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# Following Adolescents Adjudicated for Sex Offenses: How Many Are Found on a State Sex Offender Registry?

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There is a paucity of research that has followed male youth who are adjudicated for sex offenses to examine if they committed sex crimes as adults that resulted in them being placed on a sex offender registry. A recent 27.5-year longitudinal study (Caldwell & Caldwell, 2022) examined sexual recidivism of 2,060 adolescents (i.e., 349 adjudicated for sex offenses and 1,711 adjudicated for nonsexual misconduct) who had been released from secure custody settings. Findings showed the odds of future felony sex offense charges for youth adjudicated for sex offenses declined at age 18 through their mid-20s. Sexual recidivism (defined as a new charge for a felony sex offense) was 10.34%, lower than recidivism rates (defined as a new charge or conviction for a sex offense) reported in Harris and Hanson's (2004) meta-analysis on 10 studies of adult sex offenders (i.e., 14% after 5 years, 20% at 10 years, and 24% at 15 years).

Youth who are sexually abusive differ by risk level, with those who are the highest risk being the most prone to commit serious sex crimes. Fortunately, there are *very few* youths who commit egregious, potentially lethal sex crimes that are sexually violent (e.g., rape with a weapon, kidnapping), and/or sexually violent and predatory (i.e., targeting a victim who is a stranger) (Miccio-Fonseca & Rasmussen, 2015). Typically, such dangerous youth would be placed in correctional settings; however, residential facilities sometimes inadvertently provide services for such youth when facilities that are more secure (i.e., correctional) are not available.

The author recently completed a 15-year, 9-month longitudinal study of a sample of 145 male adolescents adjudicated for sex offenses mean follow-up = 12.68 years); their mean age today is 29.54 years. At the time of the launching of the study, subjects were in a secure residential facility in the community located in Northern California. Youth were followed into adulthood to their late 20s and early 30s to see if they committed sex crimes as adults that resulted in them being placed on the California Megan's Law Sex Offender Registry (Rasmussen, 2022).

The study was initiated at a time of significant change in California state policies and protocols for youth in custody. Many programs, including secure facilities, were closing, resulting in youth who previously would have been placed in correctional settings being placed in secure residential settings. The sample thus contained a large percentage of youth who had engaged in very serious sexually abusive behaviors, as evidenced by risk assessment findings showing 43.4% scored at *Very High Risk* on the *MEGA*<sup>2</sup> risk level tool. The *Very High Risk* level, according to the author of *MEGA*<sup>2</sup>, "implies risk is likely at very critical levels, requiring immediate intervention" (Miccio-Fonseca, 2019, pp. 462). Such youth "may present a danger to self and/or others, possibly to lethality levels (i.e., sexually violent, and predatory sexually violent behaviors)" (pp. 462-463).

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### Sample

In the study sample of 145 male youth, 129 were previously followed by the author for 6 years while they were in the residential program (mean follow-up = 15.6 months, SD = 9.78). For the current study, 25 subjects who were in the residential program during the same period were added to the sample, while 9 of the original sample were excluded due to lacking the information needed for follow-up. Age range of the sample was 10.69 to 18.5 years (mean age = 15.7, SD = 1.51) when admitted to the secure residential program, and 10.69 to 19.0 years (mean age = 16.87, SD = 1.59) when discharged. At the end of the 15-year, 9-month follow-up (mean follow up = 12.68 years, SD = 1.71), age of subjects ranged from 24.03 to 34.26 years (mean age = 29.54, SD = 2.26). The sample was diverse: 24.1% African American, 18.6% Hispanic, 8.3% other ethnicities (i.e., Asian-American, Native American, multiracial, unknown) and 49% White.

### Procedure

Archival data were gleaned from the case files at the secure residential facility. Included were risk assessment findings on two contemporary risk assessment tools: *JSORRAT-II (Juvenile Sexual Offender Recidivism Risk Assessment Tool -II* [Epperson et al., 2006; Epperson & 2009, 2010, 2013]); abuse variables (i.e., history of physical abuse, sexual abuse, child neglect/emotional abuse, and/or exposure to domestic violence); and discharge data (i.e., whether the youth completed the program, was discharged due to a move to another area, or transfer to another program, or did not complete the program due to committing a serious violation of program rules, which could include reoffending with a new sexual behavior deemed by the program to be serious). The author's previous 6-year study of the 129 subjects in the sample who all had risk level findings on the *MEGA* found that 17.4% reoffended, that is they engaged in a new sexual behavior serious enough that the program contacted the youth's probation officer (Rasmussen, 2017).

