

# The Relationships among Emotional Abuse, Parent and Caregiver Instability, and Disrupted Attachment on Juvenile Sex Offending Status

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## Abstract

The treatment needs of youth who are convicted of sex offenses and the needs of their families, have received little attention in research literature. This study examined the impact of several issues, such as family instability, emotional abuse and parental attachment, on juvenile sex offending status, with a research population of over 500 juvenile sex offenders. The impact of emotional abuse was determined to be significantly correlated with juvenile sex offending status, as was the impact of several variables of parent and caregiver instability. Parental attachment was not found to be a significantly correlated variable to juvenile sex offending status. Implications for social work practice, as well as research and treatment, are included.

**Keywords:** Juvenile sex offenders, families in treatment, risk assessment, emotional abuse, parent/ caregiver instability, attachment

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## **Introduction**

The treatment needs of youth who are convicted of sex offenses have received little attention in the research literature. In addition to the assessment and treatment of such clients, the impact and correlations of several understudied issues, such as parent and caregiver instability, emotional abuse and parental attachment, with juvenile sex offenders, will be examined.

The article will discuss the findings of a 2011 study which examined the treatment needs of juvenile sex offenders in a large Midwestern state. The study population was composed of 502 juvenile sexual and nonsexual offenders who responded to questionnaires in an effort to examine juvenile offending antecedents and treatment needs regarding sexual behavior. The behaviors of juvenile sex offenders and nonsexual offenders are also compared throughout this study to contrast the differences between the groups of adolescents.

Theoretical considerations for juvenile sex offending, as well as the historical antecedents, limitations and potential of current models of treatment with juveniles will be presented. In addition, implications for clinical social work with juvenile sex offenders will be discussed.

## **Review of the Literature**

As of December 2008, a total of 673,989 sex offenders were registered in the United States (National Center for Missing and Exploited Children, 2009). The 2006 U.S. Office of Juvenile Justice and Delinquency Prevention reported that close to 20,000 juveniles had been adjudicated for violent sex offenses during that year (United States Office of Juvenile Justice and Delinquency Prevention, 2009).

It has been argued that juvenile sexual offenders are different than their nonsexual offending counterparts (Brown & Burton, 2010; Bullens, van Wijk, & Mali, 2006; Ford & Linney, 1995; Jonson-Reid & Way, 2001; Seto & Lalumière, 2010; van Wijk, Blokland, Duits, Vermeiren, & Harkink, 2007; van Wijk, Vreugdenhil, van Horn, Vermeiren, & Doreleijers, 2007). However, other researchers have reported that sexually offending and non-sexually offending juveniles are quite similar, and comparable interventions can be applied to both (Becker & Hunter, 1997; Bullens et al., 2006; Miner & Munns, 2005). In this study, the differences between these two groups of offenders were investigated to examine possible correlates of juvenile sex offending.

A review of the literature (Felizzi, 2011) revealed that juvenile sex offenders were older than their non sex offender counterparts at their first arrest, and that juvenile sex offenders had higher rates of sexual victimization than juvenile non sex offenders. Additionally, juvenile sex offenders suffered from more family instability and disruption than juvenile non sex offenders. Juvenile sex offenders were also found to be more hyper masculine than their same age non sex offending peers, and tended to hold more sexist beliefs that women were thought to be only worthy for sexual gratification (Brown & Burton, 2010).

How do such beliefs and values take hold in a young person? This study was conducted using Social Learning Theory (Bandura, 1977) as an overarching guide and possible explanation for such behavior. Social Learning Theory states that learning starts before experience, and that the observation of deviant behavior may serve as reinforcement, in that juveniles learn behaviors by observing influential adults in their lives (Bandura, 1977; Bandura & Walters, 1963). These influential adults in a juvenile sex offenders' life may display negative values and sexual behavior. Gail Ryan (1997) wrote that the expression of inappropriate sexuality or criminality is often found in sub-culture such as a family (Ryan, 1997). Burton, Miller, & Shill (2002) found Social Learning Theory supported the idea that sexually aggressive adolescents initiated behaviors at a younger age due in part to learned behaviors from family environment.

The family environment was found to impact the study variable of emotional abuse as well. Juvenile sex offenders "have been exposed to significant psychopathology and family dysfunction, and have been cut off from possible sources of emotional support" such as a warm and supportive family network (Righthand & Welch, 2004, p. 21). Emotional abuse of juveniles is defined as being composed of verbal hostility, taunting, denigration, unrealistic expectations, belittling and induced fear or anxiety, threats of abandonment, rejection, deprivation of attention, psychological unavailability, lack of stimulation, lack of parental empathy, and by having excessive power over the child (Egelund, 2009; Iwaniec, 2003; Moor & Silvern, 2006).

Such acts of emotional abuse are committed by parent figures that are in a position of power that renders the child vulnerable. Emotional abuse can "damage the behavioral, cognitive, affective, social and psychological functioning of the child" (Doyle, 1997, p. 331). Unlike sexual or physical abuse, the emotional abuse of a child can occur in public when parents or caregivers make belittling or denigrating comments toward children or juveniles.

Such abuse toward any child can be damaging, and juvenile sex offenders are not excluded from the effects of emotional abuse. Lee, Jackson, Pattison, & Ward (2002) found that childhood emotional abuse was a "common developmental risk factor" for pedophilia, exhibitionism, rape, or multiple paraphilias (p. 73). Schwartz, Cavanaugh, Pimental, & Prentky, (2006) found that out of 813 juveniles surveyed, 46% of the boys and 51% of the girls were subjected to psychological abuse—a category that included emotional abuse or trauma.

Besides an emotionally abusive environment, what are the characteristics of the families of juvenile sex offenders who have been subjected to such abuse? And, what have these juvenile sex offenders learned from such environments? In this study, the variable of parent or caregiver instability was conceptualized from a demographic questionnaire administered to the participants. The survey asked questions regarding behavior witnessed in the family such as violence, abuse, illegal acts, and homelessness. Families with adolescents who have displayed inappropriate sexual behavior have been

characterized as being “unstable, with few resources” (Barbaree & Marshall, 2006, p. 424), such as a lack of emotional, financial, physical, or community supports. These units are often characterized by “disorganized family structures” that include; domestic violence, poorly defined personal and sexual boundaries, lack of supervision, children supervising children, parental sexual victimization, substance abuse issues of one or both parents and/or the absence of a biological parent (Thornton, Stevens, Indermaur, Charmette, & Halse, 2008).

The study variable of parent or caregiver instability is also further defined as a caregiving or parental unit that is characterized by; numerous moves or homelessness, parents or caregivers who physically and sexually abuse and neglect children, domestic violence, illegal acts in home, numerous people living in home and placement of children outside the home. This instability may create an environment that the juvenile sex offender uses as a template for future behavior (Felizzi, 2011).

Juveniles or adolescents who suffer from such disrupted caregiving may also experience less than optimum attachment to their caregivers or parents. Marshall (1989) wrote that adolescents alienated by rejecting and distant parents often are unable to develop secure attachments with caregivers and peers. While observing such rejecting parents or caregivers, adolescents may carry that representation of a relationship throughout their life, which may cause them to develop an inhibited sense of intimacy, as displayed by forced or coercive sex.

