Creating a Model of Integrated Restorative Justice and Treatment for Juvenile Sex Offenders

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Abstract

The current United States criminal justice system uses a strictly punitive approach in handling cases of sex offenses committed by juveniles. This paper addresses the failures of the current system and analyzes the positive and negative aspects of three alternative models: restorative justice, multisystemic therapy, and the Good Lives Model. Drawing on sociological, criminological, and feminist literature, crime databases, and interviews with professionals in the fields of restorative and juvenile justice, it is shown that no single model meets the needs of stakeholders in juvenile sex offense cases. Instead, I will propose an integrated holistic model of restorative justice and multifaceted treatment that utilizes the most effective aspects of existing alternative models and adds program components related to sexuality and consent would be most beneficial for use with juvenile sex offenders.

Keywords: Sociology; Women’s, Gender, and Sexuality Studies; Juvenile sex offender; Sexual violence; Restorative justice; Multisystemic therapy; Good Lives Model
Introduction

The issue of juvenile sex offenses is one that is poorly understood by the public due to the stigmas attached to sexual crimes involving youths. The stigmatization and general lack of awareness has led to harmful legislation and insufficient social services for all parties involved in juvenile sex offenses, including the youth offenders, the victims, their families, and their communities. To more deeply examine juvenile sex offending and the systems of response in place in the United States, I utilized a multifaceted research approach. I reviewed existing studies and theories involving juvenile sex offenders, obtained statistics from federal crime reports, and researched existing programs for juvenile sex offenders. In addition, I conducted interviews with three relevant professionals: a representative from Barron County Restorative Justice Programs in Wisconsin, a representative from Newark Community Solutions in New Jersey, and a forensic social worker and psychotherapist in New York who specializes in sex offenses.

To further my research on addressing the flaws in the U.S. criminal justice and juvenile justice systems, I also reviewed studies and theories of alternative frameworks for approaching juvenile sex offending. The three main models I focused on are multisystemic treatment, the Good Lives Model, and restorative justice. Through the combination of these various research strategies and focuses, I have devised a model that is more effective in addressing juvenile sex offending in terms of both rehabilitation and justice. This model is a hybrid of the most effective components of the alternative frameworks, as well as my own ideas regarding sexuality, that takes into consideration the core needs of survivors of sexual violence, juvenile offenders, and their communities.

Understanding Juvenile Sex Offending
In order to understand what a “juvenile sex offender” is, it is important to break down the two concepts at play: juvenile offenses and sex offenses. First, the legal definition of a “juvenile” offender is a person who is under the age of law at which they would be charged as an adult for a criminal act (Barabee & Marshall, 2008). The youth must be old enough to be held criminally responsible, but still not of the age at which one is legally considered an adult. This means that in most states in the U.S., juvenile offenders range from ages fourteen to seventeen. Age is crucial in understanding the issue of juvenile sex offenses, as many question how responsible or accountable an underage individual is for the offenses they commit. While neurologically, brain development is not fully complete until age 25, the legal age of adulthood in the U.S. is eighteen (Wallis, 2013). In many states, a youth can be tried as an adult in court, and thirteen states have no minimum age for trying a youth as an adult (Equal Justice Initiative, 2016).

The second component of understanding juvenile sex offenses is in the concept of “sex offenses,” which the National Task Force on Juvenile Sexual Offending defines as any sexual behavior without consent, equality, and/or as a result of coercion (Barabee & Marshall, 2008). To fully understand this definition, one requires a working definition of consent. My own definition of sexual consent is an affirmative, freely-given agreement to engage in specific sexual activities; affirmative meaning clearly communicated and enthusiastic, and freely-given meaning without coercion, pressure, or any power imbalance. While rape is generally the first offense that comes to mind when one thinks of a “sexual offense,” it is important to consider sexual offending to be “a continuum of sexual coercion, from unwanted sexual contact to rape” rather than just one specific type of assault (Barabee & Marshall, 2008).

As one of my interviewees pointed out to me, it is difficult to offer solutions for decreasing sex offending because there is no national or international agreement on how to
define a sex offense. This is particularly relevant when discussing juvenile sex offenses, as the age of consent varies from ages sixteen to eighteen in the United States. Though there is debate over the age at which one can give true consent, and what acts should fall under the category of “sex offense,” there are three key intersecting features of sexual crime that are generally agreed upon: sexual behavior, criminal behavior, and interpersonal transgression (Barabee & Marshall, 2008). Other components that are considered in legal analysis of sex acts that take place, degree of physical force, and nature of the relationship between the victim and the offender (Barabee & Marshall, 2008).

By incorporating these two understandings of juvenile offenders and sexual offenses, one can define a juvenile sex offender as a youth who has been convicted of a sexual offense and is considered by law to be old enough to be held criminally responsible for the offense, but is not legally considered an adult (Barabee & Marshall, 2008). While sex offenses are viewed as more horrific than other offenses that youths may commit, juvenile sex offenders actually have more in common with non-sexual youth offenders than adult sex offenders.

