

*Rob L. Wetzel, Ph.D.*  
*Honolulu, Hawaii*

**SEXUAL RECIDIVISM/REOFFENDING BY**  
**ADOLESCENT SEXUAL OFFENDERS:**  
**A DIGEST OF EMPIRICAL RESEARCH STUDIES**  
Years: 1943–2005

Allan, et. al. {2003} conducted a retrospective evaluation of the files of 326 JSOs convicted in the Western Australia Children's Court from January 1990 to June 1998. Follow-up time from sentencing until the study was finished ranged up to almost 9 years with an average at-risk time of 4.2 years. Thirty-one JSOs or **9.5% of the youth were convicted of new sexual offenses** with six of the recidivists convicted of more than one subsequent offense. Of the 326 youth studied, slightly more than 66% were convicted of non-sexual offenses after conviction for a first sexual offense.

Alexander {1999} reviewed relevant studies on sex offender treatment and identified those reporting on a total of 1025 juveniles treated and concluded there was a **7.1% reoffense rate** through follow-up periods of more than five years.

Atcheson & Williams {1954} reported that among 125 male adolescent sex offenders adjudicated in the Toronto Juvenile Court between 1939 and 1948 **3% had been arrested for a subsequent sexual offense** while they were still juveniles.

Awad & Saunders {1991} studied 108 male offenders at a Toronto Family Court Clinic between 1980 to 1988. **40% of the child molesters and 61% of the sexually assaultive youth had a history of previous sexual offenses.**

Becker {1990} provided follow-up data on 80 juvenile sexual offenders who were treated on an outpatient basis and followed for up to 2 years. Of the youth, **8% had sexually reoffended.**

Bonner {1992} reported that her review of the relevant JSO literature suggested, “The statistics on recidivism and preliminary treatment outcome... studies are encouraging, with **reoffense rates of 10% being typical**”.

Borduin *et.al.* {1990} compared treatment for JSOs via “Multisystemic Therapy” [MST] with traditional generic non-specialized individual therapy. A total of only 16 youth were studied and followed for an average of 3 years after treatment completion. **Youth receiving MST had recidivism rate of 12.5% for sex offenses, those who received individual therapy had a reoffending rate of 75%.** About 25% of MST youth committed new non-sexual crimes compared to 50% of those treated with individual therapy. *The extremely small sample size, disparities in training and experience of therapists between the two groups, and lack of replication thus far render these results tentative at best.*

Borduin & Schaeffer {2001} reported on a clinical trial comparing Multisystemic Therapy with “usual services.” Forty-eight youth were provided respective services and followed for 8 years. **12.5% of youth who participated in MST services recidivated whereas 41.7% of youth receiving ‘usual services’ reoffended.**

Brannon & Brannon {n.d.} and Brannon & Troyer {1991} studied 53 JSOs released from a residential treatment program emphasizing Adlerian psychological principles during 1987 and 1988 with a follow-up period up to 33 months. **1.9% of the offender sample committed a post-release sex offense.** Recidivism was determined only via reports from youths' parole officers.

Bremer {1992} followed up on 193 JSOs who had been discharged from a specialized residential treatment facility, with a study period ranging from less than 6 months to 8.5 years; approximately half the study group was followed for 4 or more years. **Based on sexual offense convictions, an official 6% recidivism rate was found;** via questionnaire **the youth self-report sexual reoffense rate was 11%.**

Broadhurst & Loh {1997} examined the recidivism of 2785 Western Australian males apprehended for a first sexual offense between 1984 and 1994. Of the 410 non-Aboriginal JSOs they found a **recidivism rate of 6.8%** during a follow-up period averaging 5.7 years.

Doshay {1943} was the first investigator to report recidivism statistics on a large sample of male adolescent sexual offenders. He followed 256 youth for a period of 6 years, and **of the 108 who had originally committed only a sexual offense only 2 or 1.85% were arrested for a subsequent sex offense.** Of the **remaining 148 adolescents who originally had records of both sexual and nonsexual offenses, 9.5% reoffended sexually.** Of interest is the fact that study youth had been provided only very brief psychiatric counseling related to their sexual misconduct.

Elliot {1994} followed 66 self-reported JSO "rapists" all of whom were undetected and not subjected to either judicial or therapeutic interventions. With an interval of approximately fifteen years from first

sexual offense, **22% reported having engaged in a later “sexual assault.”** Of the 66 individuals, 78% self-reported a non-sex felony in the year of the first sex offense or thereafter.