Marshall & Mazzucco (1995), discussed what can happen if a juvenile’s parental attachments were less than optimal or disrupted, and if their parents were “emotionally neglectful or rejecting” (p. 280). Marshall (1989) wrote that juveniles with negative and rejecting caregiver experiences often develop poor social skills and less than appropriate emotional regulation; they may develop a poor ability to differentiate among intimacy, sexuality, and aggression. This inhibited sense often leads to loneliness. The loneliness developed through poor and insecure attachments often causes the juvenile sex offender to gain intimacy through forceful or inappropriate means, such as forced sex (Barbaree, Marshall, & Hudson, 1993). Deficits in attachment, specifically anxious-ambivalent and avoidant styles may be specifically linked to such inappropriate sexual behavior and juvenile sexual offending (Stinson, Sales, & Becker 2008).

The relationship the anxious-ambivalent or avoidant attached adolescent sex offender has with the child victim often replicates what the ideal intimate relationship should be for the offender, although the victim is much younger (Stinson et al., 2008). Since anxious attached adolescent sex offenders may have unsatisfying intimate relationships with peers, comfort is sought with a much younger victim, who is perceived as someone who understands the offender the way the adolescent claims to understand the child (Stinson et al., 2008; Ward, Hudson, & Marshall, 1996). Adolescent child molesters, who often feel uncomfortable in the presence of same age peers, seek out nonthreatening child victims as they are perceived as less judgmental and discerning than adults (Marshall & Mazzucco, 1995).

This deficit of appropriate intimate relationships is evident with nonsexual offenders as well. Katsiyannis, Zhang, Barrett, & Flaska (2004), found that avoidant and ambivalent attached juvenile non-sex offenders reported a lowered need for support from others and tended to participate in poorly formed and less than intimate relationships with peers. Elgar, Knight, Worrall, & Sherman (2003) wrote that juvenile non-sex offenders who felt detached and let down by their parents and caregivers were likely to suffer distant and unsatisfying intimate relationships.

The results of the study of the possible relationship among poorly attached adolescents, emotional abuse suffered by them, and possible parent and caregiver instability on juvenile sex offending status is presented in this article.

## **Methods**

### **Research Questions;**

1. What effect does exposure to emotional abuse have on juvenile sex offending?
2. Do juvenile sex offenders experience more emotional abuse and display more severe behavioral difficulties than non-offenders?
3. Do juvenile sex offenders experience more caregiver instability and more disrupted parental attachment than non-sex offenders?

A total of 502 surveys were collected from adjudicated juvenile sex offenders (JSOs, n=332) and juvenile non-sex offenders (JNSOs, n=170). The respondents ranged in age from 12 to 20 years, with the average age of respondents at 16.6 years, with a standard deviation of 1.53 years.

Approval for this study was obtained through the Widener University Institutional Review Board (IRB) in June 2010. The data set was collected during spring 2004, using six pen and paper surveys from six juvenile residential placement facilities in a rural Midwestern state.

The surveys were administered in a group setting in each of the residential facilities. Respondents were separated to prevent participants from viewing each other's answers. No monetary incentives were provided, although free time in the placement setting and pizza were offered for good behavior during the administration of the questionnaire. Graduate research assistants were available to assist with the reading of the surveys for respondents who had difficulty reading or comprehending the questionnaire.

Comprehensive demographic questionnaires were used in the original data collection. The demographic questions, not the data, have been used in previous studies (Burton, 2003; Burton et al., 2002). The evaluation measure used in this secondary analysis was a collection of a number of instruments and adaptations of normative measures (Leibowitz, 2007).

## **Demographic Questionnaire**

A demographic questionnaire was included in the original survey and was used to gather information regarding the respondents' age, educational level, history of sexual abuse, and sexual offending history, as well as historical questions regarding their families (See Appendix A). Caregiver instability data were gathered by such questions as "Do these describe your family and/or home? Frequent changes in who lives in the home, Neglect of children, Hitting or other violence between parents or adults at home, Children being placed outside of the family (not counting you), Lots of moves and /or homelessness." All questions were rated by the respondent as "No," "Yes," and "Don't know." Race and ethnicity information was obtained by asking the participant to "Please choose the ONE ethnic or racial group you feel closest to...."

## **The Childhood Trauma Questionnaire (CTQ)**

The CTQ (Bernstein & Fink, 1998) measures traumatic experiences through childhood and has been reported to have acceptable test-retest reliability (Bernstein & Fink, 1998). The Cronbach's alpha for the emotional abuse CTQ scale in this study was .88 (Riggs, Cusimano, & Benson, 2011).

The CTQ is a retrospective self-report questionnaire that consists of items used to assess the extent to which respondents experienced five types of negative childhood experiences: physical, sexual, and emotional abuse, as well as physical and emotional neglect. The CTQ consists of 34 items that asked respondents to rate the frequency with which various events occurred while they were "growing up" on a 1 to 5 scale. On the CTQ, 1="never true" while 5="very true." The highest total a respondent could measure was 170. Examples of CTQ responses were "Someone wanted me to be a success," and "People in my family called me things like 'stupid', 'ugly', or 'lazy.'" Questions that pertain to the possible commission of emotional trauma—such as asking about scapegoating, unusual punishment, belittling, making fun, and constant yelling at the respondent—were included in the CTQ. Respondents were asked to rate the frequency of their experiences as a child while responding to the statement: "*When I was growing up...*". All CTQ scales demonstrated good internal consistency and convergent validity in prior research, especially with the trauma specific distress measures (Pavio & Cramer, 2004). Wright, Asmundson, McCreary, Scher, Hami, & Stein (2001) found that the CTQ demonstrated "excellent test-retest reliability and convergent validity" (p. 179). The internal consistency for the instrument was .88, which suggests a relatively high internal consistency and that the items in the CTQ are closely related.

## **Inventory of Parent and Peer Attachment (IPPA)**

The IPPA was created and developed to assess juveniles' perceptions of the positive and negative dimensions of the relationships with their parents, caregivers or peers (Armsden & Greenberg, 1987). Quality of communication, degree of trust, and extent of anger and alienation are measured within each scale. The device is a self-report questionnaire with a Likert-scale response format. The IPPA consists of

25 items in two sets—one set each for questions regarding the subjects' mothers and fathers to measure paternal and maternal attachment. The peer scales, which rate relationships with friends and acquaintances, were not used as the intent of this study was to measure paternal and maternal attachment effects on juvenile sex offenders, with nonsex offenders as a comparison group. Quality of communication, degree of trust, extent of anger, and extent of alienation were four scales included in both questionnaires that measure maternal and paternal attachment. Questions that measure communication in the respondent-parent relationship included "I like to get my mother's point of view on things I am concerned about" and "I feel it's no use letting my feelings show around my father." Questions pertaining to parent-child trust included "My father respects my feelings," and "I feel my mother does a good job as my mother." Anger and alienation towards parental figures were measured by such questions as "Talking over my problems with my mother makes me feel ashamed and foolish" and "I get upset a lot more than my father knows about." The level of attachment—secure, insecure, or disorganized—was measured through these and similar questions. The test-retest reliability ratings for the parent scales were .93 (Garbarino, 1996). Armsden and Greenberg (1987) found that the IPPA correlated with the reported levels of family support, family conflict, and family cohesiveness (Garbarino, 1996). The Cronbach's alpha coefficient estimate of reliability for the parent scales was .91, which is considered an excellent rating of internal consistency.

