Juvenile-on-juvenile sex crimes and sexual abuse
Practice and public policy considerations

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What About The ‘Kids These Days?’ Are They Really Worse Than Ever?

I DON'T KNOW... THE TROOP'S GOING TO HELL IN A HANDBASKET.

TELL ME ABOUT IT. KIDS TODAY HAVE NO RESPECT.
Kids These Days?

The Internet, Adolescent Males, and Homemade Blowgun Darts: A Recipe for Foreign Body Aspiration

abstract

We describe our experience with blowgun dart aspiration via an illustrative case series and review the resources available to teach children how to construct these objects. A 15-year-old boy presented with cough, wheeze, and eventually admitted to aspiration of a homemade blowgun dart. This instance heightened the awareness of our experience with blowgun dart aspiration as 5 cases presented within a 5-month period. Patients uniformly presented with cough and reported aspiration, and wheezing was noted in 2 of 5. Although all ultimately admitted their behavior, 2 were initially reluctant to admit aspirating the blowgun dart. Radiographic findings of a needle-shaped metallic foreign body were consistent in all patients. Each admitted to finding instructions for blowgun dart construction on the Internet. Emergent rigid bronchoscopy with blowgun dart removal resulted in symptom resolution in all without complication. This represents the largest series of blowgun dart aspiration to date. During deep inhalation, when preparing to propel a blowgun dart, the vocal folds maximally abduct, leading to increased risk for aspiration. Twenty websites were identified providing instructions for the construction of homemade blowgun darts. With the accessibility of the Internet and number of instructional websites, this clinical entity may become more common in the future. Unfortunately, only a few of the websites provide any safety warnings. Certainly, prompt treatment can result in good outcomes; however, serious potential complications, including death, could occur especially given the hesitance our patients showed in divulging the truth of the inciting event. Pediatrics 2015;132:e519–e521

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foreign body aspiration, cough, blowgun dart, airway obstruction

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Youth and Young Adult Homicides

* Rates for All Ages are age-adjusted to the standard 2000 population; rates for the 10-24 yrs age group is age-specific.
School Homicides and Suicides (ages 5-16)
Teen Runaway Arrests

Lifetime Prevalence Drug Use Including Inhalants

Percentage of High School Students Who Were in a Physical Fight,* 1991 – 2011†

* One or more times during the 12 months before the survey.
† Decreased 1991–2009, no change 2009–2011, p < 0.05.

Suicide Rate: Youth Aged 10-17 Years

High School Students Who Were Currently Sexually Active, 1991 – 2011†

* Had sexual intercourse with at least one person during the 3 months before the survey.
† Decreased 1991-2011, p < 0.05.

% 9th Graders Who Have Ever Had Sexual Intercourse

Source: Centers for Disease Control and Prevention

16% Decline 1991-2007
High School Students Who Used a Condom During Last Sexual Intercourse,* 1991 – 2011†

* Among students who were currently sexually active.
† Increased 1991–2003, no change 2003–2011, p < 0.05.

Birth rates for teenagers by race and Hispanic origin

Note: Based on data for teenagers 15-19 years old from the National Vital Statistics System.
Source: National Center for Health Statistics
Percentage of High School Students Who Reported Current Alcohol Use, * 1991 – 2011†

* Had at least one drink of alcohol on at least 1 day during the 30 days before the survey.
† No change 1991–1999, decreased 1999–2011, p < 0.05.
High School Students Who Rode in a Car Driven by Someone Who Had Been Drinking Alcohol,*
1991 – 2011†

* One or more times during the 30 days before the survey.
† Decreased 1991–2011, p < 0.05.

“Kids These Days”

- Still Juveniles, Still Do Dumb Things.....But
- Overall, more risk averse than in decades past
  - Overall, less violent crime, fewer fights
  - Less likely to be a victim of violence or abuse
  - Less substance use (except marijuana)
  - About the same percent who are sexually active as in years past (and similar to teens in other countries) but starting later and using condoms more often. Teen birth rate is dropping
  - Relatively fewer serious mental health problems
- Many of these things are still problems, but “the kids these days” are not worse than ever. Rather, if anything, they are doing relatively better.
Ages of Individuals Committing Sexual Abuse of Children Under 12 Years

Among cases known to law enforcement, about 36% of sex crimes against children are committed by other juveniles. Very large peak in early adolescence, then drops sharply in later adolescence.
There Are Substantial Variations By Victim Age
There Also Are Substantial Variations By Victim Age + Gender