Epperson, et. al. {2004} reported on 637 JSOS followed for various lengths of time, with **13% of youth arrested for subsequent sexual offenses.**

Gretton, et. al. {2001} reported on 220 adolescent males who had confessed to acts or been convicted under the Canadian Criminal Code relating to sexual offending. All youth had attended an outpatient treatment program with the follow-up period ranging from 7 to 106 months and an average of 55 months. **15% committed at least one sexual offense** during the study period; 30% committed violent non-sexual offenses and 51% did “general” nonviolent, nonsexual offenses.

Groth {1977} reported on 63 juveniles and adults evaluated and treated in a locked forensic facility for “Sexually Dangerous Persons.” His data indicated that **74.6% of the sample had prior known and adjudicated sexual offenses.**

Hagan, King & Patros {1994} analyzed recidivism rates for 50 youth who had been placed at a state juvenile correctional facility for committing a sexual assault against a child. Rates of recidivism were assessed two years after completion of an adolescent sexual offender treatment program and found **8% of the youth reoffended against children.**

Hagan & Cho {1996} followed 50 youth who had been convicted of forceful sexual assaults (i.e., rape) against victims their own age or older and after a two to five year follow-up period determined that **10% of the rapist youth had sexually reoffended.** Of perhaps further interest is the fact that 54% of the youth had committed nonsexual crimes during the follow-up period.

Hagan & Gust-Brey {1999} extended the study by Hagan & Cho {see above} of 50 incarcerated rapist youth up to a 10-year period post-release and found that **16% had been convicted of another sexual assault**. Note that among this violence-prone JSO sample, after a 10-year follow-up 90% of the adolescent rapists had been involved in one or more crimes of a non-sexual nature.

Hagan, et. al. {2001} followed 50 JSOs who molested children and 50 JSOs who assaulted a peer or older victim; the youth had participated in a correctional facility specialized treatment program and followed for eight years. **20% of child molesters and 16% of rapists were convicted of a sexual assault** subsequent to being returned to the community. Among the 50 youth incarcerated for non-sex offending crimes, 10% were convicted of a sexual assault after release to the community.

Hechler, et. al. {2002} examined juvenile and adult arrest and conviction data for a period of 10 to 12 years on a sample of 54 JSOs. During the follow-up period **11% committed a subsequent sexual offense**.

Heinz, et. al. {1987} studied 28 JSOs who completed a comprehensive residential treatment program for a minimum one year but otherwise an unspecified follow-up period; they reported a **7% recidivism rate**.

Kahn & Chambers {1991} provide data on a retrospective follow-up on 221 juvenile sex offenders treated in 10 programs, both outpatient and residential, in the state of Washington. Youth were followed for an average of 20 months with a sexual **recidivism rate of 7.5%**. Of the youth, 37% committed nonsexual offenses during the study period.

Kahn & Lafond {1988} reported on 350 adolescent offenders treated and released from a juvenile correctional facility between 1981 and 1986. The authors stated that approximately **9% reoffended** during a follow up period ranging from a few weeks to 6 years.

Kenny, et. al. {2001} studied 70 JSOs in New South Wales, Australia who were awaiting court disposition on sexual offending charges. Of their sample **42.8% of the youth were recidivists**, having been criminally charged with previous sexual offenses.

Knopp {1985} reported recidivism data derived from informal follow-ups lacking criminal records checks from two residential JSO treatment programs and a community-based JSO program. The two residential programs followed-up for approximately 5 years with one reporting a **0% reoffense rate** among 12 offenders post-treatment and the other disclosing that of 62 youth **3.2% committed a sexual offense after treatment discharge**. The community-based program reported a **0% reoffense rate** over a 3-year follow-up period with 80 youth.

Knopp {1991} later reported on a Minnesota outpatient program following 200 youth who completed the specialized treatment with **6% known to have recommitted a sexual offense**.

Lab, Shields & Schondel {1993} reported on 46 youth who received a court-based sex offender treatment intervention. Their analysis indicated a sexual **recidivism rate of 2.2%** for the group of youngsters.