### **Self-Report Sexual Aggression Scale (SERSAS)**

The specific type of sexual assault was measured in the questionnaire by the use of the SERSAS (Burton, 2003). The Chronbach's alpha rating for the SERSAS was .88, which is considered a good rating of internal consistency. Rather than ask for which offense they were adjudicated, the questionnaire asked respondents to list what they have done to their victims. For the purpose of this study, the data analyzed were based on asking respondents if they have ever forced their victims to observe sexual acts; exposed themselves to victims; fondled; forced oral sex; have had their victims force fingers, objects, or penises into the perpetrators' private parts; or have forced their own penises, fingers, or objects into their victims' private areas. Respondents were also asked if they had sexually assaulted animals. By definition, these acts are considered sexually offensive behavior (Ryan, 1997). Most states include such crimes or acts in their criminal code. Voyeurism, exposure, fondling, rape, and animal abuse are considered crimes in all states (U.S. Department of Justice, 2010). Sexual acts that involve force and coercion are considered the "most extreme end of the sexual behavioral spectrum" (Broach & Petretic, 2006). The final question asked if the respondents forced their victim to have sex with an animal.

## Analysis

Descriptive statistics were computed on the variables of emotional abuse, attachment, and parent/caregiver instability. Additionally, the number of assaults and victims, as well as the acts committed by the respondents, were tabulated. Pearson's Correlation Coefficients were used to determine the strength of association between characteristics of sexual aggression and the independent variables. Logistic regression analysis was used to determine the associations between emotional abuse, poor attachment, parent/caregiver instability, and juvenile sex offending. Chi-square analysis was used to determine the goodness of fit among all variables. Goodness of fit refers to an explanation of the differences in groups' scores, or the observed values versus the expected values. It should be noted that data were missing on each variable measure. This may be due to fatigue or a refusal to answer questions. Responses to questions asking about family makeup showed respondents often did not have a father present in their lives and led to missing data for paternal attachment, resulting in smaller sample sizes.

## Results

The total number of assaults was calculated to determine how many sexual assaults were committed by the study population. The 502 respondents admitted to a total of 996 sexual assaults, with a total of 900 victims. The most frequent assault was against female relatives with 29.3% (92/309) of the respondents committing 252 assaults. The most frequently reported type of behavior was fondling, with 64.5% (189/293) of the juvenile sex offenders committing a total of 192 such acts. Table 1 lists the frequency and type of sexual assault.

Table 1

### *Type & Frequency of Sexual Act*

<u>Sexual Act</u>	<u>Offender Group (n/N (%))</u>	<u>Non-offender Group</u>
Fondling	189/293 (64.5%)	3/170 (1.8%)
Oral sex	172/291 (59.1%)	3/170 (1.8%)
Placing their fingers, objects, or penis into victims' private parts	147/290 (44.3%)	2/170 (1.2%)
Exposure	122/291 (41.9%)	4/170 (2.4%)



Watching a sexual act	59/292 (20.2%)	4/170 (2.4%)
Placing victims' fingers, objects or penis into private parts	37/292 (11.1%)	0/170 (0.0%)
Sexual activity with animals	4/292 (1.2%)	0/170 (0.0%)

*Note:* Sample sizes (N) vary due to nonresponse or missing data.

The means and standard deviations for the continuous independent variables of emotional abuse and parental attachment are presented in Table 2. All differences between groups were significant, with the offender group having more experiences with emotional abuse and poorer maternal and paternal attachment (higher scores on the IPPA indicate better attachment; higher scores on the CTQ represent more emotional abuse) than the non-offender group.

Table 2

*Descriptive Statistics for Independent Variables (IV) of Emotional Abuse and Attachment*

Variable	Offender <i>M</i> ( <i>SD</i> )	Nonoffender <i>M</i> ( <i>SD</i> )	TOTAL	<i>M</i> ( <i>SD</i> ) /( <i>df</i> )
Suffered Emotional Abuse	11.6 (6.2)	6.7 (3.3)	10.0 (5.9)	9.3 (476)
Called me stupid	2.5 (1.5)	1.6 (1.1)	2.2 (1.4)	7.0 (473)
Said hurtful things	2.5 (1.5)	1.5 (.90)	2.1 (1.4)	7.8 (469)
Frightened	2.2 (1.5)	1.2 (.64)	1.9 (1.4)	8.1 (475)
Hated me	2.0 (1.4)	1.3 (.80)	1.8 (1.3)	6.2 (472)
Believe I was emotionally abused	2.5 (1.6)	1.3 (.90)	2.1 (1.5)	8.5 (474)
Mom attach	91.3 (25.1)	97.4 (25.0)	93.3 (25.1)	2.5 (461)
Dad attach	82.1 (28.2)	88.4 (27.2)	83.8 (28.0)	2.0 (363)

*Note.* All t-tests were significant at  $p < .05$  comparing offender and non-offender groups.

The descriptive statistics for parental caregiver instability are presented in Table 3. Importantly, the sample sizes for this yes/no question are somewhat reduced as a small subset of respondents answered "Don't Know." This ranged from 13 to 26 respondents depending on the item (this did not occur for two items that had complete data available). In subsequent analyses that used this variable, respondents who answered "Don't Know" were excluded. A series of chi-square tests that were all significant, showing that parental caregiver instability was greater for each of the eight variables for the juvenile sex offender group than for the non-sex offender group.

Table 3

*Descriptive Statistics for Parental Caregiver Instability*

	Offender(n/N,%)	Nonoffender(n/N,%)	TOTAL(n/N,%)	DK(n)	chi <sup>2</sup> (1 df)
Frequent changes	101/321 (30.4%)	22/168 (13.1%)	123/489 (25.2%)	26/489	21.1
Neglect	78/316 (23.5%)	12/166 (7.1%)	90/482 (17.9%)	13/482	22.8
Physical abuse	120/325 (36.1%)	11/168 (6.5%)	131/493 (26.6%)	13/493	52.5
Sexual abuse	94/326 (28.8%)	4/165 (2.4%)	98//491 (20.0%)	16/491	49.5
Illegal acts	155/290 (87.3%)	31/155 (18.2%)	186/445 (41.8%)	0/445	46.5
Hitting/					
Slapping	151/318 (45.5%)	24/161 (14.1%)	175/479 (34.9%)	0/479	48.9
Placed outside	71/323 (22.0%)	21/167 (12.4%)	92/490 918.8%)	16/490	6.5
Lots of moves	128/323 (39.6%)	22/167(13.2%)	150/490 (30.6%)	13/490	37.7

*Note.* All chi-squares were significant at  $p < .05$  comparing offender and non-offender groups. sample sizes (N) vary due to nonresponse or missing data.

The Pearson's correlation values among the 11 independent variables were analyzed. The vast majority of the Pearson's correlations between the independent variables were small to moderate, in the .10 to .30 range. The highest correlated variables in the juvenile sex offender population were between emotional abuse and physical abuse (.58) and emotional abuse and neglect (.55) for the non-offender group.

For the offender group, the highest correlated independent variables were emotional abuse and physical abuse (.57) and emotional abuse and neglect (.52). A few relationships were similarly correlated, most likely due to stronger definitional/conceptual overlap. These correlations may be large, but are not large enough to cause concern for multicollinearity in the logistic regressions analyses that follow (typically requiring correlations above .70–.80).

The highest correlations between the independent variables and the sexual acts committed by the respondents were between emotional abuse and the surreptitious viewing of sexual acts (.193 in the offender sample). Oral sex and emotional abuse (.19), as well as fondling and emotional abuse (.19) in the offender sample, were the next highest correlated acts.