#### Sexual Recidivism

To examine long-term recidivism for the present study, the author opted to use a narrow, restricted predictive variable – placement on the California Megan's Law Sex Offender Registry. Sexually abusive individuals are only placed on a sex offender registry if they were convicted of specified sex crimes requiring registration. Thus, those identified as being on the registry can undeniably be identified as sexual recidivists.

Enacted in 1996 Penal Code § 290.46., California's Megan's Law "mandates the California Department of Justice (CA DOJ) to notify the public about specified registered sex offenders" (State of California, Department of Justice, Office of the Attorney General, California Megan's Law Website, https://www.meganslaw.ca.gov/Default.aspx). The law designates specific sex crimes requiring registration. Included are: rape of a person unconscious of the nature of the act, or prevented from resisting by an intoxicating or controlled substance (when the offender knew or reasonably should have known this was the case); rape accomplished by threat of retaliation (e.g., by kidnapping, false imprisonment, bodily injury; or death); threatening to use the authority of a public official to incarcerate,

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arrest, or deport the victim (when the victim reasonably believes the offender is a public official); or sodomy of a child over age 14 against the victim's will by use of force, violence, menace, or duress; sodomy of a child under age 14; oral copulation of a minor under age 18; and lewd and lascivious act on a child under age 14, with the intent of arousing, appealing to, or gratifying the lust, passions, or sexual desires of that person or the child; and producing sexually exploitive video and/or computerized images (see:

http://leginfo.legislature.ca.gov/faces/codes\_displayText.xhtml?chapter=5.5.&part=1.&lawCode=PEN&ti tle=9).

At the end of the 15-year, 9-month follow-up, the author entered the name of each subject on the search function of the California Megan's Law Sex Offender Registry Website

(https://www.meganslaw.ca.gov/). If the name was found, the date of birth and the county where the subject resided when referred to the residential program were used to ensure accurate identification of the subject.

Time to recidivism was operationalized as the number of years between the discharge date and the last day of the year of last conviction listed on the California Megan's Law Sex Offender Registry Website. Risk assessment results were listed on the website for many offenders. Date of the last risk *Static-99/99R* risk assessment was therefore used to calculate follow-up when there was no conviction date listed. One subject had missing data on the year of last conviction, and did not have a risk assessment, so was not included in the recidivism analysis.

#### Results

Sexual recidivism, defined by the subject being found on the California Megan's Law Sex Offender Registry Website, was 6.2% (n = 9). Recidivists were arrested and/or convicted of diverse sexual crimes spanning a full spectrum of sex offenses, from indecent liberties to rape. Violent sex crimes were committed by 56.7% of the sample (i.e., assault with intent to commit a specified sex offense, sexual battery, oral copulation by force or fear, rape by force or fear).

Time to recidivism ranged from 2.91 to 10.58 years (mean time to recidivism = 7.91 years, SD = 2.72). Age at recidivism ranged from 20.25 to 29.03 years (mean age = 24.23 years, SD = 2.74).

The nine recidivists differed from the non-recidivists (n = 136) in that they were slightly younger when they entered the program and when discharged. They spent significantly less time in the residential time (mean time in program = 6.94 months, SD = 6.61 for recidivists, and 14.37 months, SD = 9.59 for nonrecidivists). They were more likely to have been terminated from the program (44.5% for recidivists; 40% for non-recidivists). Recidivists had a longer follow-up period, from discharge from the residential program to the end of the study (mean follow-up = 13.15 months, SD = 1.90 for recidivists; 12.65 months, SD = 1.70 for non-recidivists).

The ethnicity of the recidivists contrasted markedly from the non-recidivists; 55.6% of the recidivists were African American, 33% Caucasian, and 11.1% Asian American, while only 22.1% of the non-

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recidivists were African American, 50% Caucasian, 22.1% Hispanic; 6.6% Asian America and .7% other. Notably, there were no Hispanic recidivists.