Langstrom & Grann {2000} conducted a retrospective study in Sweden of 46 youth adjudicated for sexual offenses from 1988 through 1995 who also were subjected to court ordered forensic evaluation. With an at-risk period averaging six years, **20% of the youth sexually reoffended** and 65% of the sample committed nonsexual criminal offenses. *The authors believe the recidivism rate may have been unusually elevated due to the large number of exhibitionists in the sample, a behavior believed to have a very high likelihood of persistence.*

Lantz {cited in Davis & Leitenberg, 1987} reported preliminary study results that out of 28 adolescents who had successfully completed treatment, only **7% reoffended sexually** during a 12-month follow-up period.

Mazur & Michael {1992} tracked for six months after discharge 10 JSOs who had participated in a four-month outpatient program. Bases solely upon youth and parent reports of “relapse,” **0% of the youth reoffended.** *The very small sample size and reliance only upon self-reports render results questionable.*

McConaghy, et. al. {1989} reported on a three to six year follow up of 6 JSOs which included 2 homosexual pedophiles, a heterosexual pedophile, 2 fetishists and 1 exhibitionist. The youth were provided behavioral and/or pharmacological treatments. Given this difficult to treat sample of JSOs, they reported a **50% rate of “new charges”** for sexual crimes based upon self- and third-party reports.

Milloy {1994} studied a sample of 59 convicted male offenders. Most of the youth had sexually abused a child known to them, **15% had been adjudicated more than once for multiple sex offenses by the time this study was initiated,** 70% of the youngsters received sex offender-specific treatment. At the end of a 3 year study period **0.0% of the JSO’s had sexually reoffended.** Of the JSO’s studied, 44% had committed non-sexual new crimes.

Miner, et. al. {1997} followed 97 juveniles who participated in the Minnesota Department of Correction JSO program, the follow-up period being 19.3 months. **8.3% were arrested for a new sex offense** whereas 38% of the sample committed nonsexual offenses after release from incarceration.

Miner, {2002} reported on a sample of 86 JSOs treated in a corrections-based program (see Miner, 1997) between March 1993 and January 1996 with an average time at risk of 4.3 years. **8.1% sexually reoffended** and 55% committed nonsexual criminal offenses.

Nisbet {2002} & Nisbet et. al. {2005} studied 303 males who were adjudicated on sexual offenses as adolescents in New South Wales, Australia between 1989 and 1996. The average observation period between adjudication as adolescents and follow-up as adults was 7.6 years with many subjects followed for up to 10+ years. **25% of subjects received further convictions for sexual offenses prior to age 18 as adolescents. Upon reaching adulthood, 9% came to attention of police for further alleged sexual offenses with only 5% receiving convictions for sexual offenses.** Overall, slightly more than 61% of subjects received convictions for nonsexual offenses as adults.

Prentky, et. al. {2000} followed 75 treated and clinically discharged JSOs for a one year period and found that **4% sexually reoffended.**

Rasmussen {1999} found that among 170 youth convicted of a sex crime in three Utah juvenile court jurisdictions during 1989, **14.1% committed a new sexual offense** and 54% reoffended non-sexually. Of the 170 JSOs, nearly 48% either failed to complete or else were not referred for treatment. As with the Schram, *et.al.* study [below], results here indicate first-time JSOs have less recidivism when they are treated in community-based programs as opposed to more restrictive settings.

Rubinstein, Yeager, Goodstein & Lewis {1993} followed 19 juveniles who had been adjudicated and incarcerated for having committed extremely violent assaultive sexual crimes. The youth were followed into adulthood until at least 24 years of age or for 8 years after release from incarceration. Of the youth **37% had an adult criminal record of**

**one or more sexual assaults** subsequent to discharge from juvenile corrections. *The JSOs in this study were not representative of most JSO youth in that they had committed very violently assaultive offenses.*

Schmidt & Heniz {1996} followed 33 youth court-ordered into their outpatient treatment program for sexually aggressive youth with a study period of from 12 to 54 months subsequent to treatment completion. Whereas **9% were charged with a sexually related offense, 3% of the youth were convicted of a new sex offense.**

Schram, Milloy & Rowe {1991} provide one of the best available recidivism studies ever conducted on adolescent sex offenders. Of 197 youth who received varied treatments focused on their sexual misconduct, **12.2% of the boys were arrested for new sex offenses and 10.2% were convicted.** This study followed the 197 male juveniles for a median of 6.8 years, found that youth who had been institutionalized reoffended at a significantly higher rate than those treated in the community and that **4% of the original sample could be classified as chronic, repetitive sex offenders likely to perpetrate on into adulthood.**

Seabloom, Seabloom, Seabloom, Barron & Hendrickson {2003} discussed an innovative and intensive outpatient treatment program for 122 adolescent male JSOs and their families and follow-up on the youth for from 15 to 24 years with the average time followed of 18 years. **None of the youth who completed the program were arrested or convicted of sex-related crimes.** 8% of the youth who “withdrew” from treatment prior to completion were later convicted of a sex crime.