In determining the cause for development of “criminal” behavior patterns, there is a lot of overlap seen between juveniles who have committed non-sexual offenses and juveniles who have committed sexual offenses. Some of these developmental risk factors include personal victimization, mental health problems, school problems, substance abuse, conflict with authority, and sexual promiscuity (Barabee & Marshall, 2008). In addition, approximately half of all juvenile sex offenders have nonsexual offense histories, and they are more likely to reoffend nonsexually than sexually (Barabee & Marshall, 2008). These overlaps between non-sexual and sexual youth offenders’ behaviors and risk factors suggest that juvenile sex offenders may not be as uniquely dangerous as they are currently treated to be.
Although there are many similarities between juvenile sex offenders and non-sexual juvenile offenders, it is also important to understand the ways that juvenile sex offenders can be considered a distinct population. Some patterns seen in the backgrounds of juvenile sex offenders that are risk factors for criminal sexual behavior involve unhealthy family environments, experiences of childhood sexual abuse, and early expression of sexual behavior (Barabee & Marshall, 2008). In many cases, the families of juvenile sex offenders lack economic and social resources, share weak emotional bonds, and enable early exposure to sexual material and behaviors (Barabee & Marshall, 2008). Various research shows that a significant minority of juvenile sex offenders have experienced childhood sexual abuse; estimates based on reported abuse range from 19 percent to 49 percent (Barabee & Marshall, 2008).

In addition to patterns in the developmental backgrounds of juvenile sex offenders, there are a few common behaviors that are empirically supported to indicate an increased risk of sexual reoffense (as opposed to non-sexual reoffending). Some of these behaviors include displaying “deviant” sexual interest (such as pedophilia), sexual offending against more than one victim, sexual offending against strangers, social isolation from peers, and attitudes supporting sexual offending (such as victim-blaming) (Barabee & Marshall, 2008). These risk factors align more with behaviors seen in adult sex offenders than juveniles who commit non-sexual offenses. However, one interviewee pointed out that compared to adult sex offenders, juvenile sex offenders are usually not as compulsively driven in these specific high-risk behaviors. Youths also often do not have an understanding of the long-term impact of their high-risk behaviors on their victims or on themselves, while adult offenders usually do.

In order to analyze the scope of sex offending committed by juveniles in the U.S., I converted some of the raw data from the most recent FBI Uniform Crime Report into
percentages. Based on these calculations, it can be seen that in 2015, 16.5 percent of all sexual offenses, including rape, were committed by juveniles (Federal Bureau of Investigation, 2016). This number more than doubles to 35.6 percent when the only offenses considered are those in which the victims were minors (Finkelhor, Ormrod, & Chaffin, 2009). This makes sense, as nearly half of all victims of juvenile sex offenses are between ages twelve and seventeen and acquaintances of the offender (Barabee and Marshall, 2008).

According to the Office of Juvenile Justice and Delinquency Prevention, only 51 percent of sexual assaults committed by juveniles were reported to law enforcement (Barabee & Marshall, 2008). This means that the overall number of juvenile sex offenses would likely increase dramatically if all offenses were reported. Based solely on statistics, juvenile sex offending is clearly a prevalent and pressing issue. From a theoretical perspective, this issue’s importance goes beyond numbers; the way that our society addresses juvenile sex offending impacts the futures of youth offenders, the survivors of these offenses who wish to receive justice, and the families and communities of offenders and survivors who seek a reliable system to turn to when a youth sexually offends. In the absence of such a system, cases of juvenile sex offending will continue to be swept under the rug and go under-reported.

Existing Legislation and Practices for Juvenile Sex Offenses

In attempts to address the issue of sex offending in general, particularly offenses committed against minors, various legislation was passed from the early 1990s to the early 2000s regarding sex offender sanctions, registration requirements, and public notification requirements. First, the Jacob Wetterling Crimes Against Children and Sexually Violent Offender Registration Act was passed in 1993, creating a federal requirement for states to have sex offender registries
The Wetterling Act was amended in 1996 by Megan’s Law, which implemented requirements for community notification about community members on the sex offender registry. In 2006, the Adam Walsh Child Protection and Safety Act, which also contains the Sex Offender Registration and Notification Act, was passed, which dramatically increased registration and notification requirements, and implemented a “risk-based” tier system for classifying offenders (Harris, A.J., Lobonov-Rostovsky, C., & Levenson, J.S., 2010).

As indicated by the names of these pieces of legislation, each was based on a specific case that caught the attention of the public through high levels of media coverage (Barabee & Marshall, 2008). Most of these policies were implemented hastily without empirical evidence that they would make communities safer, simply because policy makers needed to respond to the public outcry surrounding these specific cases (Barabee & Marshall, 2008). While the offenders were adults in all of these public cases leading to policy change, the punitive legislation dramatically altered the way cases of juvenile sex offenders are dealt with in the U.S. criminal and juvenile justice systems to this day.

