WOULD YOU LABEL A 6 YEAR OLD A SEX OFFENDER?
SEXUALLY MALADAPTIVE BEHAVIOR BY YOUTH

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Meet your facilitator!

• DONNA LUCERO MA, LPC C – CLINICAL DIRECTOR

• DONNA LUCERO is the clinical director at All Faiths, a native Búrqueña, a UNM graduate (BA in Psychology, with a minor in Family Studies; MA in Counseling).

• With over 23 years of experience working with kids & families who have experienced trauma, mental health issues, poverty and adversity, Donna strongly believes in the critical nature of early childhood development and the importance of healthy brain development, attachment & relationship for kids to grow to be healthy, productive adults.
SEXUALLY REACTIVE VS. SEXUALLY AGGRESSIVE
SEXUALLY REACTIVE

SEXUALLY (ABUSE) REACTIVE= CHILDREN WHO HAVE EXPERIENCED THEIR OWN SEXUAL ABUSE/TRAUMA AND ARE RE-ENACTING ASPECTS OF THEIR OWN ABUSE SEXUALLY, EITHER BY MEANS OF PREOCCUPATION WITH SEX AND/OR SEXUAL MATERIAL, EXCESSIVE OF HARMFUL MASTURBATION, SEXUAL BEHAVIOR WITH OTHER CHILDREN USUALLY SIMILAR AGE OR YOUNGER, ETC. OFTEN TIMES THESE BEHAVIORS ARE TRIGGERED BY EXTERNAL STIMULI IN THE ENVIRONMENT.
Sexually Reactive

Alternative term: Children with Sexual Behavior Problems

Terms to avoid: “Perp”, “sex offender”, “perv,” “deviant,” “predator”
SEXUALLY AGGRESSIVE

SEXUALLY AGGRESSIVE=CHILDREN/YOUTH WHO ENGAGE IN SEXUALLY ABUSIVE BEHAVIOR INVOLVING INTIMIDATION, COERCION, THREATS OF PHYSICAL HARM OR USE OF FORCE. COERCION REFERS TO ONE’S EXPLOITATION OF AUTHORITY, THREATS OF FORCE, OR INTIMIDATION TO GAIN COOPERATION OR COMPLIANCE. “GROOMING” BEHAVIORS CAN ALSO BE INVOLVED IN OBTAINING COOPERATION/COMPLIANCE. OFTEN TIMES THESE YOUTH ARE REFERRED TO AS SEX OFFENDERS OR AN S.O.
Sexually Aggressive

Alternative term: Youth Who Have Caused Sexual Harm

Terms to avoid: “Perp”, “sex offender”, “S.O.”, “perv,” “deviant,” “predator”
SEXUAL OFFENSE

SEXUAL OFFENSE = SEXUAL BEHAVIOR THAT CONSTITUTES A LEGAL OFFENSE; CRIMINAL OR ILLEGAL SEXUAL BEHAVIOR. (SEE STATE STATUTES FOR SPECIFICS IN THE LAW ABOUT WHAT CONSTITUTES ILLEGAL OR CRIMINAL SEXUAL BEHAVIOR)
HOW DO I KNOW THE DIFFERENCE?
THE WOODSMAN
WHAT PATTERNS OF BEHAVIOR DID YOU NOTICE IN WALTER IN THE WOODSMAN? HOW MIGHT THEY BE DIFFERENT FROM YOUTH WHO CAUSE SEXUAL HARM/CHILDREN WITH SEXUAL BEHAVIOR PROBLEMS?
ADULT PATTERNS OBSERVED:

- RATIONALIZATION/MINIMIZATION= THINKING ERRORS/COGNITIVE DISTORTIONS (“I NEVER HURT THEM”)
- DEVIANT INTERESTS/ACTUAL SEXUAL PREFERENCE FOR CHILDREN
- FANTASY ABOUT SEX WITH CHILDREN
- SOCIALLY INEPT WITH ADULTS……..MUCH MORE CONFIDENT WITH INTERACTIONS WITH CHILDREN. PROBLEMS WITH INTIMACY WITH ADULTS
- POOR COPING SKILLS/POOR SELF MANAGEMENT SKILLS
- ISOLATED
- “GROOMING” - PLANNING, PREPARING, BEFRIENDING, FOLLOWING
- LACK OF EMPATHY
Some differentiating signs between a child/youth with sexual behavior problems and a youth who has caused sexual harm:

- Do they seem to have a conscious knowledge of sex and sexual behavior or was the behavior triggered by some external stimuli? Opportunity?