Shapiro, Welker & Pierce {2001} reported on the effectiveness of an 18-month long residential treatment program for 26 sexually aggressive boys. The follow-up period was for only one year and rather than using arrest and conviction data the authors queried parents and professionals working with the youth regarding known instances of aggressive and

antisocial behavior. There were no adjudications of any youth for sexual offenses during follow-up but detailed inquiry revealed **8% of the youth engaged in sexual aggression, specifically molestation of a younger child.**

Sheridan, *et.al.* {1998} reported on a group of 22 JSOs who completed a specialized treatment program in Ireland with a follow up period ranging from 12 to 48 months. The authors indicated that **none of the youth had reoffended.** *Their conclusions are limited as they were based upon anonymous self-report without benefit of criminal or social service records.*

Sipe, *et.al.* {1998} researched the reoffense rate of 124 JSOs in Idaho with a follow-up period ranging from 1 to 14 years with an average period of 6 years. The subjects thus ranged in age from 18 to 32 years, with an average age of 24 years at the time of data collection. The authors found the JSOs to have **a sexual recidivism rate of 9.7% as an adult,** although 22.6% of the youth were arrested for other types of crimes as well.

Smets & Cebula {1987} followed 21 JSOS for up to three years following their admission to a group therapy program and reported one youth reoffended for a **5% reoffense rate.** *Besides a small sample size, the article really is more of a treatment program description rather than a genuine recidivism study and thus their results are of questionable utility.*

Smith {1984} and Smith & Monastersky {1986} studied 223 sexually aggressive youth over an average of 20 months with juvenile justice records revealing that **7% had committed another sex offense.** In a subgroup of 112 youths followed for a longer period (minimum of 17 months), **14% were found to have committed a subsequent sexual offense.** The youth had been provided some form of treatment ranging from a few sessions of family therapy to many months of

individual therapy; none received any single systematic JSO treatment program. Of the 112 JSOs studied, 35% committed subsequent nonsexual crimes.

Steiger & Dizon {1991} compiled criminal reconviction data for all male youth released from Washington State Juvenile Residential Facilities in 1982 for a follow-up study period of six and a half years. Of 105 JSOs **12% were reconvicted for a sex offense** whereas 55% were convicted for a nonsexual offense during the follow-up period.

Waite, Pinkerton & Wieckowski {2002} investigated reoffense rates for 253 very high-risk adolescents who received specialized JSO treatment operated by the Virginia Department of Juvenile Justice from 1992 to 1998. Each youth was retrospectively assigned to high and low/moderate risk categories with a follow-up period of from one month to nine years. For both high- and low/moderate-risk youth, **4.3% were re-arrested for a sex offense within the first three years following release from treatment with no subsequent sex offense re-arrests beyond three years.**

Waite, et. al. {2005} further report on the above Virginia study involving 256 highly delinquent incarcerated male JSOs who either successfully completed a treatment program or who dropped out of treatment or who were treatment failures. Youth were followed for an average of almost 62 months and the **actual re-arrest rate for sexual offense for all youth was 4.7%.** Note that the low recidivism rate included those youth who did not successfully complete treatment.

Walker, G. {1998} Reported on 138 adjudicated Australian youth treated in the MAPPS program with a **5% reoffense rate over up to a 4.5 year period at risk.**

Williams & Finkelhor {1992} conducted an exhaustive study of 118 incestuous biological fathers and 116 non-incestuous fathers. Their findings indicated that **men who sexually abused or offended as juveniles were 5.44 times more likely to commit an incest offense as an adult** than were the men who did not offend as juveniles. 34% of incestuous fathers sexually offended as juveniles whereas only 9% of non-incest fathers did so. No information was available regarding sex offender treatment afforded the juveniles, but specialized treatment was largely unavailable at the time the men first offended as juveniles.