A positive direct linear relationship was found between offender status and emotional abuse ( $r=.343$ ,  $p<.01$ ), parent/caregiver instability variables of witnessing illegal acts in the home ( $r=.323$ ,  $p<.01$ ), experiencing or observing hitting, slapping or punching ( $r=.323$ ,  $p<.01$ ), sexual abuse victimization ( $r=.285$ ,  $p<.01$ ), lots of moves or homelessness ( $r=.281$ ,  $p<.01$ ), physical abuse ( $r=.268$ ,  $p<.01$ ), neglect ( $r=.221$ ,  $p<.01$ ), frequent changes in who lives in the home ( $r=.213$ ,  $p<.01$ ), and being placed outside of the home (foster care, residential placement), ( $r=.192$ ,  $p<.01$ ). A positive linear relationship was also found between offender status and maternal attachment ( $r=.115$ ,  $p<.05$ ), and paternal attachment ( $r=.095$ ,  $p<.05$ ).

Step 1 of a Hierarchical Logistic Regression examined the first research question; “What effect does exposure to emotional abuse have on juvenile sex offending? A point-biserial correlation among the juvenile sex offender group examined the question; “Do juvenile sex offenders experience more emotional abuse and display more severe behavioral difficulties than non-offenders? The final step of the analysis, a second step of a hierarchical logistic regression, looked at the third research question; “What additional effects does caregiver instability and less than secure parental attachment have on juvenile sex offending?”

To answer the first research question, hierarchical logistic regression was conducted in order to examine the relative strength of the variable of emotional abuse in predicting group membership (juvenile sexual offender vs. non-offender). The analysis used the subsample of data for which paternal attachment information was available ( $N=251$ ). The results of the logistic regression are presented in Table 4. Emotional abuse was a significant predictor of sexual offender status ( $p<.001$ ), with 72.9% (183/251) of the cases correctly classified as juvenile sex offenders. The Nagelkerke R-squared for the analysis was .20. A goodness of fit chi-square (Hosmer & Lemeshow test) was not significant at .53, suggesting that the model provided adequate fit.

Table 4

*The Effects of Emotional Abuse on Juvenile Sex Offense Status*Logistic Regression, Step One (N=251)

	Beta	SE	Wald	df	Sig	Odds Ratio (OR)
Emotional abuse	.220	.048	21.181	1	.000	1.245

To answer the second research question, a point-biserial crosstabulation to determine correlations between the acts committed and the identified emotionally abused juvenile sex offenders was used. The intent was to observe if emotionally abused juvenile sex offenders committed more hands-on offense than did the non-emotionally abused juvenile sex offenders. The number of respondents varied from 287 to 290 self-identified emotionally abused juvenile sex offenders. This is due to the fact that respondents did not answer all of the questions in either the CTQ or omitted answers in the demographic questionnaire. All of the sexual acts were highly correlated to the emotionally abused juvenile sex offenders with the exception of sexual activity with animals. A supplementary analysis of the correlation between emotionally abused juvenile sex offenders and the acts or offenses they committed was conducted. This analysis was run to test the relative strength of the correlations between the two variables. The emotionally abused offenders were split into two groups: Low Emotional Abuse and High Emotional Abuse, as determined by the respondents' scores on the CTQ. A score of above 10.5 on each CTQ question indicated a high level of emotional abuse. The hands-on acts of fondling, oral sex, and placing their fingers, penises, or objects into their victims' private parts were highly correlated to the respondents who considered themselves to have suffered both low and high levels of emotional abuse.

To answer the third research question, step two of the hierarchical logistic regression was used and included examining the relative strength of the variables parental attachment (mother and father separately) and the eight parent caregiver instability variables: (a) lots of moves or homelessness, (b) neglect of children, (c) physical abuse, (d) sexual abuse, (e) parents committing illegal acts, (f) children placed outside the family, (g) parents hitting, slapping, or punching children, and (h) frequent changes in who lives at home on sexual offender status along with emotional abuse. The results show that with 75.7% (190/251) of the cases correctly classified, emotional abuse was still a significant predictor of sexual offense status; however, when analyzed in conjunction with parent/caregiver instability variables, "lots of moves" was the strongest predictor of offender status, followed by children placed outside of the home, sexual abuse, and emotional abuse. The parent/caregiver instability variables significantly increased the Nagelkerke R-square to .30. A goodness of fit chi-square (Hosmer & Lemeshow test) was not significant at .749, again suggesting that the model provided adequate fit.

Odds ratios (OR) were computed on all 11 variables and ranked in descending order as predictors of sexual offender status in Table 9. Using a Wald chi-square test for the Beta values, four variables were significant: lots of moves (OR=4.67,  $p<.003$ ), emotional abuse (OR=1.14,  $p<.018$ ), children placed outside the home (OR=2.48,  $p<.046$ ) and sexual abuse (OR=3.37,  $p<.047$ ). Maternal and paternal attachment did not significantly contribute to the model as they were two of the weakest predictors of sexual offender status, with no ability in terms of odds ratios to separate offenders and non-offenders (OR=1).

**Research question one.** What effect does exposure to emotional abuse have on juvenile sex offending?

The statistical analysis showed that the highest direct relationship to offender status was emotional abuse. Indeed, close to 73% of the identified juvenile sex offenders in the study claimed they were victims of emotional abuse. This supported the findings of several researchers, who stated that the presence of emotional abuse and family violence were factors in juvenile sex offender status (Kobayashi, Sales, Becker, & Figueredo, 1995; Righthand & Welch, 2004; Ryan & Lane, 1997). This study's findings were consistent with the results of Ikomi, Rodney, & McCoy (2009), who found that emotional abuse was a strong predictor of juvenile sexual offense status. Williams (2007) found that emotional abuse was one of the strongest predictors of sexual re-offense status in her study on risk factors for juvenile sex offender recidivism. Lee et al. (2002) wrote that juvenile offenders who were emotionally abused were at high risk for such offenses as exhibitionism and multiple paraphilias. The results of the current study supported these findings, in that emotional abuse was highly correlated to such offenses as exposure, or exhibitionism, and the paraphilia of voyeurism, as well as rape, which is defined in many jurisdictions as forcible penis and mouth contact (oral sex) (U.S. Code, Title 18, 2010; State of Delaware, 1998).

**Research question two.** What effect does emotional abuse have on the behaviors of juvenile sex offenders compared to juvenile non-sex offenders?

While the statistical analysis showed that emotional abuse is a strong predictor of offense status with the research population, the idea behind this question was to investigate how emotional abuse affected the actual offending behaviors of the identified juvenile sex offenders. Did emotional abuse predict that the identified juveniles would commit more hands-on or penetrative offenses? The analysis split the identified emotionally abused juvenile offenders into two groups—those who scored high on the CTQ and those who scored lower, with proscribed statistical cutoff points. The self-identified emotionally abused juvenile sex offenders who suffered lower levels of emotional abuse were shown to have committed a large number of hands-on or penetrative offenses. Of the population of lower level emotionally abused juvenile sex offenders, 53.9% fondled, 50.7% forced oral sex, and 45.3% committed rape. The juvenile sex offenders who suffered higher levels of emotional abuse committed more penetrative or hands-on offenses; 74.5% fondled, 66.2% forced oral sex, and 54.7% committed rape.

**Research question three.** What effect does caregiver instability and more disrupted parental attachment have on juvenile sex offenders compared to juvenile non-sex offenders?

The idea behind this question was to examine how a perceived unstable home environment and poor attachment would impact juvenile sex offender status. The results of the analysis found that caregiver instability and emotional abuse were strong predictors of offender status, while both maternal and paternal attachments had little effect and were actually the weakest predictors of offender status in this population. Of the 11 variables included in the analysis, emotional abuse was still a strong predictor of offender status, yet six caregiver instability variables were more robust forecasters of juvenile sex offender status. The strongest predictive variable of offender status was lots of moves or homelessness, followed by sexual abuse in the home; children placed out of the home; neglect by caregivers; observing hitting, punching, or slapping; physical abuse; and finally, emotional abuse. The predictive strength of the variable of homelessness or lots of moves—along with the strength of the physical and sexual abuse, neglect, and hitting slapping, and punching—are consistent with the findings of other researchers, who stated that family violence and instability were often found in homeless situations (Pardeck, 2005; Whitbeck & Hoyt, 1999). The current study found that numerous moves and homelessness, along with sexual abuse, were two of the strongest predictors of offender status. Pardeck (2005) also found that sexual abuse, emotional abuse, and physical abuse had the highest degrees of occurrence in his study of child maltreatment among homeless families. The current study's findings are similar in that all three abuse variables were strong predictors of offender status.