While it is true that civil commitment or placement in foster homes can be potential consequences for juvenile sex offenders, the more prevalent and widely researched consequences are the registration and notification requirements put in place by the previously mentioned legislation. Currently, 38 states in the U.S. are compliant with this legislation, and require the registration of juvenile sex offenders; sixteen of these states also publish the juveniles’ names, addresses, and photos on a public website (Beitsch, 2015). The 12 states that currently do not require juveniles to register as a sex offender will still register juveniles who are tried and charged as adults (National Conference of State Legislatures [NCSL], 2011).
The Adam Walsh Child Protection and Safety Act (AWA) of 2006 was the first federal law mandating juveniles to register on public sex offender registries (Batastini, Hunt, Present-Koller, & DeMatteo, 2011). SORNA, a part of the AWA, requires juveniles ages fourteen and older adjudicated of “aggravated sexual abuse crimes” as defined in federal law to register as sex offenders (NCSL, 2011). Because the federal definition of aggravated sexual assault includes any offense in which the perpetrator knowingly engages in a sexual act with a person younger than age twelve, many juvenile offenders fall under this category, and therefore must register (Batastini et al., 2011). In addition, because SORNA guidelines were designed to target those who offend against children, and most juvenile sex offenders offend against peers who are minors, this population is inadvertently labeled as high-risk and given the most punitive requirements, such as lifetime registration (Harris et al., 2010).

The impact of these policies on juvenile sex offenders can be devastating; though there is little empirical data on the broader impact of registration and notification, many individuals report high rates of harassment, physical and emotional harm, social isolation, interrupted schooling, and the formation of a negative self-identity (Barabee & Marshall, 2008). Registration and notification can carry a lifetime stigma for juveniles, and as one interviewee stated, registration “virtually annihilates any possibility of successful rehabilitation.” When juvenile offenders are treated as high-risk adults, they are not given access to treatment that takes developmental stages into consideration, and they are not given opportunities to improve their lives as they move forward into adulthood.

In addition to impacting individual juvenile sex offenders, the current punitive legislation actually affects how the justice system functions. One study conducted in Illinois found that charges against juvenile sex offenders drastically fell the same year that registry laws expanded
to include minors, as judges reported being more reluctant to sentence juveniles when faced with such harsh mandatory punishments (Barabee & Marshall, 2008). If there are lower conviction rates because of harsh legislation, then there is a decreased sense of justice for survivors of sexual offenses. Indeed, nearly half of all victims of juvenile crimes report that their experiences in the traditional justice system were unsatisfactory and unfair (Barabee & Marshall, 2008).

There are many factors at play in the insufficient way the current U.S. criminal justice system deals with cases of juvenile sex offending. As previously mentioned, public outcry around specific publicized media led to hastily passed, empirically unsupported legislation. There is also a general stigma around youth exhibiting any sexual behaviors, as sex is seen an “adult” behavior. This stigma combines with the general stigma of “juvenile delinquency,” meaning youths we deem to be harmful to our society, which creates a unique label for juvenile sex offenders that makes us want to simultaneously punish and alienate them. All three of my interviewees brought up the stigma around juvenile sex offending as a reason for public pushback against the consideration of alternatives to our current justice system.

**Alternative Models of Juvenile Sex Offender Justice and Treatment**

Despite public pushback, there are a few models of alternatives to the criminal justice system that are currently used and studied for general offender populations, and their use for cases of juvenile sex offending has been theorized. The model most commonly suggested as an alternative for youth offenses is restorative justice. In general, restorative justice is defined as a justice approach that involves those who have a stake in the offense committed, in which the offender, survivor, and community members collectively identify and address harms and needs, and then create a plan for moving forward (Zehr, Amstutz, MacRae, & Pranis, 2015). Much of
the public, in addition to many professionals in the traditional justice system, misunderstand restorative justice as exclusively being direct interaction between offenders and victims (Gxubane, 2014). However, restorative justice should be conceptualized as an approach or mindset rather than one specific process, as there is no single format for conducting restorative justice processes.

In order to be classified as “restorative justice,” a program must have three key focuses: harms, obligations, and engagement (Zehr, et al., 2015). “Harms” means assessing the interpersonal and broader impact of offenses on all involved, including the victims, their families, and their communities. These harms are then addressed by creating a list of “obligations,” meaning what the offenders must do to restore the impact of their offenses and provide restitution. Finally, engagement refers to the fact that restorative justice processes require the participation of the “stakeholders” involved in the offense, including the offenders, victims, families, and community members. As opposed to the traditional U.S. criminal justice system, restorative justice conceptualizes crime as personal harm to other people, rather than harm against the state. The process also reflects respect for all involved, including offenders (Zehr, et al., 2015).

In practice, the general structure of a restorative justice conference is that the perpetrator states the offense committed, the victim responds and speaks of the offense’s impact, family and community members are invited to speak of the impact, and the perpetrator may then respond to all of those comments. Once everyone’s thoughts and experiences have been shared, all participants collectively work together to make a concrete plan for reparations and potentially rehabilitation. This entire process is facilitated and moderated by a trained professional, usually someone in the field of human services or criminal justice. Because the group collectively works
on their plan for moving forward, the justice response is able to be tailored to the needs and abilities of victims, communities, and offenders (Kurki, 1999).

Currently in the United States, restorative justice is usually only used for low-level crimes and first-time juvenile offenses (McAlinden, 2008). Even in places where restorative justice is the official pathway for dealing with juvenile offenders, sex offenses are mainly excluded from receiving restorative justice. For example, in 2007 the Child Justice Bill was passed in South Africa, implementing restorative justice practices rather than traditional court processes for all youth offenders under age eighteen (Gxubane, 2014). However, this bill explicitly excludes youths who commit sex offenses, so those youths continue to be sent straight to trial in a traditional juvenile justice court. This aversion to restorative justice for juvenile sex offenders is shared by the United States due to the stigmatization and fear surrounding such crimes.