Worling & Curwen {2000} reported their excellent study of 58 adolescent offenders who had completed at least 12 months of a specialized treatment program in Canada and compared their reoffense rate as based on sexual assault *charges* [not convictions] to that of 90 youth who received only an assessment, or refused or else dropped out of treatment. The follow-up period ranged from 2 to 10 years, with an average follow-up being 6 years. Approximately **5.2% of the treated youth recidivated whereas nearly 18% of the untreated adolescents reoffended.**

#### ◆◆REFERENCES◆◆

Allan,A., Allan,M.H., Marshall,P., & Kraszian,K. {2003} RECIDIVISM AMONG MALE JUVENILE SEXUAL OFFENDERS IN WESTERN AUSTRALIA. *Psychiatry, Psychology And Law*, 10, 359-378.

Alexander, M.A. {1999} SEXUAL OFFENDER TREATMENT EFFICACY REVISITED. *Sexual Abuse: A Journal of Research and Treatment*, 11, 101-116.

Association For The Treatment Of Sexual Abusers. POSITION ON THE EFFECTIVE LEGAL MANAGEMENT OF JUVENILE SEXUAL OFFENDERS. November 25, 1997. 3pp.

Atcheson, J.D. & Williams, D.C. {1954} A STUDY OF JUVENILE SEX OFFENDERS. *American Journal of Psychiatry*, 111, 366-370.

Awad, G.A. & Saunders, E.B. {1991} MALE ADOLESCENT SEXUAL ASSAULTERS: CLINICAL OBSERVATIONS. *Journal of Interpersonal Violence*, 6, 446-460.

Becker, J.V. {1990} TREATING ADOLESCENT SEXUAL OFFENDERS. *Professional Psychology: Research and Practice*, 21, 362-365.

Bonner, B.L. {1992} ADOLESCENT SEX OFFENDERS: FROM RESEARCH TO CLINICAL PRACTICE. Paper presented at the Eighth National Symposium on Child Sexual Abuse, February 17-21, 1992, Huntsville, Alabama.

Borduin, C.N., Henggeler, S.W., Blaske, D.N., & Stein, R.J. {1990} MULTISYSTEMIC TREATMENT OF ADOLESCENT SEXUAL OFFENDERS. *International Journal of Offender Therapy and Comparative Criminology*, 34, 105-114.

Borduin, C.M. & Schaeffer, C.M. {2001} MULTISYSTEMIC TREATMENT OF JUVENILE SEXUAL OFFENDERS: A PROGRESS REPORT. *Journal of Psychology & Human Sexuality*, 13, 25-42.

Brannon, J.M. & Brannon, M.E. {n.d.} IMPLEMENTING A NORMALIZED RESIDENTIAL ALTERNATIVE TO THE SPECIALIZED TREATMENT OF ADOLESCENT SEX OFFENDERS. Unpublished Manuscript, Idaho Youth Services Center, 15pp.

Brannon, J.M. & Troyer, R. {1991} PEER GROUP COUNSELING: a NORMALIZED RESIDENTIAL ALTERNATIVE TO THE SPECIALIZED TREATMENT OF ADOLESCENT SEXUAL OFFENDERS. *International Journal of Offender Therapy and Comparative Criminology*, 34, 225-234. Cited in Weinrott, 1996.

Bremer, J.F. {1992} SERIOUS JUVENILE SEX OFFENDERS: TREATMENT AND LONG-TERM FOLLOW-UP. *Psychiatric Annals*, 22, 326-332.

Broadhurst, R. & Loh, N. {1997} CAREERS OF SEX OFFENDERS: THE PROBABILITIES OF RE-ARREST. Paper presented to the Australian Institute of Criminology Second National Outlook Symposium, March, Canberra, Australia.

Davis, G.E. & Leitenberg, H. {1987} ADOLESCENT SEX OFFENDERS. *Psychological Bulletin*, 101, 417-427.

Doshay, L.J. {1943} THE BOY SEX OFFENDER AND HIS LATER CAREER. Montclair, NJ: Patterson Smith. Reprinted 1969.

Elliot, D.S. {1994} THE DEVELOPMENTAL COURSE OF SEXUAL AND NON-SEXUAL VIOLENCE: RESULTS FROM A NATIONAL LONGITUDINAL STUDY. Paper presented at the Thirteenth Annual Research and Treatment Conference of the Association for the Treatment of Sexual Abusers, San Francisco, Ca.