#### **Discussion and Implications**

The nine recidivists in this study were a unique cohort that had several commonalities differentiating them from the rest of the sample. The fact that recidivists were slightly younger at admission and discharge than non-recidivists is an intriguing finding, perhaps suggesting the presence of unique risk factors in their early development.

Other research has affirmed early onset of sexual offending to be salient. McKillop et al. (2020) compared age groups of 354 males who sexually abused children according to the onset of their sexually abusive behaviors. Those who were adolescents (10 to 17 years) when they began sexually offending were significantly more likely to have prior youth justice involvement than those offenders who began as emerging adults (18 to 25 years), or later adulthood (over 26 years). Offenders in the adolescent-onset group were also significantly more likely to have a history of non-sexual abuse (i.e., neglect, physical abuse, emotional abuse) than the other two groups.

In terms of prior experiences of victimization, the nine recidivists in the current study were much less likely to have been sexually abused than the non-recidivists (22.2% versus 53.7%). They were also less likely to have been physically abused (44.4% versus 51.4%); however, slightly more likely to have experienced exposure to domestic violence (57.1% versus 56.1%); and much more likely to have experienced neglect (85.7% versus 64%).

The facility where the study took place was a recognized state-of-the-art secure residential facility that provided comprehensive assessment and multi-faceted treatment, including cognitive-behavioral therapy, skills groups, and trauma treatment for youth with prior experiences of abuse. It is reasonable to assume that the nine recidivists likely received some benefit from the program; the structure alone of a comprehensive residential program is helpful to many youths who have chaotic family backgrounds and adverse childhood experiences. The fact that the program was trauma-informed was also important given the recidivists had a significant history of child neglect, and more than half were physically abused or exposed to domestic violence.

The recidivists, however, spent only half as long in the residential program as the non-recidivists (close to 7 months versus 14 months). More recidivists were terminated from the program (i.e., 44.4% recidivists, 40.4% non-recidivists). Termination from the program occurred if the youth recidivated (i.e., engaged in another sexual behavior serious enough that the program contacted the youth's probation officer), or committed a major infraction of program rules (Rasmussen, 2017). It may be that the recidivists were perhaps more antisocial and less rule abiding than the non-recidivists.

According to the *Practice Guidelines for Assessment, Treatment, and Intervention with Adolescents Who Have Engaged in Sexually Abusive Behavior* of the national organization, Association for the Treatment of Sexual Abusers (ATSA), "To be most successful, the level of intensity and restrictiveness of services must match the current treatment and supervision need" (p. 41). "Dose" of treatment is defined in the

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report of the 2010 Safer Society North American Survey of treatment programs (adolescent and adult) as: "type, amount, frequency, and duration of treatment services" (McGrath et al., 2010, p. 79). Perhaps the recidivists would have benefited from more time in the program. They may have had treatment needs that might have required "a higher dose"; that is, perhaps they needed more time in the program to have sufficient benefit. It is also possible that the recidivists may have needed a different type of treatment that more closely mirrored their idiosyncratic risk factors.

The recidivists had a longer mean follow-up period from discharge to the end point of the study than the non-recidivists (13.15 years versus 12.65). On average, they were in the community for several years (mean time to recidivism = 7.91 years, SD = 2.72) before committing a sex crime requiring registration. Though not generalizable beyond this small sample, this finding is instructive and suggestive of low recidivism (i.e., recidivism was an infrequent event).

The recidivism findings speak to the need for longitudinal research on this population. Longitudinal studies that follow adjudicated adolescents as they transition into adulthood and age through their 20s can potentially identify patterns of sexual recidivism and points in time when they are most vulnerable to repeating abusive behavior. Program administrators and policy makers might use information derived from such research to create and fund preventive and educative resources for adjudicated youth as they transition to adulthood, and for young adults with a history of committing sex crimes as juveniles.

Much of the literature on youth who are sexually abusive focuses on assessment, treatment, and management, with little focus on prevention. Curriculum in residential programs need to help the youths develop life skills, to include aftercare services to reinforce what was learned. It is reasonable to assume that when these subjects were young adults (age 18 to 25), they might have benefited from supportive services as they took on the responsibilities of adulthood (i.e., living independently, obtaining employment or job training, involvement in relationships, parenting children).

