as well as sexual victimization.

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