Many people assume sex offenses are too “serious” for restorative conferencing, and view restorative justice as trivializing the crime at hand and letting the offender off easy (Daly, Bouhours, Broadhurst, & Loh, 2013). This is largely due to the widespread misunderstanding of what restorative justice is, as previously mentioned. Despite the belief that restorative justice takes crime too lightly and does not prevent re-offense, a South Australian study found that referral to restorative justice conferencing does not actually increase the risk of reoffending (Daly et al., 2013). Sex offenses are also seen as specifically unfit for restorative justice because of the stigma of perpetrator and victim interaction in sex offense cases, which was brought up by all three of my interviewees. In addition, all interviewees noted that while this stigma exists, the reality is that because many offenders of sexual violence know their victims, the possibility of a
sexual violence survivor desiring restorative justice is actually increased compared to other offenses.

In cases where survivors do not wish to engage directly with their offenders, or face-to-face mediation is seen as too “risky,” there are alternative options. One alternative to direct victim/offender contact is a “surrogate victim,” where advocates for survivors or individuals who have experienced similar crimes can take part in conferencing on behalf of the survivor (Gxubane, 2014). In addition, some programs use “victim impact panels,” where multiple surrogate victims who have experienced similar crimes meet with the offender to discuss the impact of sexual violence in their own lives. However, one interviewee noted that because these surrogate victims were not directly involved in the specific offense at hand, they cannot fully convey the exact impact or “what the victim wanted.”

While there is virtually no program-based research on the use of restorative justice with juvenile sex offenders, there has been some research regarding restorative justice programs for adult sex offenders. One example of restorative justice for adult sex offenders is RESTORE, a voluntary program that was temporarily put in place in Arizona for the purpose of studying its effectiveness (Koss, 2013). The timeline of the process was determined by the survivor, and allowed time for some recovery from trauma and treatment for the offender prior to conferencing. Preparation was extensive for both parties, and included reviewing safety guidelines, rules for behavior, conference format, and preparation of a statement. In some cases, surrogate victims replaced the survivors for participation in conferencing, and delivered impact statements written by the survivors. By the end of the conference, “accountability plans” were created, including sanctions to the offender such as community service, donations to charity, specific rehabilitation activities, and payment for the survivor’s therapy expenses (Koss, 2013).
Overall, the outcomes of the RESTORE program were very positive for all stakeholders. All of the survivors reported participating in conferencing to “take back [their] power,” and the majority also wanted to have input into punishment, and make sure the offender received help (Koss, 2013). The majority of both survivors and offenders reported participating to provide accountability. After taking part in restorative conferencing, more than 90 percent of participants, both survivors and offenders, reported achieving these intended goals through conferencing (Koss, 2013). It was found that conferences increased the likelihood of the offenders admitting responsibility for their actions, apologizing to their victims, and receiving counseling. In addition, contrary to the widespread fear of offender/victim interaction, there were no physical safety issues at any point in any of the conferencing processes (Koss, 2013).

Based on case studies like the RESTORE program, literature on restorative justice, and my interviews, it is clear that restorative justice has the potential for both positive and negative consequences in cases of juvenile sex offenses. The greatest pro that I find in utilizing restorative justice practices in juvenile sex offense cases is that it gives survivors an active role in the justice process, returning agency to them after a situation in which they may feel powerless. Survivors generally report wanting justice that validates them as legitimate victims, doesn’t scrutinize their behaviors or blame them, provides a way for their voices to be heard, and lets them provide input into the consequences for offenders (Koss, 2013). Restorative justice conferencing is able to empower survivors in these ways, as it allows them to dictate the timeline and structure of the process, share their stories, and have a say in the final outcome. As opposed to the traditional justice system where the focus is on the offender and the survivor has little say, restorative justice makes the survivor central in the justice process (Brownlie, 2003).
A second positive aspect of the use of restorative justice for juvenile sex offenders is in the potential for communication between survivors and offenders. In the traditional system, offenders and victims have no way to speak directly; however, a Canadian study found that 89 percent of victims of violent crimes wanted to meet with the offender after the offense (Kurki, 1999). Survivors often want this interaction because it offers a path for closure by getting answers to questions about their victimization and acknowledgment of the harm done to them. Additionally, although apologies are not required, a study on restorative justice conferencing found that 96 percent of offenders naturally apologized during conferences, and 88 percent of victims perceived the offenders to be genuinely sorry (Barabee & Marshall, 2008). One interviewee noted the importance of tone of voice and body language on how survivors perceive the sincerity of offenders, which can only be conveyed through direct contact.

In addition to benefiting survivors in various ways, restorative justice conferencing with juvenile sex offenders can also positively affect the offenders themselves. The social forces in restorative justice create an effective environment for the first stage of change for juvenile sex offenders, which is accepting responsibility and having empathy for their victims (Barabee & Marshall, 2008). When surrounded by family and community members, the offender is less likely to deny their accountability. Restorative justice also helps offenders understand the consequences of their actions and develop empathy through hearing the various stakeholders’ accounts (McAlinden, 2008). It has been shown that offenders’ development of empathy for victims is a crucial aspect of preventing future re-offense (Kurki, 1999).