- How sophisticated was the incident(s)?

- Did penetration occur?

- Was it planned?

- Did the child/youth have a goal in mind like ejaculation?

- How many times has the child/youth engaged in this type of behavior? Has it happened in the past and been addressed directly and it is still occurring despite consequences?

- Has it gone on for an extended period of time?

- Does the youth/child make a deliberate lie to cover the behavior up?

- Does the child/youth appear to feel confused, guilt or shameful about the incident?

- Does the youth typically spend lots of time with children much younger?
IMPORTANT!!!!

KEEP IN MIND THAT ADULT RESPONSES (PARENTS, CAREGIVERS, PROVIDERS, ETC.) HAVE THE POTENTIAL TO PROMOTE FEELINGS OF SHAME AND FURTHER EMOTIONAL AND BEHAVIORAL DAMAGE. REACTIONARY BEHAVIORS IN ADULTS CAN WORSEN THE IMPACT RESULTING IN DEEP FEELINGS OF SHAME.
SHAME VS. GUILT

FEELING BAD ABOUT YOURSELF

“I AM BAD”

“I AM NOT WORTHY OF ANYTHING”

“I AM NOT LOVEABLE”

FEELING BAD ABOUT SOMETHING YOU DID THAT WAS HURTFFUL BUT ABLE TO SEPARATE BEHAVIOR FROM THE PERSON

IDENTIFY BEHAVIOR, TAKE RESPONSIBILITY AND MAKE AMENDS/RESTORATIVE JUSTICE
WHAT IS **BEYOND** DEVELOPMENTALLY EXPECTED SEXUAL BEHAVIOR?

- CHILDREN AS WELL ADULTS ARE ALL SEXUAL BEINGS. WE ARE BORN THAT WAY AND BIOLOGICALLY WIRED AS SEXUAL BEINGS.

- RESEARCH HAS SHOWN EVEN INFANTS EXPERIENCE SEXUAL FEELINGS AND SENSATIONS. EVEN IN UTERO PICTURES OF THE FETUS TOUCHING GENITALS.

- SEXUAL EXPLORATION AND PLAY ARE A NATURAL PART OF CHILDHOOD SEXUAL DEVELOPMENT, AND HELPS CHILDREN NOT ONLY TO LEARN ABOUT THEIR OWN BODIES, BUT ABOUT THE SOCIAL AND CULTURAL RULES THAT GOVERN SEXUAL BEHAVIOR.
SOME CHILDHOOD SEXUAL BEHAVIORS, HOWEVER, INDICATE MORE THAN HARMLESS CURIOSITY. IN SOME CASES, SEXUAL BEHAVIORS POSE A RISK TO THE SAFETY AND WELL-BEING OF THE CHILD AND OTHER CHILDREN IN HIS OR HER WORLD. THESE SEXUAL BEHAVIOR PROBLEMS TEND TO CONTINUE EVEN AFTER THE CHILD HAS BEEN TOLD TO STOP OR LIMIT THE BEHAVIOR, AND USUALLY HAVE ONE OR MORE OF THE FOLLOWING CHARACTERISTICS.

- ARE CLEARLY BEYOND THE CHILD’S DEVELOPMENTAL STAGE (FOR EXAMPLE, A THREE-YEAR-OLD ATTEMPTING TO KISS AN ADULT’S GENITALS)
- INVOLVE THREATS, FORCE, OR AGGRESSION
- INVOLVE INAPPROPRIATE OR HARMFUL USE OF SEXUAL BODY PARTS (FOR EXAMPLE, INSERTING OBJECTS INTO THE RECTUM OR VAGINA)
- INVOLVE CHILDREN OF WIDELY DIFFERENT AGES OR ABILITIES (SUCH AS A 12-YEAR-OLD “PLAYING DOCTOR” WITH A FOUR-YEAR-OLD)
- ARE ASSOCIATED WITH STRONG EMOTIONAL REACTIONS IN A CHILD—SUCH AS ANGER OR ANXIETY
- INTERFERE WITH TYPICAL CHILDHOOD INTERESTS AND ACTIVITIES
WHAT DO WE DO ABOUT IT?
TREATMENT
FACTORS IMPORTANT FOR TREATMENT:

➢ TREATMENTS NEED TO ADDRESS THE SEXUAL BEHAVIOR DIRECTLY AND OPENLY. NOT ADDRESSING IT DIRECTLY FOSTERS THE SHAME AND SECRECY AROUND THE BEHAVIOR

➢ BEHAVIORAL; FAMILY FOCUSED; CBT AND PSYCHO-EDUCATION ARE IMPORTANT. SKILL BUILDING/SAFETY PLANNING/TEACHING ABOUT SEXUALITY AND SEXUAL DEVELOPMENT VOID OF SHAME AND STIGMA
TREATMENT CONTINUED.....