Epperson, D.L., Ralston, C.A., Fowers, D. & DeWitt, J. {2004} JUVENILE SEXUAL RECIDIVISM: A LARGE-SCALE STUDY OF UTAH JUVENILES ADJUDICATED FOR SEXUAL OFFENSES. Paper presented at the National Adolescent Perpetration Network conference, Portland, Or., May 24, 2004.

Gretton, H.M., McBride, M., Hare, R.D., O'Shaughnessy, R., & Kumka, G. {2001} PSYCHOPATHY AND RECIDIVISM IN ADOLESCENT SEX OFFENDERS. *Criminal Justice And Behavior*, 28, 427-449.

Groth, A.N. {1977} THE ADOLESCENT SEXUAL OFFENDER AND HIS PREY. *International Journal of Offender Therapy and Comparative Criminology*, 21, 249-254.

Hagan, M.P., King, R.P., & Patros, R.L. {1994} RECIDIVISM AMONG ADOLESCENT PERPETRATORS OF SEXUAL ASSAULT AGAINST CHILDREN. *Young Victims, Young Offenders*. The Haworth Press. Pp. 127-137.

Hagan, M.P. & Cho, M.E. {1996} A COMPARISON OF TREATMENT OUTCOMES BETWEEN ADOLESCENT RAPISTS AND CHILD SEXUAL OFFENDERS. *International Journal of Offender Therapy and Comparative Criminology*, 40, 113-122.

Hagan, M.P. & Gust-Brey, K.L. {1999} A TEN-YEAR LONGITUDINAL STUDY OF ADOLESCENT RAPISTS UPON RETURN TO THE COMMUNITY. *International Journal of Offender Therapy and Comparative Criminology*, 43, 448-458.

Hagan, M.P., Gust-Brey, K.L., Cho, M.E. & Dow, E. {2001} EIGHT-YEAR COMPARATIVE ANALYSES OF ADOLESCENT RAPISTS, ADOLESCENT CHILD MOLESTERS, OTHER ADOLESCENT DELINQUENTS, AND THE GENERAL POPULATION. *International Journal of Offender Therapy and Comparative Criminology*, 45, 314-324.

Hechler, J., Scoular, J., Righthand, S. & Nangle, D. {October 2002} PREDICTIVE VALIDITY OF THE J-SOAP OVER 10-PLUS YEARS: IMPLICATION FOR RISK ASSESSMENT. Paper presented at the Association for the Treatment of Sexual Abusers 21<sup>st</sup>. Annual Research and Treatment Conference, Montreal, Quebec Canada.

Heinz, J.W., Gargaro, S., & Kelly, K.G. {1987} A MODEL RESIDENTIAL JUVENILE SEX OFFENDER TREATMENT PROGRAM: THE HENNEPIN COUNTY HOME SCHOOL. Safer Society Press, Brandon, VT.

Kahn, T.J. & Lafond, M.A. {1988} TREATMENT OF THE ADOLESCENT SEXUAL OFFENDER. *Child and Adolescent Social Work*, 5, 135-148.

Kahn, T.J. & Chambers, H.J. {1991} ASSESSING REOFFENSE RISK WITH JUVENILE SEX OFFENDERS. *Child Welfare*, 70, 333-345.

Kenny, D.T., Keogh, T. & Seidler, K. {2001} PREDICTORS OF RECIDIVISM IN AUSTRALIAN JUVENILE SEX OFFENDERS: IMPLICATIONS FOR TREATMENT. *Sexual Abuse: A Journal of Research and Treatment*, 13, 131-148.

Knopp, F.H. (1985) "Recent Developments in the Treatment of Adolescent Sex Offenders," in ADOLESCENT SEX OFFENDERS: issues in Research and Treatment, Otey, E.M. & Ryan, G.D. (eds.). National Institute of Mental Health, pp. 1-27.

Knopp, F.H. {1991} THE YOUTHFUL SEX OFFENDER: THE RATIONALE & GOALS OF EARLY INTERVENTION & TREATMENT. Orwell, VT: The Safer Society Press.

Lab, S.P., Shields, G., & Schondel, C. {1993} RESEARCH NOTE: AN EVALUATION OF JUVENILE SEXUAL OFFENDER TREATMENT. *Crime and Delinquency*, 39, 543-553.