The community also plays a key role in the rehabilitation of juvenile sex offenders. Maintenance of a connection between offender and community throughout the justice process makes re-integration easier by lessening the impact of stigma around offenders and increasing
community investment in the youths’ futures (Koss, 2013). When community members have a say in the justice process, they build relations with the other stakeholders involved and can provide input regarding community needs and resources (Gxubane, 2014). Essentially, restorative justice can be framed as enhancing the social bonds necessary to safely and supportively re-integrate juvenile offenders back into their communities (Brownlie, 2003).

While there are many positive aspects of utilizing restorative justice practices in the cases of juvenile sex offenses, there are also many real and perceived potential negative consequences. Perhaps the most important of these is the fact that traditional restorative justice models are designed for non-violent crimes, so there is fear about conferencing being safe and comfortable for survivors. A component of this fear is the previously mentioned questions surrounding the risks of offender/victim interaction. There is a large concern regarding the re-traumatization of survivors through offender manipulation or violence during conferencing (Gxubane, 2014). Because restorative justice practices were not designed with sexual violence in mind, they may not sufficiently address the power imbalances that exist in sexually violent situations (Brownlie, 2003). While there is no evidence to support that restorative justice is more high-risk in cases of sexual offenses, there is also not extensive evidence countering that fear due to a lack of research on restorative justice in general. As one of my interviewee stated, they “wouldn’t want to cause harm, even unintended,” so practicing restorative justice with juvenile sex offenders is seen as simply not worth the risk.

Another possible negative consequence of restorative justice with juvenile sex offenders is that practices done incorrectly may center the needs of the offender over the needs of the survivor (Zehr, et al., 2015). While in its ideal form, the main goal of restorative justice is to empower victims of crime rather than decrease recidivism or obtain forgiveness for offenders,
panic surrounding juvenile sex offenders may shift the focus to preventing re-offense. For example, programs with surrogate victims focus on benefitting the offenders through building their empathy. It can be argued that programs such as these may be inappropriate for cases of sexual violence, as they prioritize offenders despite the need for power to be shifted to survivors.

To return to the original concept of alternatives to the traditional criminal justice system for juvenile sex offenders, some theorists and professionals in the field divert completely from “justice” models, and believe that the focus should instead be on “treatment.” The most common framework suggested for use with juvenile sex offenders is multisystemic therapy (MST), which addresses the multiple factors of antisocial behavior through combinations of different treatment methods (Barabee & Marshall, 2008). For youths, the focuses are generally on family-, school-, and community-based therapeutic services. MST involves human services professionals assessing the context of youths’ lives and the influence of that context on their behaviors, and then addressing the strengths and weaknesses of connections to family, peers, and school (Borduin et al., 1990).

Because MST is an intensive treatment focused on rehabilitation, it is usually used with youths who are at high-risk of incarceration or removal from their families (National Implementation Service [NIS], 2012). Juvenile sex offenders are high-risk for such removal, and MST is in fact the only evidence-based approach that has been validated for use with this population (Barabee & Marshall, 2008). One study found that when juvenile sex offenders were randomly assigned to MST or traditional behavioral therapy, significantly fewer youths assigned to MST were rearrested for sexual offenses (Borduin, Henggeler, Blaske, & Stein, 1990). Another more recent study using MST with juvenile sex offenders also confirmed that the framework is successful in reducing recidivism rates (Deck, 2017).
Like restorative justice, the model of MST has both pros and cons when considering its use with juvenile sex offenders. The greatest positive aspect of MST is that it allows for adaptation to the specific offender’s personality and needs. Because juveniles are still developing, they require services tailored to their specific developmental stages (NIS, 2012). Based on assessments by human services professionals, individual youths can be connected with a variety of individualized treatments. Youth offenders’ needs regarding familial, peer, and community resources can also be addressed through MST services; for example, if a youth is struggling in school, they may be connected with a specialized tutor. This adaptability can be specifically important for juvenile sex offenders, as services related to relevant issues like violence and sexuality can be provided.

Another positive aspect of MST in the treatment of juvenile offenders is the holistic nature of the model. Because MST acknowledges the context and outside factors of youths’ lives, it is able to address shortcomings outside of the youths’ control. The parents or guardians of youths are usually involved in the process of MST, and they are provided with tools and techniques for sufficiently supporting their children. MST is also effective in providing long-lasting tools for living a well-rounded healthy life through focusing on strengths and promoting positive activities that can serve to replace harmful activities, as opposed to focusing on temporary solutions to specific issues.

The major negative aspect of MST as a model of treatment for juvenile sex offenders is that it neglects the needs of victims. Survivors of sexual violence are completely excluded from the processes of MST for juvenile sex offenders, and therefore they have no voice or input in what services they feel are appropriate and just (Barabee & Marshall, 2008). Similarly, there is no mention of offender accountability in MST, and the model lacks any concept related to
restoration of harm, which can be a key component in survivors’ process of healing and receiving justice. Community members and family members besides parents and guardians are also underutilized in MST, which makes various key stakeholders passive in the process, and makes family and community reunification more difficult.