The variables of paternal and maternal attachment appeared to have little effect on the relationship between emotional abuse and juvenile sex offending status in the current study. In the regression analysis, step two, maternal and paternal attachment did not significantly affect offender status as they were two of the weakest predictors in the analysis.

### **Discussion and Practice Implications**

While social workers who work with juvenile sex offenders are often aware of their clients' prior behavior, it is essential to research their thoughts and feelings about their parents and caregivers, as well as their home life, in order to compile a more complete and effective assessment of behavior and risk for re-offense. Having the client admit to behavior and pledge to work on a comprehensive relapse prevention plan means little if the client cannot come to terms with the possible emotional, physical, or sexual abuse he/she may have suffered, or is unable to make sense of an unstable, non-secure, and often chaotic upbringing and home environment. The knowledge of a client's schema of how he/she views intimate affiliations is important to treatment professionals as they attempt to assist clients in working through issues that may have caused them to offend. Equally important is the need to know the impact of an

unsteady and disordered home on the client, as well as the effects of emotional abuse, if the client is to reduce the risk of acting out in the future.

Using a Social Learning Theory perspective, the findings, while concerning, should not be surprising. If a child learns mastery over a situation by re-creating behavior that he/she believes will win them praise, then that juvenile will continue to display such behavior. If a caregiver imparts an emotionally distant and uncaring attitude towards a child, then that child learns to act accordingly in his/her relationships as a method of gaining approval from the parent or caregiver.

The findings of this study can impact a number of social work practice settings. Social workers will need to know not only the factual history of the clients they are working with, but the emotional history of the client as well, given that this study's findings showed that even low levels of emotional abuse correlate strongly with penetrative sex offenses. Foster care social workers will also need to be aware of how to impart the treatment needs of such juveniles to potential care providers. The findings also illustrate a need for those who work in child welfare, homelessness, child abuse, foster care and domestic violence, as well as clinical social workers, to be trained in identifying the effects of emotional abuse and, as found in this study, the possible behaviors emotionally abused at risk youth can present. As stated previously, emotional abuse is rarely the focus of child welfare investigations (Trickett, Mennen, Kim, & Sang, 2009), and a social work assessment that accounts for emotional abuse and its' effects can not only provide a more complete history of the child, it can also direct targeted and more effective, interventions.

Social workers who intervene with youth who are homeless or whose families have lost their housing need to be aware of the effects of such experiences on the client. As this study indicated, homelessness or lots of moves placed a child at risk for juvenile sex offender status. The trauma of losing ones' home, or the instability of not knowing where they will reside, or sleep that evening or what school they will attend, or who their peers are, may offer an unsupervised, and possibly emotionally abused child an opportunity to conduct sexually inappropriate or offensive, behavior. Such a child, whose parents search for housing, or possibly conduct illegal activities, as the results of this study presented, will benefit from an intervention that a social worker, trained in identifying the effects of homelessness, family instability, and emotional abuse can provide.

Designing targeted assessments and interventions for emotional abuse and parent or caregiver instability is one implication of the current study to Social Work practice. A clinical social worker providing service to juvenile sex offenders will assess the client's progress throughout the course of treatment. Juvenile sex offender treatment involves the assessment of the client's feelings towards family members. Assessment of the client's progress in treatment often takes into account dynamic and static factors. Static or historical factors are just that—historical and unchanging. Dynamic factors—such as feelings and thoughts about sex, sexuality, victims, or intimate relationships—can change, and that ability to change, in a positive direction, is a hallmark of successful juvenile sex offender treatment (Fanniff &

Becker, 2006). Dynamic factors can only change when the social worker is aware of the feelings held by the client. While these feelings develop as a result of the offender's life experiences, it becomes critical to understand how the offender arrived at this station in life. As social learning theory states, the juvenile offender learned behavior through modeling, or observation, often times of a parent or caregiver. It is essential the clinician become aware of the possible origins of such deviant or abhorrent activity such as emotional abuse, along with one or more historical factors, such as parent or caregiver instability, in order to assist and effect change with the client and to allow those dynamic factors to become more socially appropriate.

The implications of this study's findings will also impact those social workers who engage with and treat families. It should be noted that the involvement of the family is critical in the treatment of juvenile sex offenders and the prevention of such behavior. Social workers may want to utilize the lens of Social Learning Theory, and to inform their clients or families of the importance of learned behavior and modeling, and the impact on each family member's behaviors. At-risk youths need to be aware of influential factors within themselves and their families that may predispose them to offensive behavior. To that end, if such risk factors are identified within the family constellation, the social worker must then work to assist the juvenile client in developing positive coping mechanisms when the opportunity to offend presents.

The social worker's role is critical in aiding families in identifying which risk factors exist in the home environment, such as many of this study's variables (physical abuse, domestic instability and emotional abuse) in order to establish a warmer and more supportive home and family setting and to reduce the odds of further offensive behavior. It will be important for the family to be aware of how previous family activities or unstable behavior have affected the adolescent's ability to sexually offend (Bischof, Stith, & Wilson 1992).

### **Limitations of the Study**

The study's participants were limited to 332 juveniles considered sex offenders in a large Midwestern state. Therefore, while 332 is a robust number, it would be difficult to generalize the results to the close to 34,000 registered juvenile sex offenders in the United States. It should be noted that the survey was conducted during a 1-day period and may be a brief "snapshot" of how respondents were feeling that particular day.

Secondly, the study was conducted on male adolescents. These results should not be generalized to a population of female juvenile or adolescent sex offenders, whose etiology of offending and treatment needs are markedly different from juvenile males (Elliott, Eldridge, Ashfield, & Beech, 2010; Freeman & Sandler, 2008; Johansson-Love & Fremouw, 2009; Wijkman, Bijleveld, & Hendriks, 2010). Female offenders have been noted to commit fewer offenses than their male counterparts, suffer higher



percentages of sexual victimization, and often offend in conjunction with a partner (Johansson-Love & Fremouw, 2009; Wijkman et al., 2010).

Third, it should be noted that the survey of the respondents was conducted at inpatient facilities throughout the state. Juveniles who were living at home were not included; therefore, while the results were convincing for the effects of emotional abuse and parent and caregiver instability on offender status, it would be a consideration for future research to assess the feelings, thoughts, and emotions of juvenile offenders who are living and interacting with parents or caregivers at the time of survey in order to evaluate perceptions of emotional abuse, parent and caregiver instability, and parental attachment.

Finally, as mentioned earlier, the idea that the IPPA may not be a wholly accurate measure of internalized perceptions of parental attachment merits further exploration. A projective instrument may be a more accurate measure of unconscious or implied representations of attachment (Lehmann, 2008).