Langstrom, N. & Grann, M. {2000} RISK FOR CRIMINAL RECIDIVISM AMONG YOUNG SEX OFFENDERS. *Journal of Interpersonal Violence*, 15, 855-871.

Mazur, T. & Michael, P.M. {1992} OUTPATIENT TREATMENT FOR ADOLESCENTS WITH SEXUALLY INAPPROPRIATE BEHAVIOR: PROGRAM DESCRIPTION AND SIX-MONTH FOLLOW-UP. *Journal of Offender Rehabilitation*, 18, 191-203. Cited in Weinrott, 1996.

Milloy, C.D. {1994} A COMPARATIVE STUDY OF JUVENILE SEX OFFENDERS AND NON-SEX OFFENDERS. Washington State Institute for Public Policy, September 1994.

Miner, M.H., Siekert, G.P., & Ackland, M.A. {1997} EVALUATION: JUVENILE SEX OFFENDER TREATMENT PROGRAM, MINNESOTA CORRECTIONAL FACILITY—SAUK CENTRE. Final Report--Biennium 1995-1997. Minneapolis, MN: University of Minnesota, Department of Family Practice and Community Health, Program in Human Sexuality.

Miner, M. {2002} FACTORS ASSOCIATED WITH RECIDIVISM IN JUVENILES: AN ANALYSIS OF SERIOUS JUVENILE SEX OFFENDERS. *Journal Of Research In Crime And Delinquency*, 39, 421-436.

McConaghy, N., Blaszczynski, A., Armstrong, M.S., & Kidson, W. {1989} RESISTENCE TO TREATMENT OF ADOLESCENT SEX OFFENDERS. *Archives of Sexual Behavior*, 18, 97-107. Cited in Weinrott, 1996.

Nisbet, I. {2002} JUVENILE SEX OFFENDER RECIDIVISM. Paper presented at the Association for the Treatment of Sexual Abusers 21<sup>st</sup>. Annual Research and Treatment Conference, Montreal, Quebec Canada; October 2-5, 2002. and "JUVENILE SEX OFFENDERS UNLIKELY TO REOFFEND AS ADULTS: STUDY. *ABC NEWS ONLINE*, February 21, 2003.

Nisbet, I.A., Wilson, P.H. & Smallbone, S.W. {2005} A PROSPECTIVE LONGITUDINAL STUDY OF SEXUAL RECIDIVISM AMONG ADOLESCENT SEX OFFENDERS. *Sexual Abuse: A Journal of Research and Treatment*, 16, 223-234.

Prentky, R., Harris, B., Frizzell, K. & Righthand, S. {2000} AN ACTUARIAL PROCEDURE FOR ASSESSING RISK WITH JUVENILE SEX OFFENDERS. *Sexual Abuse: A Journal of Research and Treatment*, 12, 71-93.

Rasmussen, L.A. {1999} FACTORS RELATED TO RECIDIVISM AMONG JUVENILE SEX OFFENDERS. *Sexual Abuse: A Journal of Research and Treatment*, 11, 69-85.

Rubinstein, B.F.A., Yeager, C.A., Goodstein, C., & Lewis, D.O. {1993} SEXUALLY ASSAULTIVE MALE JUVENILES: A FOLLOW-UP. *American Journal of Psychiatry*, 150, 262-265.

Schmidt, F. & Heniz, L. {1996} TREATMENT SUCCESS OF A COMMUNITY BASED PROGRAM FOR YOUNG ADOLESCENT SEX OFFENDERS. Paper presented at the 15<sup>th</sup>. Annual Research and Treatment Conference of the Association for the Treatment of Sexual Abusers, Chicago, Illinois, November 1996. Also reported in Schwartz, B.K. (ed.). {1999} THE SEX OFFENDER, Vol. III, Civic Research Institute, pp. 18-1 to 18-9.

Schram, D.D., Milloy, C.D., & Rowe, W.E. {1991} JUVENILE SEX OFFENDERS: A FOLLOW-UP STUDY OF REOFFENSE BEHAVIOR. Washington State Institute For Public Policy, September 1991.