- Teach impulse control and self regulation; coping strategies; identification of boundaries
- Work to enhance parent-child/youth relationships
- Directly and consistently involve parent/caregiver in treatment
TREATMENT CONTINUED....... 

- Teach caregiver parenting strategies and behavior management strategies

- Treatment must be developmentally sensitive always considering cognitive, emotional and behavioral capacities of the child/youth

- Consider cultural and religious factor in the family
TREATMENT CONTINUED....

The most important element is relationship and connection between child/youth and the treatment provider!!!! This is the “Heart and Soul of Change”
TREATMENT RECOMMENDATIONS
(JOANN SCHLADALE LMFT)

- A HOLISTIC INDIVIDUALIZED APPROACH DRIVEN BY BEST PRACTICE APPROACHES
- A TRAUMA SENSITIVE TREATMENT FOUNDATION OF POSITIVE YOUTH DEVELOPMENT IS REPLACING THE HISTORICAL PATHOLOGY BASED APPROACH DEVELOPED FROM WORK WITH ADULT SEX OFFENDERS

THEAPEUTIC CHANGE OCCURS IN THE CONTEXT OF THE RELATIONSHIP!!!!!!
COMPONENTS OF TREATMENT:

 TEACH AFFECT REGULATION
 TEACH SOCIAL PROBLEM SOLVING
 BUILD SOCIAL SKILLS TO ENHANCE SELF-CONFIDENCE AND SOCIAL-COMPETENCY
 PROMOTE SOCIAL PERSPECTIVE TAKING TO ENHANCE EMPATHY FOR AND SENSITIVITY TO THE NEGATIVE IMPACT OF SEXUAL HARM ON VICTIMS, FAMILIES AND COMMUNITIES.
 PROMOTE EMPATHY BUILDING IN GENERAL
 MENTORING YOUTH
Treatment Recommendations Continued…..

- Help youth understand and intervene in disturbances of arousal that may influence sexually harmful behavior (harmful behavior in general)
- Promote positive self-worth and self-confidence
- Developing an appreciation for and connection with one’s culture
TREATMENT RECOMMENDATIONS
CONTINUED....

- Clarifying and modeling values related to respect for self and others
- Teaching and role modeling social psychology of gender as a component of harm reduction
  - Teaching sexual health
  - Healing trauma
TREATMENT APPROACH

(JOANN SCHLADALE LMFT ARTICLE)

- USE EVIDENCE-BASED MODELS FOR YOUTH VIOLENCE PREVENTION, TRAUMA AND CHILD ABUSE WHEREVER INDICATED AND POSSIBLE

- CREATE A CONTEXT OF RESPECT, CARE, AND CONCERN FOR THE DEVELOPMENT OF TRUST IN WORKING RELATIONSHIPS

- PROMOTE SHARING OF ALL RESOURCES

- INVOLVE FAMILIES, TEACHERS, COACHES, CLERGY AND ANYONE ELSE WILLING TO SUPPORT THESE YOUTH IN THEIR EFFORTS AT HARM REDUCTION
IT’S ALL IN THE APPROACH....

- Embrace distrust, ambivalence and resistance
- Engage and motivate participants to integrate positive change into their lives
- Ask permission to talk about sensitive issues
- Allow each youth and family to lead the process
THE APPROACH CONTINUED…….

- Recognize challenges to addressing the pain of sexual abuse

- Advocate for and support all participants in utilizing untapped strengths and competencies in order to prevent recidivism

- Expect disclosure of significant trauma that may include family dissolution, violence, substance abuse, poverty, discrimination, illness, disabilities, etc.

- Ensure that all participants are emotionally prepared for the impact of addressing sexual harm
THE APPROACH.....