Male Victims

Female Victims

Ormrud, Finkelhor & Chaffin, 2011
Characteristics of Juvenile Sex Offenders

- **Diversity.** The defining characteristic is that......there is no reliably good defining characteristic (other than gender)
- Typology research with adolescent sex offenders has defined at least three broad subgroups. But the demarcations between these groups are not sharp
  - Generally and persistently delinquent youth
  - A small number of possibly early paraphilic youth
  - Youth who are neither (the largest group)—often situational or experimental behavior
- No single set of associated mental health or family characteristics
  - Sexual behavior is often not the only problem, but what the others are can vary quite a bit
  - Some with neurological damage. Some with serious mental health problems. Some who are very immature. Some who are impulsive. Some with substance abuse. Some who are otherwise well functioning
Juvenile Offenders vs. Adult Offenders

- Both groups are mostly male (juveniles are 93% male)
  - But, substantial numbers of females found among very young sexually aggressive children (up to 60% female among preschool aged children with intrusive/aggressive sexual behavior)

- Many differences from adult sex offenders or pedophiles
  - Motivation is often different (pedophilia or hebophilia are not developmentally solid constructs among juveniles)
  - Motivation more often exploratory
  - Events more likely to occur at school, and to involve > 1 offender
  - Risk prediction factors may be unique and different
  - Brain development and self control is very different—behavior may be more impulsive than compulsive
  - In other words, these are juveniles first, not simply smaller versions of adult sex offenders
Juvenile Sex Offender Recidivism Is Consistently Low

Studies following at least 50 youth for at least one year. Average length of follow-up = 5 years. Various interventions.
Recidivism is Rarely Sexual in Nature
15 year follow-up
If Recidivism Happens, It Tends to Happen Sooner Rather than Later
Most (80%) of the small number of child welfare referrals were among youth who did not begin or did not complete the program.
Future Sex Crime Risk is About the Same for Juvenile Sex Offenders and Non-Sexual Teen Delinquents

<table>
<thead>
<tr>
<th>Incarcerated Teen Offender Group</th>
<th>Any Charge (six year follow-up)</th>
<th>Any Felony Charge</th>
<th>Sexual Offense Charge</th>
</tr>
</thead>
<tbody>
<tr>
<td>All Sex Offenders (n = 249)</td>
<td>74% (n = 184)</td>
<td>49% (n = 123)</td>
<td>7% (n = 17)</td>
</tr>
<tr>
<td>All non-sex offenders (n = 1780)</td>
<td>80% (n = 1432)</td>
<td>62% (n = 1096)</td>
<td>6% (n = 101)</td>
</tr>
</tbody>
</table>

Of the 118 total future sex offenses accounted for by all formerly incarcerated teen delinquents, 86% were committed by former non-sexual delinquents

Caldwell, (2007)
In Many Cases, Newer Brief Treatments Are Highly Effective. But Some Treatments Aren’t.

Carpentier, Silovsky & Chaffin, 2007
What Interventions Work for Younger Kids?

- St. Amand, Silovsky, & Bard meta-analysis of 11 outcome studies for pre-teens
  - Found sizeable reductions in sexual behavior problems over the course of short-term treatment
  - Treatments that taught parents basic child behavior management skills and victimization prevention skills were the most effective
  - This means that ADULT supervision and monitoring is key
  - In teen sex offender studies—adult/parental monitoring results in significantly lower recidivism
  - Treatments that adapted sexual deviancy or adult sex offender approaches performed worse than those that did not
What Interventions Work for Teens?

- High parent/caregiver involvement associated with better outcomes
- **Increased adult monitoring appears key**
- Normal prosocial peer group involvement—not isolation
- Set rules and limits around sexual behavior

- In **rare** cases, teens may be developing pedophilia (attraction to much younger children), which requires more intensive treatment and avoiding contact with young children
  - This suggests that individual case-by-case assessment may be critical for making decisions
How Are These Events Handled?

- A complicated question, about which there may sometimes be little agreement. May depend on
  - The age of the juveniles
  - The age difference
  - The exact behavior involved
  - Degree of mutuality or coercion
  - The values and feelings of family and other adults
  - Beliefs about what is normal sex play and what is not
  - Cultural traditions
  - Laws and policies
What Are Possible Responses To These Events?

- Ignore--do nothing
- Parents and families handle matters informally
- Schools or institutions may handle matters internally
- Handled within health or social services or religious systems
- Police may handle without further referral
- Child protection authorities
- Juvenile justice system
- Adult criminal system
Supervision or Safety Plan for Youth

- Example
  - No babysitting, under any circumstances
  - Supervision by a responsible adult when around younger children
    - Interacting with younger children in “public” settings (i.e. door open)
  - Remaining properly clothed in public areas
  - No sexual talk, jokes, or “horseplay” with younger children
  - No authority over younger children
  - “Rule-of-three” for joint sleeping situations
  - Create atmosphere of openness for talking about unwanted sexual behavior or sexual aggression