These subjects were likely impacted to some unknown degree both by having a history of sexual offending as adolescents and spending time in a secure residential facility. They may have lost important connections with extended family or friends, were pejoratively labeled as "a sex offender", and/or they and/or their family may have been harassed by people in their community. Aftercare services might have assisted them in coping with these stressors, potentially increasing protective factors, which in turn might have decreased the risk to reoffend.

To the author's knowledge, this is the only study that has followed adolescents adjudicated for sex offenses into adulthood and used placement on a sex offender registry as an adult as a measure of sexual recidivism. The author searched several library databases (APA Psych Info, APA Psych Articles, Criminal Justice Abstracts, Pub Med, Academic Search Premier, and ERIC) using the keywords recidivism, sex offender registry, adolescent sex offenders, juvenile sex offenders, and sexually abusive youth. The studies located on sex offender registration were not relevant to to this study. They focused on the immediate and long-term effects of registration, with one retrospective study (Vandiver, 2006) reporting on adults on a sex offender registry who first sexually offended as juveniles.

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Given there were no longitudinal studies located that used sex offender registration as a predictive variable, it is not unreasonable to consider that the 6.2% recidivism rate found in this study may be a starting point, a benchmark toward regarding establishing a baseline recidivism rate for youth who are followed into adulthood and are found on a state sexual registry. Individuals who are sexually abusive are only placed on a sex offender registry if convicted of specified sex crimes defined by statute as requiring registration. It is not unreasonable to assume that if the author had elected to use a new arrest or charge for a sex crime as the predictive variable, the recidivism rate may well have been higher.

Studies have consistently shown that sexually abusive individuals have low rates of recidivism (i.e., less than 15%, with adolescents having lower recidivism rates than adults). Caldwell's (2016) meta-analysis of 106 studies of adjudicated adolescent sex offenders found a weighted mean sexual recidivism rate of 4.97% for a mean follow-up of 62.06 months, while Harris and Hanson's (2004) meta-analysis of 10 studies of adult sex offenders showed a 15% recidivism rate for a comparable time frame (5 years).

The findings on offender recidivism, however, are at odds with victimization data gleaned from victims through large scale surveys (e.g., National Crime Victimization Survey). Extrapolating from these data, the *Rape, Abuse, and Incest National Network (RAINN)* asserts, "Every 68 seconds an American is assaulted and every 9 minutes, that victim is a child." *RAINN* data indicate that 15% of alleged perpetrators are age 17 and younger, and 9% are 18 to 20. Data obtained from victims suggest that the actual recidivism rate of sexually abusive individuals (adult or adolescent) may be substantially higher that the recidivism rate documented in empirical studies, including meta-analysis (e.g., Caldwell, 2016; Harris & Hanson, 2004).

This study contributes to the literature on longitudinal research on male adolescents adjudicated for sex offenders who go on to commit serious sex crimes in adulthood. Indeed, for more than half the recidivists (55.6%), the crimes listed on the California Megan's Law Sex Offender Registry Website were sexually violent (e.g., rape, oral copulation by force or fear, sexual battery).

#### Conclusion

As noted above, to the author's knowledge, this is the only study in the literature of a cohort of male adolescents who were adjudicated for sex offenses, followed into adulthood (20s and 30s), and examined as to whether they were placed on a state sex offender registry. There may have been subjects in the sample who committed sex crimes but were not required to register, either because the sex crime committed was not one of those specified as requiring registration, or because they met criteria to be excluded from the California Megan's Sex Offender Registry. The Registry Website lists the criteria for a sex crime to be excluded from registration requirements (see https://www.meganslaw.ca.gov/SexOffenders SummaryOfLaw.aspx).

The California Megan's Law Sex Offender Registry Website is limited as a data source. Information posted on the website may not be current, due to protracted judicial processes, failure of offenders to notify placement of a change in address, and clerical delays in making updates. Data from official crime records are likely more comprehensive and reliable. However, the study was self-funded; the author

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was not connected to a state or county correctional or law enforcement institution offering detailed information about the crimes committed, as well as information on victims.

Conducting an Internet search of the California Megan's Law Sex Offender Registry Website provided an objective method for identifying recidivism of sex crimes. The study adds to the limited longitudinal research on adolescents adjudicated for sex offenses as they transition to adulthood and age to their early 30s.

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