Another negative aspect of the use of MST with juvenile sex offenders is the risk of harm if the services provided are not culturally competent. Cultural competence refers to a “practitioner’s ability to acknowledge the impact of oppressive histories, unique life experiences, and language, values, beliefs, and customs, including traditional healing approaches specific to an individual’s culture” (Venable & Guada, 2014). This concept is particularly important when providing services to juvenile sex offenders from marginalized groups, like Black and Latino youths. Because there is no research on treatment specifically for Black juvenile sex offenders, it is very much a possible risk that MST practitioners may not provide culturally competent treatment to these specific youths. When youths are mandated to take part in treatment that is not culturally competent, or they perceive bias from their treatment providers, they are more likely to resist the treatment and exhibit poorer mental health outcomes (Venable & Guada, 2014).

Another model that exists in the framework of “treatment” rather than “justice” is the Good Lives Model (GLM). The GLM is a holistic “strength-based rehabilitation framework that is responsive to offenders’ particular interests, abilities, and aspirations” (Ward, n.d.). This framework operates under the belief that all humans share a similar basic goal, which is to achieve “primary goods;” primary goods include life, knowledge, excellence in work, excellence in play, excellence in agency, inner peace, friendship, community, spirituality, pleasure, and creativity (Fortune, 2018). Similar to the MST model, the GLM emphasizes strengths, assets, and resources, and aims to have offenders strive towards a healthy life rather than focus on their past
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offenses (Saleebey, 2009). Practitioners can use the GLM framework to assess the importance of each primary good to the offender, and then guide offenders through creating a plan for achieving their goals in which they have the tools, resources, and support to do so without harming others. The GLM was initially designed for adult sex offenders, so to be effective in its application to juvenile sex offenders, it would need to be altered to fit the specific needs of youths (Fortune, 2018).

The greatest pro of using the GLM with juvenile sex offenders is that the model provides lifelong tools rather than linear steps towards rehabilitation. Similar to MST, the GLM takes into account the individual youth’s personality, abilities, and goals to work towards creating a holistically healthy and fulfilling life (Fortune, 2018). In specifically targeting the needs of juvenile sex offenders, practitioners have the opportunity to emphasize specific “primary goods” such as inner peace and pleasure that are connected to violence and sexuality. By emphasizing specific goods, practitioners may assist youths in developing healthy strategies for meeting these goals that are socially acceptable and do not harm others. Because the GLM is a broad framework, it can be applied to other models like MST to guide juvenile sex offenders towards their goals while providing necessary resources and services.

The second positive aspect of utilizing the GLM with juvenile sex offenders is that it creates positive self-perception and decreases feelings of stigmatization. In a society where sex offenses and youth offenses are extremely stigmatized and demonized, it can be difficult for youth offenders to break away from negative labeling. By focusing on building a positive and healthy future rather than emphasizing past offenses, youths learn to avoid defining themselves by their offenses (Fortune, 2018). It is important for youths to understand that almost any trait (personal qualities, talents, cultural connections, etc.) can be a strength under the right
conditions, as this allows them to reflect on their past strengths and utilize them in healthy ways moving forward (Saleebey, 2009).

Much like the MST model, the biggest negative aspect of the GLM is that it does not include any aspect of justice for the victims or accountability of the offender. An additional failure aligned with this lack of justice is that the GLM doesn’t necessarily support specialized treatment for specific offenses, like sex offenses. Because the focus of the GLM is on holistically understanding the shared needs and desires of humans, there is little room to focus on recovering from or accounting for specific past offenses. There is also no mention of restoring past harm in order to move forward towards achieving the primary goods outlined in the GLM.

The other main flaw of applying the GLM to use with juvenile sex offenders is that, as previously mentioned, the model was designed for adult offenders, and doesn’t meet all the needs specific to youths. This is a general issue, as treatment models for juvenile sex offenders are usually just adult models with no modifications for youth-specific issues (Barabee & Marshall, 2008). For example, the GLM doesn’t account for the fact that youths are more deeply connected to a wider range of social systems than adults are, including families, schools, and peers (Fortune, 2018). While the GLM perhaps makes some references to these systems in primary goods such as knowledge and community, youths’ relations and obligations to social systems and institutions need to be carefully addressed in order to fully meet basic needs as well as achieve primary goods.

Proposed Hybrid Model

Based on all of the evidence I have gathered from theoretical literature, case studies, existing models of treatment and justice, and interviews, I believe no single existing framework
for use with juvenile sex offenders is fully sufficient in meeting the needs of all stakeholders. Contrary to popular belief, treatment and justice are not mutually exclusive. Therefore, the most effective method for handling cases of juvenile sex offenses would be a hybrid approach. This hybrid would include the most effective components of restorative justice, MST, and the GLM, as well as some of my own ideas that I did not find in the literature regarding sexuality and consent. The key components of this model would be individualized MST with the input of youths and their families, restorative justice in a format determined by victims, sex and consent education, and group therapy specifically for youths who have sexually offended.

