

MASOC PRACTICE UPDATE: Prevention and Progress



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What We Know about Girls Who Have Committed a Sexual Offense¹

BOTTOM LINE

Girls who have committed a sexual offense are not a homogenous group. This article shows that girls who have sexually abused and have a history of child maltreatment are more likely to have a mental health diagnosis and experience high levels of anger, depression and anxiety than girls without this history.

RESEARCH

The authors offer a summary of what is known and not known about adolescent girls who have committed a sexual offense. They note that the prevalence of female offending behavior by adolescent girls is unknown. However, based upon three small studies, they estimate that the prevalence of all adolescents who commit a sexual offense who are girls is between 5-10%. Furthermore, they outlined some of the differences between females and males. For example, they note that girls are more likely than boys to have sexual abuse histories and to have experienced multiple types of abuse. They typically display sexual aggression at a younger age, choose younger victims. They are typically younger at the age when they are arrested and they are equally likely to abuse boys or girls.

In this paper, Roe-Sepowitz and Krysik identify a relatively large sample of 118 adolescent girls from a database in Florida covering from 1999-2005. They offer a descriptive overview of these adolescents. They find that many came from chaotic and disorganized families with poor parental supervision and serious school and mental health programs. The majority of these girls are identified as having sexually abused one child, who was slightly more likely to be male. The child harmed was most likely a sibling or relative, but there was no victimization of strangers reported. The most common location was in the adolescent's home or the home of the child harmed.

The authors also explore the impact of physical or sexual abuse or neglect. Girls who have sexually offended and had their own maltreatment history were significantly more likely than girls who have offended without this history to live in an unstable living situation, more often absent, tardy, truant, suspended, expelled or drop out of school. They also had a more mental health diagnoses and

¹ The authors of this newsletter chose to use person-first language, referring to this group as adolescents or girls who have committed a sexual offense rather than female juvenile sex offenders.

experience clinical levels of depression, anxiety, anger and irritability. The victim was more likely a relative where the victim of a non-maltreated girls was more likely a neighbor, classmate, friend, peer or someone they were babysitting for.

IMPLICATIONS FOR PROFESSIONALS

This paper provides new reasons to challenge us to develop an understanding of females based upon the research rather than base our practice on one's understanding of males. Although this may seem obvious, many assessment measures and treatments have been adapted for use with females without first ensuring that they comport with the research and are truly applicable. For example, it is noteworthy that factors shown by research to increase risk among males such as crimes committed against strangers or in public places did not occur in this sample of females. Likewise, this paper illustrates the need for the use of trauma interventions and trauma-informed care with girls who have sexually abused given their own trauma history before any problematic behaviors emerged. Questions that treatment providers can ask when considering their assessment and treatment methods can include: what extent does the research that informed these methods focus on adolescent girls; what are the trauma histories the client brings with them, and is there a stable family situation available to them.

IMPLICATIONS FOR THE FIELD

As with many other recent contributions to the literature involving children and teens, Roe-Sepowitz and Krysik's work highlights the importance of preventing all forms of child maltreatment, since each form can contribute to the development of sexually abusive behaviors. Whereas it was once assumed that there was a direct pathway from victimization to victimizing others, these findings show that the etiology of sexually abusive behaviors is complex and can appear differently across different genders and sexualities. To this point in our evolution, there has been virtually no data gathered, for example, on non-binary or transgender youth. Ultimately, as a colleague of ours observed in discussing these issues, "When designing your treatment materials for girls, it's not enough to change the names of the case examples from Sam to Samantha and the cover of your workbook to have more pink in it."

CITATION:

Roe-Sepowitz, D. & Krysik, J. (2008). Examining the sexual offenses of female juveniles: The relevance of childhood maltreatment. *American Journal of Orthopsychiatry*. Vol. 28, No.4, 405-412.

ABSTRACT

Research on female juvenile sex offenders is limited by small clinical samples. Little is known about the characteristics of female sexual offending and how it is related to child maltreatment. This study examines data from the case histories of 118 female juvenile sex offenders. In contrast to portrayals in previous research, this study shows that female sex offenders are not a homogeneous group. Findings also included differentiation between female juvenile sexual offenders with a history of child maltreatment and those without a history of child maltreatment. Female juvenile sex offenders who had a history of child maltreatment were more likely to have a current mental health diagnosis and experience clinical levels of anger--irritability and depression--anxiety than those without a history of child maltreatment. The impact of a history of sexual abuse for female juvenile sex offenders was found to be important with regard to higher levels of coercion of their sexual abuse victims. Important distinctions are highlighted that have implications for female-specific assessment, treatment, and prevention.