### Summary

The relationship between parent and caregiver instability on juvenile sex offender status and emotional abuse on such status has been shown to be quite significant in this analysis. While one can observe an unstable home environment and point out behaviors that can imperil a youth's development and increase his/her risk for offending, it still remains that emotional abuse is often a difficult entity to point out and may have an ethereal, hard to define, quality. Indeed, what is emotionally abusive to one juvenile may be normal family banter to another. Nevertheless, as emotional abuse was qualified and defined to the respondents, the relationship was found to be quite strong; this finding suggests that a home environment that provides little emotional support and warmth may indeed add to the constellation of risk factors that cause a juvenile to sexually offend. Of significant concern to those social workers who assess and treat juvenile sex offenders is that even low levels of emotional abuse may cause a juvenile offender to commit a more serious and damaging penetrative or hands-on sexual offense. This finding has wide reaching impact regarding assessment of risk for sexual offending behavior.

### References

- Armsden, G., & Greenberg, M. (1987). The inventory of parent and peer attachment: Individual differences and their relationship to psychological well-being in adolescence. *Journal of Youth & Adolescence, 16*(5), 427-454.
- Bandura, A. (1977). *Social learning theory*. New York, NY: General Learning Press.
- Bandura, A., & Walters, R. (1963). *Social learning and personality development*. New York, NY: Holt, Rinehart, & Winston.
- Barbaree, H., & Marshall, W., Eds. (2006). *The juvenile sex offender*, (2nd ed.). New York, NY: Guilford.
- Barbaree, H., Marshall, W., & Hudson, S., Eds., (1993). *The juvenile sex offender*. New York, NY: Guilford.

- Becker, J., & Hunter, J. (1997). Understanding and treating child and adolescent sex offenders. *Advances in Clinical Child Psychology, 19*, 177-197.
- Bernstein, D. P., & Fink, L. (1998). *Childhood trauma questionnaire: a retrospective self-report manual*. San Antonio, TX, The Psychological Corporation.
- Bischof, G.P., Stith, S.M., & Wilson, S. (1992). A comparison of the family systems of adolescent sexual offenders and non-sexual offending delinquents. *Family Relations, 41*, 318-323.
- Broach, J., & Petretic, P. (2006). Beyond traditional definitions of assault: Expanding our focus to include sexually coercive experiences. *Journal of Family Violence, 21*(8), 477-486. doi:10.1007/s10896-006-9045-z.
- Brown, A., & Burton, D. L. (2010). Exploring the overlap in male juvenile sexual offending and general delinquency: trauma, alcohol use, and masculine beliefs. *Journal of Child Sexual Abuse, 19*(4), 450-468.
- Bullens, R., van Wijk, A., & Mali, B. (2006). Similarities and differences between the criminal careers of Dutch juvenile sex offenders and non-sex offenders. *Journal of Sexual Aggression, 12*(2), 155-164.
- Burton, D. (2003). Male adolescents: Sexual victimization and subsequent sexual abuse. *Child & Adolescent Social Work Journal, 20*(4), 277-296.
- Burton, D., Miller, D., & Shill, C. (2002). A social learning theory comparison of the sexual victimization of adolescent sexual offenders and nonsexual offending male delinquents. *Child Abuse & Neglect, 26*(9), 893.
- Doyle, C. (1997). Emotional abuse of children: Issues for intervention. *Child Abuse Review, 6*, 330-342.
- Egeland, B. (2009). Taking stock: Childhood emotional maltreatment and developmental psychopathology. *Child Abuse & Neglect, 33*(1), 22-26. doi:10.1016/j.chiabu.2008.12.004
- Elgar, F. J., Knight, J., Worrall, G. J., & Sherman, G. (2003). Attachment characteristics and behavioural problems in rural and urban juvenile delinquents. *Child Psychiatry & Human Development, 3* (1), 35-48.
- Elliott, I. A., Eldridge, H. J., Ashfield, S., & Beech, A. R. (2010). Exploring risk: potential static, dynamic, protective and treatment factors in the clinical histories of female sex offenders. *Journal of Family Violence, 25*(6): 595-602.
- Fanniff, A., & Becker, J. (2006). Specialized assessment and treatment of adolescent sex offenders. *Aggression & Violent Behavior 11*(3), 265-282.
- Felizzi, M. V. (2011). *A study of the relationships among emotional abuse, parent and caregiver instability, and disrupted attachment on juvenile sex offending status*. (Doctoral dissertation). Retrieved from Dissertation Abstracts International.

- Ford, M. E., & Linney, J. (1995). Comparative analysis of juvenile sexual offenders, violent nonsexual offenders, and status. *Journal of Interpersonal Violence, 10*(1), 56.
- Freeman, N., & Sandler, J. (2008). Female and male sex offenders: A comparison of recidivism patterns and risk factors. *Journal of Interpersonal Violence, 23*(10), 1394-1413.
- Garbarino, J. J. (1996). A review of the psychometric properties of selected attachment instruments. Retrieved from ERIC <http://eric.ed.gov/?id=ED395958>.
- Ikomi, P., Rodney, H., & McCoy, T. (2009). Male juveniles with sexual behavior problems: are there differences among racial groups? *Journal of Child Sexual Abuse, 18*(2), 154-173.
- Iwaneic, D. (2003). Identifying and dealing with emotional abuse and neglect. *Child Care in Practice, 9*(1), 49-61.
- Johansson-Love, J., & Fremouw, W. (2009). Female sex offenders: A controlled comparison of offender and victim/crime characteristics. *Journal of Family Violence, 24*(6), 367-376. doi:10.1007/s10896-009-9236-5.
- Jonson-Reid, M., & Way, I. (2001). Adolescent Sexual Offenders: Incidence of Childhood Maltreatment, Serious Emotional Disturbance. *American Journal of Orthopsychiatry, 71*(1), 120.
- Katsiyannis, A., Zhang, D., Barrett, D. E., & Flaska, T. (2004). Background and psychosocial variables associated with recidivism among adolescent males: A 3-year investigation. *Journal of Emotional & Behavioral Disorders, 12*(1), 23-29.
- Kobayashi, J., Sales, B. D., Becker, J. V., & Figueredo, A. J. (1995). Perceived parental deviance, parent-child bonding, child abuse, and child sexual aggression. *Sexual Abuse: Journal of Research and Treatment, 7*(1), 25-44. doi:10.1007/BF02254872
- Lee, J., Jackson, H., Pattison, P., & Ward, T. (2002). Developmental risk factors for sexual offending. *Child Abuse & Neglect, 26*(1), 73-92.
- Lehmann, M. (2008). *Attachment status in juveniles who sexually offend*. (Doctoral dissertation) Retrieved from Dissertation Abstracts International.
- Leibowitz, G. (2007). *Exploring the relationship among dissociation, trauma, and juvenile sexual offending*. (Doctoral dissertation). Retrieved from Dissertation Abstracts International.
- Marshall, W. L. (1989). Intimacy, loneliness and sexual offenders. *Behaviour Research and Therapy, 27*(5), 491-503. doi:10.1016/0005-7967(89)90083-1
- Marshall, W. L., & Mazzucco, A. (1995). Self-esteem and parental attachments in child molesters. *Sexual Abuse: Journal of Research and Treatment, 7*(4), 279-285. doi:10.1007/BF02256832