As noted, because one of the limitations of current treatment of juvenile sex offenders is that they are seen as a homogenous population and deemed “high-risk” regardless of individual risk factors, it is crucial that these youths receive individualized treatment and services. MST, when facilitated by human services professionals who are trained to work with juvenile sex offenders, is an ideal model for assessment of a youth’s developmental stage and social bonds, and for providing services to meet specific needs. As many families of juvenile sex offenders share common characteristics such as a lack of economic and social resources and weak emotional bonds, they are not always equipped to effectively support these youths (Barabee & Marshall, 2008). By working with family members in an MST treatment plan, the necessary emotional, social, and sometimes economic resources can be provided to create a healthy family and home environment for youths undergoing treatment. The traditional MST model of only working with youths’ guardians could perhaps be enhanced by extending services to all family members in the household, to ensure that all those who have daily interactions with the youths have the proper resources to support them and not stigmatize them.
Additionally, it is crucial that the MST services themselves do not stigmatize or shame the youths, and instead are guided by a positive strengths-based approach. The GLM can be used as a framework to guide MST services in order to holistically account for all basic needs (or “primary goods”). To better suit the GLM model to the specific needs of juvenile sex offenders, the existing list of primary goods can be expanded upon to better apply to the social context that youths operate under. For example, “excellence in knowledge” can be reconceptualized to have a focus on primary education and the goals of schooling beyond “knowledge,” such as successful interactions with peers and authority figures, concentration, and time management. These factors will help the youths succeed academically, which is necessary to enhance social bonds to the education system. One of the key risk factors in prediction of both juvenile sex offending and non-sexual re-offense is performing poorly in school, so these focuses can serve as preventative measures (Barabee & Marshall, 2008).

Another primary goal that could be added to the GLM may be “excellence in family life,” to consider the importance of family and household context in the lives of youths. Most of the empirically supported risk factors for juvenile sex offending are related to family bonds and household environment, as family is a core component of the socialization of youths (Barabee & Marshall, 2008). Setting goals that incorporate family bonding and a safe and supportive household environment therefore may serve to decrease risk of re-offense. Adding these goals for a “good life” can also serve to inform which MST services are prioritized and provided to juvenile sex offenders, such as school-based services and family therapy.

To balance the MST treatment component of an effective model for juvenile sex offenders with a component of justice, the second key aspect of the model would be restorative justice with victims on an individualized timeline. In this component, the main focus should be
the needs and wishes of survivors, so the individual timeline and conference structure would be on the terms of the survivor in each case. This would provide survivors with agency in a situation where they may feel stripped of their agency, in addition to allowing for individual therapeutic and informational sessions with survivors, offenders, and other participants to sufficiently prepare for their roles in conferencing. For the juvenile sex offenders specifically, their pre-conferencing therapeutic sessions would focus on acknowledging responsibility for their offenses and beginning to shift any potential negative attitudes towards the victims, such as victim-blaming.

Because healing and justice looks different for each individual survivor of sexual violence, the actual process of conferencing is the ideal format for survivors to voice their experiences and needs. A key part of recovery for many survivors is the development and expression of a personal narrative about the offense; the therapeutic sessions leading up to conferencing would enable narrative development, and the conference would provide a platform for narrative expression. In addition, through crafting an “accountability plan” for the offender to fulfill, survivors can advocate for self-defined justice through additions such as monetary reparations, community service, or specific rehabilitative programs. While many restorative justice programs designed for nonviolent crimes only impose the rehabilitative services requested by victims or other group participants, that model would not be sufficient for juvenile sex offenders. Instead, there would be a baseline treatment plan devised through MST, and survivors could request additional mandatory programming that is not included in the baseline plan. Survivors can be guided through this process by both human services and criminal justice professionals in order to understand the range and limits of the possible demands they may make.
Discussion of each demand and input the trained facilitator will also ensure that all are additions to the accountability plan are safe, reasonable, and meet key needs.

Regarding the benefits of restorative justice for the juvenile sex offenders themselves, all of my interviewees pointed out that restorative justice is more beneficial for juvenile offenders as compared to adult offenders. One reason for this is that juveniles are more easily influenced and impacted by social forces suggesting new paths and ways of thinking. Additionally, youths often do not have an understanding of the long-term impact of what they do when committing offenses, so hearing the impact statements from their victims and other participants would be a crucial step in empathy building. For juvenile sex offenders specifically, the restorative justice framework can also be guided by the GLM, and focus on specific primary goods/needs as goals of the conferencing process. For example, the primary good of “inner peace” in the GLM can be conceptualized as restoring harm done to others and preventing future harm, as achieved through the fulfillment of the conferencing process and the accountability plan. This conceptualization can aid in destigmatizing the youth in the process of justice through framing it as a step in their path towards a more positive and healthy future.

