

**Juvenile Justice Vision 20/20 October 2016 Training Event**  
**Understanding Girls Who Sexually Offend: Research, Assessment and Intervention Strategies**  
**October 27, 2016**

**Presenters: Heidi Kaltenbacher, LMSW and Lynn Jackson, MA, LLP (17<sup>th</sup> Circuit Court, Kent County)**

Working with female sexual offenders in the court setting presents many challenges for practitioners. Little research specific to female offenders exists and, too often, research conducted with adult males is applied to women and juveniles. Contributing to this paucity of research is the perception women are caregivers and not prone to sexual offending, making it difficult for many to accept that some females willingly and purposefully offend. This same perception results in underreporting of sexual offenses perpetrated by women, acts which often occur in the context of child care activities, are considered less serious/harmful, and the victim does not recognize their own victimization.

Ms. Kaltenbacher and Ms. Jackson focused on existing research to lead the audience through the various typologies of female sexual offenders. Most often, women engage with adolescent males, are in the presence of a co-offending male, perpetrate on pre-pubescent children, and/or engage in the behavior in the context of a wider criminal career (e.g. sex trafficking). When compared to adult males, adult female sexual offenders are younger at the time of the offense and choose younger victims; are more likely to co-offend and be involved in incidents with multiple victims; are often victims themselves; have histories of neglect and abuse, especially sexual abuse; have a higher rate of drug and alcohol abuse; may select female victims who are relatives or acquaintances; and most often engage in offending behavior in the context of babysitting.

Offending typologies for girls look similar to that of adult female sexual offenders. Girls most often abuse younger children in babysitting situations and project their own sexual abuse onto their victims. High levels of trauma, psychopathology and early onset of severe abuse and neglect are prevalent among this population. Contrary to male offenders, girls do not use as much force, as their offending behavior is less about power or sexual gratification and more about connections or reactions to personal abuse. Sexual behaviors can be related to curiosity, anxiety, imitation, attention seeking or the desire to self-soothe.

Programming for female adolescent sexual offenders is sometimes difficult to coordinate, though the 17<sup>th</sup> Circuit Court's Adolescent Sex Offender Treatment Program is equipped to address sexual behaviors in girls. Girls represent seven percent of all program participants; victims range in gender and number per offender. Touching behaviors include: fondling over and under clothes, humping, and penetration. Non-touching behaviors include: exposure, showing porn, instructing children to touch each other, and sexting. Approximately 40% of the females had severe histories of neglect and abuse. Half of those girls were sexually victimized and of those, 1/3 had more than one abuser and 24% had female abusers. The majority of the girls in this program were exposed to pornography. Approximately 15% offended while babysitting, which does not coincide with available research about adolescent female sexual offenders.

Group therapy is the preferred modality for treating sex offenders; however, this is difficult to implement with such a low number of court involved girls. While most interventions are designed for male offenders, the Kent County program strives to provide a service that meets the unique need of females, values the female perspective, celebrates and honors the female experience, respects and takes into account female development, and empowers females to reach their full potential. The program treats girls, not sex offenders – the offense is a behavior which does not define them. Available resources direct practitioners to keep the following in mind when working with girls who sexually offend:

- Females tend to develop identities through relationships and care, versus males who tend to develop identities through independence and success.

- Females tend to think in a contextual and narrative manner, while males tend to think in linear and abstract terms.
- Females often engage in conversations to bond, while males engage in conversations to solve problems or give advice.
- Females tend to learn better through collaboration and group work.
- Females develop a sense of self-worth when their actions come from and lead back to connections with others.
- Females are socialized toward interdependence and attachment.

Effectively working with girls who sexually offend must incorporate the concepts listed above. Ms. Kaltenbacher and Ms. Jackson stressed the need to create an environment that is both physically and emotionally safe and addresses the whole girl in the context of her life. Practitioners should be responsive to past trauma experiences and create a comfortable and nurturing atmosphere, down to the aesthetics of the room (bright colors, comfortable seating, etc.). Girls need unconditional positive regard and 100% engagement from the practitioner in order to fully participate in the process. To effectively address sexual offending behaviors, treatment must also focus on the areas of victimization and trauma, cultural background, societal issues, and health needs. It is recommended therapists be relational in their approach but should not “overprotect” or “mother” the girls with whom they work. This means prioritizing confidentiality, using respectful and relational language, acting as an appropriate role model, providing tactile experiences, challenging negative attention seeking behaviors and confronting ambivalence.

When treating girls, the presenters use a variety of techniques and resources, and typically do not use any one workbook from start to finish. Rather, the focus is on bonding activities, journaling, role play, art projects and especially, on graduation to recognize successful program completion. Practitioners should be mindful of the language used for different age groups and genders, but many themes remain consistent across all groups:

- Accountability for behavior
- Acknowledging own hurts/empathy
- Learning about feelings, expressing them, feelings we hide
- Understanding why the sexual offense happen
- Understanding the victim
- Triggers/unsafe situations (relapse prevention)
- Letter to self from perspective of the victim
- Apology – letter/in person
- Sexual attitudes and messages/healthy sexuality – dating
- Pornography – “fringe” porn is becoming more socially acceptable; distorts expectations about healthy sexuality
- Social media

Sand Tray Therapy is used extensively in the Kent County program, as it helps kids who find it difficult to articulate their thoughts and feelings. This form of play therapy is guided by the child, rather than the therapist. It transcends artistic, cognitive and verbal abilities and can be used with any age group. Play is a natural medium of communication for children and gives expression to non-verbalized emotional issues. Ms. Kaltenbacher and Ms. Jackson shared several photos of sand trays completed by a variety of kids in the program, highlighting the differences between those created by girls vs. boys. Across both genders, they find dinosaurs are most often used to represent sexual perpetrators.

Successful treatment of adolescent female sexual offenders is very possible. To conclude, the presenters shared a case study to demonstrate a positive experience:

“R” is a 14 year old female who engaged in sexual offending behavior while babysitting, by asking the children to act out sexual behaviors with one another. “R” was abused by her father and as a result, was involved with the neglect/abuse system. Though the family went through treatment after her abuse, those efforts were not successful. Her father never apologized for the behavior, he moved back into the home and her mother did not acknowledge her failure to protect. “R” experienced a great deal of shame, blame and guilt around her own victimization. When “R” began with the Adolescent Sex Offender Treatment Program, she was bubbly, perky and would talk non-stop, until she was confronted with the opportunity to talk about the offense in a group setting. Ms. Kaltenbacher and Ms. Jackson started from scratch with “R” and her family to redo the victimization therapy. By addressing the issues and achieving resolution with her trauma history, “R” was able to move forward with the group and took great pride in her ability to engage in this way. After graduating the program, “R” came back every year to talk with caseworkers about her progress and speak to groups about her experience.