

# New study challenges stereotypes of adolescent sex offenders

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Adolescent sex offenders are often stereotyped and treated as socially inept, but new research negates this image, finding that they are more likely to be characterized by atypical sexual interests -- such as desire for prepubescent children, coercive sex with peers and adults, and exposing their genitals to strangers. Adolescent sex offenders are also more likely to have a history of sexual abuse themselves, been exposed to sexual violence in their families, and experienced early exposure to sex or pornography.

"If you walked into a typical group treatment for adolescent sex offenders, you might notice a lot of focus on social skills, like how to approach a girl, how to deal with conflict and understanding non-verbal communication," said Michael C. Seto, PhD, lead author of the study. "Our research suggests that social skills training is not what young sex offenders need most in order to be rehabilitated. Discussing sexuality -- early exposure to sex or pornography, sexual fantasies, and sexual arousal -- would likely get us closer to understanding why the offenses were committed and prevent similar ones from being committed again."

Seto, of the Royal Ottawa Health Care Group, and Martin Lalumiere, PhD, of the University of Lethbridge in Alberta, Canada, conducted a meta-analysis of 59 independent studies comparing a total of 3,855 male adolescent sex offenders with 13,393 male adolescent non-sex offenders between ages 12 and 18. Their research is published in the July issue of [Psychological Bulletin](#), published by the American Psychological Association.

Social incompetence is generally viewed as a typical characteristic of adolescent sex offenders -- a belief that influences treatment programs that emphasize teaching appropriate social skills. However, Seto's and Lalumiere's study found no significant difference between adolescent sex offenders and adolescent non-sex offenders in terms of social competence or social skills. This indicates that social incompetence does not help explain why some adolescents commit sex crimes rather than other kinds of crimes, and calls into question the prominent role that social skills training often plays in rehabilitation programs, they said. Other factors that are frequently cited as explanations for sexual offending but that were not supported in the study were family problems, including parent-child relationships; attitudes and beliefs about women or sexual offending; and whether the individual has had conventional sexual experiences.

The researchers found that atypical sexual interests seemed to be an important motivation for some adolescents who commit sexual offenses. Adolescent sex offenders were found to be more likely to have atypical sexual interests than other adolescent offenders. Seto suggests that discussions of sexuality need to happen more often and more openly in order to facilitate the identification of those who are at risk to become sex offenders and to facilitate their treatment. This shift can begin with more research about sexuality and sexual offenders.

"Researchers in the adolescent sex offender field have focused on sexual abuse history (more than half of the studies we reviewed reported data on this variable) but have paid relatively little attention to other aspects of sexuality, focusing instead on nonsexual factors (e.g., parent-child attachment, social skills deficits, psychopathology)," the authors wrote. "Our results suggest promising directions for research on the roles of exposure to [sexual violence](#), exposure to sex or pornography more generally and atypical sexual interests."

While [social skills](#) were not a significant determinant of adolescent sexual offending, social isolation was an important factor. Seto and Lalumiere found that adolescent sex offenders had more feelings of social isolation and withdrawal than adolescent non-sex offenders.

"I speculate that feelings of social isolation among adolescent sex offenders come as a result of social norms and stigma that make it difficult to talk about sexual abuse history or sexual urges or fantasies that are outside of what is considered normal," Seto said. "If adolescents think they cannot talk about what they are thinking or feeling, then they cannot seek help and guidance. Encouraging more open dialogue about sexuality between young people and their parents, teachers and health care workers could be a key element in preventing adolescents from committing sexual offenses."

Although Seto and Lalumiere emphasized that most adolescents who are sexually abused do not become sex offenders, the study reconfirmed that there is some relationship between a history of sexual abuse and sexual offending. The data suggest that [sexual abuse](#) is associated with the likelihood that someone will commit a sexual offense for the first time, but they do not predict who is more likely to sexually reoffend once identified. This suggests that child abuse prevention activities, in addition to the important role of protecting children from abuse, can help prevent adolescent sexual offending.

**More information:** "What Is So Special About Male Adolescent Sexual Offending? A Review and Test of Explanations Through Meta-Analysis," Michael C. Seto, PhD, University of Ottawa Institute of Mental Health Research and Royal Ottawa Health Care Group, and Martin L. Lalumiere, PhD, University of Lethbridge; *Psychological Bulletin*, Vol.136, No. 4.

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