

Treatment of Sexually Compulsive Adolescents

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- Sexual addiction • Sexual compulsivity • Adolescent sexuality
- Treatment of sexual addiction

Various authors have discussed society's contradictory treatment of sexuality.^{1,2} On the one hand, although it has been more than 100 years since Freud enlightened Western society about childhood sexuality, children are still kept relatively ignorant about sex. There is rarely any comprehensive teaching of children to help them anticipate and understand their sexual responses. On the other hand, every adolescent is exposed to a barrage of differing messages about sexual behavior from politicians, clergy, television, music, movies, and so forth. Messages from the conservative spectrum of society promote abstinence and traditional religious values. While not all of these present sexuality as evil, or as urges to be suppressed, they do promote rigid guidelines of acceptable behavior.

Adolescents are also exposed to cultural messages that seem to promote hedonism. Implicit and explicit messages about sexuality often objectify women and present an expectation of "hypermasculinity" for males. The two messages portrayed offer polarities. Information about intimacy, responsibility, and realistic sexual encounters is largely absent. Still, individuals are expected to emerge from adolescence with a healthy sexual maturity and a capacity for intimacy.

This is the cultural context in which we consider the term "sexually compulsive adolescent." This term itself might have different meanings to different people. Typically, the term would refer to male adolescents and illegal sexual behaviors. In the past 25 years this population has received considerable attention reflected in the media coverage of sexual crimes, the creation of laws to contain those deemed "sexually dangerous persons," and the development of treatment programs for this population. These trends are based on assumptions that tend to cast the abusive youth as a young adult offender, a predator who is resistant to change.

Letourneau³ describes the movement toward harsher treatment of adolescent sex offenders to be based on three false assumptions: that there is an epidemic of juveniles committing sex offenses, that juvenile offenders are more like adult sex offenders than

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other juvenile delinquents, and that in the absence of specific treatment, juvenile sex offenders are at high risk to re-offend. The author states that the research bears out none of these assumptions. In addition, these assumptions ignore the developmental factors present in adolescence.

Further, sexually abusive males are likely to not be sexually compulsive. For example, in a research study on incarcerated adult offenders, Marshall and Marshall⁴ found 35% of the incarcerated population to be sexually compulsive whereas only 12.5% of the outpatient population was sexually compulsive. One would then expect this would be the same or lower for adolescent offenders. Another study on juvenile sexual abusers cited the rate of recidivism in treated offenders to be less than 8% while in untreated offenders it rose to 19%. Although significant, this does suggest that even without treatment more than 80% of juveniles arrested for sexual offenses were not re-arrested in the follow-up period. This contradicts the belief that the majority of adolescent offenders are compelled to sexually abuse others.

Remember also that adolescence is a period of dramatic transition in which sexual maturation is a central component. Changes in the body, brain, and hormones challenge each individual's coping skills. "Practicing," including practicing roles in relationships and becoming familiar with sexual interests, desire, and arousal, is an important developmental task during this period. Adams and Montemayor⁵ identify autonomy, intimacy, and sexuality as core components of adolescent development. Erikson⁶ noted that sexual behaviors in adolescence are often not driven entirely by a need for sexual gratification. Practicing, seeking acceptance from peers, and building self-worth more commonly motivate sexual behaviors.

In O'Brian and Bera's⁷ typology of juvenile sex offenders, they refer to one group of offenders as peer influenced: youths who engage in abusive sexual acts to gain peer approval, as in gang activity. There is also a group referred to as "naïve" offenders. These individuals are motivated by their increasing sexual curiosity in adolescence and may also be socially isolated.

SEXUALLY COMPULSIVE ADOLESCENTS: WHO ARE THEY?

The term sexual compulsivity, as discussed in the literature, refers to a broad group of adolescents in which males who commit sexual crimes are but one component and may not be sexually compulsive. As with adults, there is no DSM designation for sexual addiction or compulsive behavior in adolescence. The criteria for adolescents are the same as for adults, although the behaviors may likely be forming rather than established, ingrained patterns of behavior. The criteria for sexual compulsivity is generally thought to include a pattern of out-of-control behaviors; a person risking or suffering consequences as a result of these sexual behaviors; an inability to stop despite the adverse consequences; the use of sexual behavior or fantasy as a primary way of coping; an increasing need to heighten the level of stimulation; inordinate amounts of time spent engaging in sex or seeking sexual encounters; and the neglect of other areas of life such as occupational, academic, recreational, and social activities.

In addition, the same levels of behaviors apply to adolescents as well as adults. Some behaviors may be excessive but socially acceptable, such as masturbation, pornography, and prostitution. Then there are the activities referred to as "nuisance behaviors" that include exhibitionism, voyeurism, and sexual phone calls. Last, there is the level of overtly abusive and dangerous behaviors such as child abuse and sexual assault.

The term sexually compulsive adolescent usually refers to sexually abusive males, but there are those who present clinically who meet all of levels of the behaviors

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