Seabloom, W., Seabloom, M.E., Seabloom, E., Barron, R. & Hendrickson, S. {2003} A 14- TO 24-YEAR LONGITUDINAL STUDY OF A COMPREHENSIVE SEXUAL HEALTH MODEL TREATMENT PROGRAM FOR ADOLESCENT SEX OFFENDERS: PREDICTORS OF SUCCESSFUL COMPLETION AND SUBSEQUENT CRIMINAL RECIDIVISM. *International Journal of Offender Therapy and Comparative Criminology*, 47, 468-481.

Shapiro, J.P., Welker, C.J., Pierce, J.L. {2001} AN EVALUATION OF RESIDENTIAL TREATMENT FOR SEXUALLY AGGRESSIVE YOUTH. *Journal of Child Sexual Abuse*, 10, 1-21.

Sheridan, A., McKeown, K., Cherry, J., Donohoe, E., McGrath, K., O'Reilly, K., Phelan, S. & Tallon, M. {1998} PERSPECTIVES ON TREATMENT OUTCOME IN ADOLESCENT SEXUAL

OFFENDING: a STUDY OF A COMMUNITY-BASED TREATMENT PROGRAMME. *The Irish Journal of Psychology*, 19, 168-180.

Sipe, R., Jensen, E.L., & Everett, R.S. {1998} ADOLESCENT SEXUAL OFFENDERS GROWN UP: RECIDIVISM IN YOUNG ADULTHOOD. *Criminal Justice and Behavior*, 25, 109-124.

Smets, A.C. & Cebula, C.M. {1987} A GROUP TREATMENT PROGRAM FOR ADOLESCENT SEX OFFENDERS: FIVE STEPS TOWARD RESOLUTION. *Child Abuse and Neglect*, 11, 247-254.

Smith, W.R. {1984} PATTERNS OF RE-OFFENDING AMONG JUVENILE SEX OFFENDERS. Unpublished manuscript, University of Washington, Juvenile Sexual Offender Program, Seattle.

Smith, W.R. & Monastersky, C. {1986} ASSESSING JUVENILE SEX OFFENDERS' RISK FOR RE-OFFENDING. *Criminal Justice and Behavior*, 13, 115-140.

Steiger, J.C. & Dizon, C. {1991} REHABILITATION, RELEASE AND REOFFENDING: A REPORT ON THE CRIMINAL CAREERS OF THE DIVISION OF JUVENILE REHABILITATION "CLASS OF 1982." Juvenile Offender Research Unit, Department of Social and Health Services, Olympia, Washington. Cited in Weinrott, 1996.

Waite, D., Pinkerton, R. & Wieckowski, E. {October 2002} TRACKING TREATMENT OUTCOME AMONG JUVENILE SEXUAL OFFENDERS: A NINE YEAR FOLLOW-UP STUDY. Paper presented at the Association for the Treatment of Sexual Abusers 21<sup>st</sup>. Annual Research and Treatment Conference, Montreal, Quebec Canada.

Waite, D., Keller, A., McGarvey, E.L., Wieckowski, E., Pinkerton, R. & Brown, G.L. {2005} JUVENILE SEX OFFENDER RE-ARREST RATES FOR SEXUAL, VIOLENT NONSEXUAL AND PROPERTY CRIMDES: A 10-YEAR FOLLOW-UP. *Sexual Abuse: A Journal of Research and Treatment*, 17, 313-331.

Walker, G. {1998} VICTORIA A WORLD LEADER IN WORKING WITH TEEN SEX OFFENDERS. Department of Human Services, Victoria, Australia. Internet resource: <http://hnb.dhs.vic.gov.au/web/pubaff/medrel.nsf/0/98dbb4e32c7b53864a25662e000294d7>

Weinrott, M.R. {1996} JUVENILE SEXUAL AGGRESSION: A CRITICAL REVIEW. Center for the Study and Prevention of Violence, University of Colorado, Boulder, CO.

Williams, L.M. & Finkelhor, D. {1992} THE SIGNIFICANCE OF CHILDHOOD ABUSE IN THE ETIOLOGY OF SEXUAL OFFENSES: CONCLUSIONS FROM A STUDY OF INCESTUOUS FATHERS. Unpublished manuscript, Family Research Laboratory, University of New Hampshire, Durham, NH., July 31, 1992.

Worling, J.R. & Curwen, T. {2000} ADOLESCENT SEXUAL OFFENDER RECIDIVISM: SUCCESS OF SPECIALIZED TREATMENT AND IMPLICATIONS FOR RISK PREDICTION. *Child Abuse & Neglect*, 24, 965-982.