- Miner, M., & Munns, R. (2005). Isolation and normlessness: Attitudinal comparisons of adolescent sex offenders and non-delinquents. *International Journal of Offender Therapy & Comparative Criminology*, 49(5), 491-504.
- Moor, A., & Silvern, L. (2006). Identifying pathways linking child abuse to psychological outcome: The mediating role of perceived parental failure of empathy. *Journal of Emotional Abuse*, 6(4), 91-114. doi:10.1300/J135v06n04\_05.
- National Center for Missing and Exploited Children (2009). *Sex offenders in the United States, 2008*. [Data file]. Retrieved from; [www.missingkids.com](http://www.missingkids.com) 11/30/13.
- Pardeck, J. T. (2005). An exploration of child maltreatment among homeless families: Implications for family policy. *Early Child Development & Care*, 175(4), 335-342. doi:10.1080/0300443042000244019
- Pavio, S. C., & Cramer, K. M. (2004). Factor structure and reliability of the Childhood Trauma Questionnaire in a Canadian undergraduate student sample. *Child Abuse & Neglect*, 28(8), 889-904. doi:10.1016/j.chiabu.2004.01.011
- Riggs, S., Cusimano, A., Benson, K. (2011). Childhood emotional abuse and attachment processes in the dyadic adjustment of dating couples. *Journal of Counseling Psychology*, 58(1).
- Righthand, S., & Welch, C. (2004). Characteristics of youth who sexually offend. *Journal of Child Sexual Abuse*, 13(3/4), 15-32.
- Ryan, G. (1997). Theories of etiology. In G. Ryan & S. Lane (Eds.), *Juvenile sexual offending: causes, consequences and correction* (2nd ed., pp. 19-35). San Francisco, CA: Jossey-Bass.
- Ryan, G., & Lane, S., Eds. (1997). *Juvenile sexual offending: Causes, consequences, and correction* (2nd ed.). San Francisco, CA: Jossey Bass.
- Schwartz, B., Cavanaugh, D., Pimental, A., & Prentky, R. (2006). Descriptive study of precursors to sex offending among 813 boys & girls: antecedent life experiences. *Victims & Offenders*, 1(1), 61-77.
- Seto, M. C., & Lalumière, M. L. (2010). What is so special about male adolescent sexual offending? a review and test of explanations through meta-analysis. *Psychological Bulletin*, 136(4), 526-575. doi:10.1037/a0019700  
doi:10.1177/0265407509360899.
- State of Delaware (1998, June 11). Section 2. Amend Sections 636(a)(6), 3508(a), 3508(b) and 3509(a) of Title 11 of the Delaware Code. Retrieved from <http://delcode.delaware.gov/sessionlaws/gal39/chp285.shtml>
- Stinson, J., Sales, B., & Becker, J. (2008). *Social learning theories*. Sex offending: Causal

- theories to inform research, prevention, and treatment (pp. 77-91). Washington, DC: American Psychological Association. doi:10.1037/11708-006
- Thornton, J., Stevens, G., Grant, J., Indermaur, D., Charmette, C., & Halse, A. (2008). Interfamilial adolescent sex offenders: family functioning and treatment. *Journal of Family Studies, 14*(3), 362-375.
- Trickett, P., Mennen, F., Kim, K., & Sang, J. (2009). Emotional abuse in a sample of multiply maltreated, urban young adolescents: Issues of definition and identification. *Child Abuse & Neglect, 33*(1), 27-35. doi:10.1016/j.chiabu. 2008.12.003
- United States Department of Justice (2010). United States Code Title 18 Crimes and Criminal Procedures, Chapter 109A, Sexual Abuse. Retrieved from <http://www.students.haverford.edu/masar/documents/>
- United States Office of Juvenile Justice and Delinquency Prevention. (2009). *Juvenile court Statistics, 2006- 2007*. Retrieved from; [www.ncjrs.gov/pdffiles1/ojjdp/223612.pdf](http://www.ncjrs.gov/pdffiles1/ojjdp/223612.pdf).
- van Wijk, A., Blokland, A., Duits, N., Vermeiren, R., & Harkink, J. (2007). Relating psychiatric disorders, offender and offence characteristics in a sample of adolescent sex offenders and non-sex offenders. *Criminal Behaviour & Mental Health, 17*(1), 15-30.
- van Wijk, A. H., Vreugdenhil, C., van Horn, J., Vermeiren, R., & Doreleijers, T. H. (2007). Incarcerated Dutch juvenile sex offenders compared with non-sex offenders. *Journal of Child Sexual Abuse, 16*(2), 1-21.
- Ward, T., Hudson, S. M., & Marshall, W. L. (1996). Attachment style in sex offenders: a preliminary study. *Journal of Sex Research, 33*(1), 17-26.
- Whitbeck, L. B., & Hoyt, D. R. (1999). Nowhere to grow: homeless and runaway adolescents and their families, Retrieved from EBSCOhost.
- Wijkman, M., Bijleveld, C., & Hendriks, J. (2010). Women don't do such things! Characteristics of female sex offenders and offender types. *Sexual Abuse: A Journal of Research & Treatment (Sage), 22*(2), 135-156. doi:10.1177/ 1079063210363826.
- Williams, J. (2007). *Juvenile sex offenders: predictors of recidivism*. (Doctoral dissertation). Retrieved from Dissertations & Theses: Full Text. (No. AAT 3265532).
- Wright, K. D., Asmundson, G. G., McCreary, D. R., Scher, C., Hami, S., & Stein, M. B. (2001). Factorial validity of the Childhood Trauma Questionnaire in men and women. *Depression & Anxiety (1091-4269), 13*(4), 179-183.

**About the Author(s)**

Dr. Marc Felizzi has spent the last 20 years working with and researching children, adolescents, and their families. He has examined the effects of family violence, juvenile violence, and the consequences of family instability on youth. Dr. Felizzi has written extensively on these topics, and his findings and opinions have appeared in local and national publications, and he has been interviewed on a number of national radio and television regarding juvenile violence. Dr. Felizzi is an Assistant Professor in the Department of Social Work at Millersville University, where he teaches Social Work Research and Practice. In addition, he has a thriving clinical practice in Wilmington, Delaware where he works with children, adolescents, and their families.

**Appendix A**

**Demographic Questionnaire**

The first set of questions asks for information about you and your family.

**First Name** \_\_\_\_\_ **Last name** \_\_\_\_\_  
**Unit name** \_\_\_\_\_

**1. How old are you?** \_\_\_\_\_ **years**

**2. In school, what grade did you last complete? (Select one)**

\_\_\_\_ **6<sup>th</sup>**                      \_\_\_\_ **9<sup>th</sup>**                      \_\_\_\_ **12<sup>th</sup>**  
 \_\_\_\_ **7<sup>th</sup>**                      \_\_\_\_ **10<sup>th</sup>**                      \_\_\_\_ **College (how many years? \_\_\_\_)**  
 \_\_\_\_ **8<sup>th</sup>**                      \_\_\_\_ **11<sup>th</sup>**

**3. Which one of the following BEST describes the family you were raised in (PLEASE CHECK ONLY ONE)?**

\_\_\_\_ 1. Two parents                      \_\_\_\_ 4. Mom and partner                      \_\_\_\_ 7. Grandparent  
 mom                      \_\_\_\_ 5. Dad and partner                      \_\_\_\_ 8. Foster home                      \_\_\_\_ 2. Single  
 \_\_\_\_ 3. Single dad                      \_\_\_\_ 6. Other relative

**4. Do these describe your family and/or home?**

	No	Yes	Don't Know
A. Parent with alcohol or drug problem	0	1	2
B. Parent who sold drugs	0	1	2
C. Illness or physical health problems in the family	0	1	2
D. Mental health problems in the family	0	1	2
E. Frequent changes in who lives at home	0	1	2
F. Neglect of children	0	1	2

G. Physical abuse of children	0	1	2
H. Sexual abuse of children	0	1	2
I. Illegal acts by family members (other than you)	0	1	2
J. Hitting, slapping, punching, or other violence between parents or adults at home	0	1	2
K. Children being placed outside the family (not counting you)	0	1	2
L. Lots of moves and/or homelessness	0	1	2
M. Very poor (little money, food, clothes, heat, etc.)	0	1	2