A third component of treatment and justice that is essential to a model for use with juvenile sex offenders is sex and consent education, which is not a core component of any existing models that I am aware of. However, this population’s offenses are distinct in their sexual nature and their impact on victims because of this nature, so sexuality must be explicitly taken into consideration in treatment and justice. Juvenile sex offenders’ sexuality is seen as abnormal and deviant due to the violent ways it has been expressed through their offenses; such stigma often creates a barrier to educating these youths on affirmative consent and healthy sexual behaviors post-offense. As one interviewee put it, “sexuality scares us in this country,”
particularly when attached to juvenile offenders. However, if a holistic GLM framework is being applied to the rehabilitation of juvenile sex offenders, then sex and consent education is required in order to provide youths with the tools to form healthy sexual relationships as a component of a healthy life. In addition, having unhealthy attitudes towards consent and sexuality (such as victim-blaming and hyper-aggression) is an empirically supported risk factor for sexual reoffense (Barabee & Marshall, 2008).

In order for sex and consent education to be adequate for the needs of youths who are still developing mentally and physically, it must cover the four main requirements for achieving and maintaining sexual health: identity formation, skills for managing intimacy, establishment of a sexual lifestyle, and achievement of sexual satisfaction (Barabee & Marshall, 2008). Identity formation refers to gender and sexual identities that inform sexual behaviors and desires; for example, masculine heterosexuality. Affirmative consent education would fall under skills for managing both physical and emotional intimacy, where youths could be taught the practicalities of obtaining and giving consent. Establishing a sexual lifestyle and achieving sexual satisfaction can be taught through a sex education framework, where youths can learn about the technicalities of bodies, sex, and pleasure, and how to utilize that information in healthy ways. Ideally, this education would be provided by a sex educator and/or human services professional who has been trained to work with juvenile sex offenders in a non-biased way.

To supplement sex and consent education by a trained professional from a more traditional education approach, the final component of an effective model for juvenile sex offenders would be group therapy with other youths who have sexually offended. Group therapy with peers is often mentioned as an aspect of MST treatment, but it is important to explicitly emphasize its role in both general treatment and in the development of healthy understandings of
sexuality and consent. The element of peer stigmatization can be reduced through having all
group members be youths with similar backgrounds of sexual offending. Youths can then talk
more openly about their experiences without the pressure of the norm of secrecy surrounding
sexual offenses. A group setting also enables the development of a peer support system in which
youths can encourage each other on their paths towards healthy lives.

Group therapy is particularly important for juvenile sex offenders because societal issues
influencing their behaviors, such as hypermasculinity and toxic attitudes towards sex, can be
discussed and deconstructed through the guidance of a trained group facilitator. Often, youths do
not have the full ability to articulate the social context of their lives. One interviewee noted that
in a group setting where participants can relate to each other and share similar experiences,
participants can gain a clearer view of the aspects of society that impact them, including
structures such as education and the criminal justice system. Through acknowledgement of and
reflection upon these social structures, youths can collectively discuss strategies for coping and
moving forward in constructive ways.

In addition, because the large majority of juvenile sex offenders are male, collective self-
reflection is useful for juvenile sex offenders in analyzing their role as male sexual beings in the
context of society. A key factor in the distorted beliefs often expressed by juvenile sex offenders
regarding sexuality is how they conceptualize themselves as young men. In order to “explore
male identity development [in ways] that are culturally informed and relevant,” and develop
realistic alternative to toxic hypermasculine norms, these youths can reflect on different
strategies with each other regarding identity formation, peer interactions, and sexual behaviors
(Venable & Guada, 2014). A similar structure would be applicable to female juvenile sex
offenders, but would require changes of discussion content that relate to existing as a female
sexual being in the context of a sexist society and in relation to female peers. The group facilitator can also aid in juvenile sex offenders recognizing patterns of problematic behaviors, and the youths can challenge each other’s negative beliefs or behaviors. Because youths generally place a high value on the opinions of their peers, group discussion among juvenile sex offenders is more meaningful and effective than discussing these issues only with an adult professional.

The hybrid model of justice and treatment for juvenile offenders meets the needs of all involved: victims, offenders, families, and communities. The most important outcomes needed from a model for this use are a sense of justice and agency for survivors, accountability and rehabilitation of juvenile offenders, and providing safety and support for communities. While the existing models for use with juvenile sex offenders only meet one or two of these needs per model, the hybrid I have outlined can meet all of these desired outcomes. A survivor-centered restorative justice process provides victim agency, accountability, offender empathy-building, and community support. The treatment components of the model, including MST, sex and consent education, and group therapy, provide rehabilitation for the offenders and support for families, which in turn creates safer communities through decreasing recidivism. Finally, conceptualizing this model through a holistic Good Lives framework works to address the roots of offending rather than focusing only on a specific offense.

This integrated justice and treatment model is in stark contrast to the existing methods of dealing with juvenile sex offenses within the U.S. criminal justice system. Therefore, the practical implementation of such a model would require a public reconceptualization of juvenile sex offenses, justice for survivors of sexual violence, and community safety. A better understanding and general de-stigmatization of youth sexuality and youths we label “high-risk”
is required to pave the way for reimagining the system. Additionally, there must be a willingness
to listen to the voices of survivors of sexual violence, who are empirically dissatisfied with the
current system. Data on methods for preventing re-offense also shows that the utilization of a
rehabilitative rather than punitive lens is most effective. We must work past our discomfort and
accept the evidence supporting these changes in order to stop treating youth offenders as
disposable, to meet the needs of survivors, and to create systems that communities can rely on
for treatment, justice, and safety.
References