- Teach all participant affect regulation in order to prevent further harm
- Use the Trauma Outcome Process to provide an understanding of behavioral change necessary for harm reduction
- Help participants become pro-social community members
- Provide ongoing support as indicated
SERVICE PROVIDERS CAN USE THE FOLLOWING EMPIRICAL FACTORS TO ENHANCE COLLABORATION AND HARM REDUCTION:

(SCHLADALE ARTICLE)

✓ BE GENUINE
✓ DEFINE CLEAR EXPECTATIONS
✓ DON’T JUDGE
✓ PRACTICE EMPATHY
✓ EXPRESS WARMTH
✓ EXERCISE PATIENCE
✓ PROVIDE HOPE AND OPTIMISM FOR A YOUTH’S SUCCESS
COLLABORATION AND HARM REDUCTION....

- Give clear instruction and support for truth telling
- Find out about each youth’s interests and dreams
- Help them explore their interests and dreams
- Discuss and explore feelings in an emotionally safe environment
- Explain differences and varieties of touch
- Teach youth about benevolent touch for themselves and other
CONTINUED.....

- Respect privacy by having rules about bathing, dressing and sleeping.

- Develop a positive, non-punitive plan for handling challenging behaviors like night terrors, bedwetting, soiling, aggression, masturbation, etc.

- Do things that kids and families like to do.

- Create a plan to ensure respect for each child’s physical and emotional boundaries.

- Share any concerns with treatment team members.
AND STILL MORE.....

- Promote and have fun!
- Celebrate ANY success no matter how small, or seemingly insignificant
- Celebrate yourself, and your colleagues, everyday for a job well done!
OTHER THINGS TO NOTE:

THE ATSA TASK FORCE ON CHILDREN WITH SEXUAL BEHAVIOR PROBLEMS BELIEVE THAT PRACTITIONERS CAN VALIDLY SELECT FROM A RANGE OF MODALITIES, DEPENDING ON THE CLIENT AND THE CONTEXT. TREATMENT APPROACH, RATHER THAN TREATMENT MODALITY, APPEARS TO BE THE PARAMOUNT ISSUE.
THINGS TO NOTE:

Typical sex offender treatment concepts are not appropriate for children. Historically adult treatment approaches were used with children and youth and this has been supported by research to be ineffective and could be harmful (i.e. group)
CORE COMPETENCIES
(SCHLADALE ALSO...)

✓ **PRO-SOCIAL SKILLS:** Initiates greeting; deals with feedback; can negotiate; accepts criticism

✓ **COGNITIVE:** Recognizes, defines and clarifies the problem; can connect cause and effect, goal setting

✓ **SELF CONTROL:** Delay gratification; self monitor

✓ **MORAL REASONING:** Makes good decisions; acknowledge pro-social outcomes

✓ **ACADEMIC SKILLS:** Pass classes; motivation to succeed
CONTINUED....... 

✓ WORKFORCE DEVELOPMENT: VOCATIONAL TRAINING; EMPLOYMENT; MOTIVATION TO SUCCEED; VOCATIONAL TRAINING 

✓ INDEPENDENT LIVING: COMPLETE ACTIVITIES OF DAILY LIVING; MANAGE MONEY; PRO-SOCIAL LEISURE ACTIVITIES 

✓ DON'T FORGET ABOUT AFFECT REGULATION/SELF REGULATION SKILLS....THIS IS CRITICAL THROUGHOUT ALL THE COMPETENCIES.
REDUCE RISK BY INCREASING ASSETS (COMPETENCIES!)
IN SUMMARY........

PROVIDE EVIDENCE TO THE CONTRARY.....

DEVELOP NEW EXPERIENCES AND NEURAL PATHWAYS.....

TEACH NEW HEALTHY SKILLS......

SEPARATE THE PERSON FROM THE BEHAVIOR.....

AVOID SHAME!........

CONNECT.....RELATIONSHIP IS THE KEY TO CHANGE!
RESOURCES/INFO USED IN THIS PRESENTATION...

THE CREDITS......

✓ “ENHANCING COMMUNITY COLLABORATION TO STOP SEXUAL HARM BY YOUTH” JOANN SCHLADALE

✓ CORE COMPETENCIES JOANN SCHLADALE

✓ NEW MEXICO STANDARDS OF PRACTICE

✓ NATIONAL CHILD TRAUMATIC STRESS NETWORK

✓ NATIONAL CENTER ON SEXUAL BEHAVIOR BY YOUTH

✓ ON LINE ARTICLE: THE ETIOLOGY OF SEXUAL OFFENDING BEHAVIOR AND SEX OFFENDER TYPOLOGY (ADULT)
“DO THE BEST YOU CAN UNTIL YOU KNOW BETTER; THEN WHEN YOU KNOW BETTER, DO BETTER.”

-MAYA ANGELOU
THANK YOU!

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PEACE.