**5. Please check ALL the ethnic or racial groups you belong to.**

1. Black or African American     5. Native American/American Indian  
 2. White or Caucasian                       6. Arab American  
 3. Hispanic or Latino                       7. Other (please list) \_\_\_\_\_  
 4. Asian or Pacific Islander

**6. Please choose the ONE race or ethnic group you feel closest to.**

1. Black or African American     5. Native American/American Indian  
 2. White or Caucasian                       6. Arab American  
 3. Hispanic or Latino                       7. Other (please list) \_\_\_\_\_  
 4. Asian or Pacific Islander

**7. In general, belonging to my ethnic/racial group is an important part of my self image (how I see myself). Please circle your answer.**

<b>Strongly Disagree</b> 1	<b>Somewhat Disagree</b> 2	<b>Somewhat Agree</b> 3	<b>Strongly Agree</b> 4
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**8. How close do you feel to people of your race or ethnic group? Would you say?**

<b>Not Close at All</b> 1	<b>Not too Close</b> 2	<b>Fairly Close</b> 3	<b>Very Close</b> 4
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**9a. Before you were arrested how important was religion in your life? (please circle the number that best represents the importance)**

<b>Not very Important</b> 1	2	<b>Neutral/Mixed</b> 3	4	<b>Very Important</b> 5
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**9b. Since you were arrested how important is religion in your life? (please circle the number that best represents the importance)**

<b>Not very Important</b> 1	2	<b>Neutral/Mixed</b> 3	4	<b>Very Important</b> 5
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**10. During the year prior to your arrest how often did you attend religious services and/or gatherings? Place a check next to the best answer for you.**

1. several times a week                       4. several times a year

\_\_ 2. once a week                                \_\_ 5. never  
 \_\_ 3. once or twice a month

**11. How many times have you... (Place a check in the appropriate box):**

Answer the questions about what you have experienced yourself, not what you have seen on television or in the movies.

	Never	Once or Twice	A Few Times	Many Times
11a. Had somebody threaten to stab you	1	2	3	4
11b. Had somebody threaten to shoot you	1	2	3	4
11c. Had somebody threaten to kill you	1	2	3	4
11d. Been beat up	1	2	3	4
11e. Seen a stranger get shot	1	2	3	4
11f. Seen a stranger get stabbed	1	2	3	4
11g. Seen a stranger being beat up	1	2	3	4
11h. Seen a stranger get killed	1	2	3	4
11i. Seen a relative or friend get shot	1	2	3	4
11j. Seen a relative or friend get stabbed	1	2	3	4
11k. Seen a relative or friend get beat up	1	2	3	4
11l. Seen a relative or friend get killed	1	2	3	4
11m. Seen somebody get arrested	1	2	3	4
11n. Seen a gun in your home	1	2	3	4
11o. Heard guns being shot (not when hunting animals)	1	2	3	4
11p. Seen people having sex	1	2	3	4

**12. Please indicate how many of each of these types of out of home places you may have lived or received services from. Place a number on each blank to indicate how many placements you have had at that sort of place (Example: 3 Foster Care, if you have lived at three foster homes)**

- \_\_ A. Foster Care with strangers (not relatives)
- \_\_ B. Foster care with relatives
- \_\_ C. Group Home
- \_\_ D. Locked detention or assessment facility
- \_\_ E. Residential treatment program
- \_\_ F. Outpatient treatment program
- \_\_ G. Residential substance abuse treatment program
- \_\_ H. Community substance abuse program
- \_\_ I. Other: \_\_\_\_\_

**13. How much time in total have you served in facilities previous to this stay?**

\_\_\_\_\_ Years                          \_\_\_\_\_ Months

**14. Are you on any medicine prescribed by a psychiatrist?**

(1) Yes                          (0) No

**15. Have you begun taking part in a sex offender treatment group?**

(1) Yes                          (0) No



**15a. If so, how long have you been in this group (total)?**

\_\_\_\_ Years                      \_\_\_\_\_ Months

**16. How many people sexually abused you?**

<b>Gender/ Age Group</b>	<b>Children</b>	<b>Teens</b>	<b>Adults</b>
<b>Males</b>	#	#	#
<b>Females</b>	#	#	#

**17. How much do you agree with the following statements (mark a spot with an X)?**

	<b>Never (1)</b>	<b>Sometimes (2)</b>	<b>Usually (3)</b>	<b>Most of the time (4)</b>	<b>Always (5)</b>
a. "I used/abused drugs before my criminal offenses."	(1)	(2)	(3)	(4)	(5)
b. "I used/abused alcohol before my criminal offenses."	(1)	(2)	(3)	(4)	(5)
c. "I used/abused drugs after my criminal offenses."	(1)	(2)	(3)	(4)	(5)
d. "I used/abused alcohol after my criminal offenses."	(1)	(2)	(3)	(4)	(5)
e. "I looked at pornography just before my criminal offenses."	(1)	(2)	(3)	(4)	(5)
f. "I looked at pornography right after my criminal offenses."	(1)	(2)	(3)	(4)	(5)
g. "I spent a lot of time planning my criminal offenses."	(1)	(2)	(3)	(4)	(5)
h. "I felt guilty about my criminal offenses right after committing them."	(1)	(2)	(3)	(4)	(5)

**18. Have you ever been in a healthy (consensual) romantic relationship?**

\_\_\_(1)\_\_\_ Yes                      \_\_\_(0)\_\_\_ No

**19. Have you ever committed murder? \_\_\_(1)\_\_\_ Yes                      \_\_\_(0)\_\_\_ No**

**20. If you have ever committed murder, was any person whom you murdered someone you also sexually offended against? \_\_\_(1)\_\_\_ Yes                      \_\_\_(0)\_\_\_ No**

**22. How much have you been sexually excited by the following?**

	<b>Not at all</b>	<b>A little bit</b>	<b>Somewhat</b>	<b>A lot</b>	<b>A great deal</b>
<b>a. Females under age 12</b>	0	1	2	3	4
<b>b. Females between 13-18</b>	0	1	2	3	4
<b>c. Males under age 12</b>	0	1	2	3	4
<b>d. Males between 13-18</b>	0	1	2	3	4
<b>e. Masturbating in public</b>	0	1	2	3	4
<b>f. Obscene phone calls</b>	0	1	2	3	4
<b>g. Peeping at others without them knowing it</b>	0	1	2	3	4

<b>(voyeurism)</b>					
<b>h. Rape</b>	0	1	2	3	4
<b>i. Rubbing your genitals on people without their permission (frottage)</b>	0	1	2	3	4
<b>j. Sex with animals (bestiality)</b>	0	1	2	3	4
<b>k. Sexual pain for yourself (masochism)</b>	0	1	2	3	4
<b>l. Sexual pain of others (sadism)</b>	0	1	2	3	4
<b>m. Showing your body to others without their permission (exhibitionism)</b>	0	1	2	3	4
<b>n. Underwear</b>	0	1	2	3	4
<b>o. Your own sexual abuse (if you were sexually abused as a child)</b>	0	1	2	3	4

**22. Were you sexually abused as a child? (1) Yes (0) No**

**23. Were you ever told to abuse someone else, by a third person (for example, your uncle asked you to abuse your sister/brother)? (1) Yes (0) No**

**24. How many people have you sexually abused?**

<b>Gender/ Age Group</b>	<b>Children</b>	<b>Teens</b>	<b>Adults</b>
<b>Males</b>	#	#	#
<b>Females</b>	#	#	#