



Juvenile sex offenders: Personality profile, coping styles and parental care



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ARTICLE INFO

Article history:

Received 31 March 2015

Received in revised form

21 July 2015

Accepted 22 July 2015

Available online 23 July 2015

Keywords:

Juvenile Sexual Offenders

Juvenile Sexual Non Offenders

Sex crime personality profile

Coping styles

Parental care

ABSTRACT

In recent years, there has been an increasing interest in juvenile sex offenders showing that this population is highly heterogeneous. The aim of the present study was to identify possible different profiles that could help understand the motivation behind offending, comparing 31 Juvenile Sexual Offenders (JSOs), 31 Juvenile Sexual Non Offenders (JNSOs) and 31 Juvenile Non Offenders (Control Group). A data collection form, the Minnesota Multiphasic Personality Inventory-Adolescent (MMPI-A) or Minnesota Multiphasic Personality Inventory-2 (MMPI-2), the Coping Inventory for Stressful Situations (CISS) and the Parental Bonding Inventory (PBI) were administered to all participants. The results show that JSOs differs from JNSOs in some domains, such as living in single-parent homes, while maintain some common aspects such as academic failure and previous sexual intercourse. Moreover, JNSOs showed more abnormal personality traits, such as Authority Problems, MacAndrew Alcoholism, Acknowledgement and Alcohol-Drug Problem Proneness compared to JSOs and the Control Group, while JSOs and JNSOs use a coping strategy more oriented to Avoidance and Distraction compared to the Control group. Finally, JSOs described the relationships with fathers characterized by higher care and protection than JNSOs. These findings provide additional evidence with respect the prevention and treatment of criminal sexual behavior in adolescent.

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1. Introduction

In recent years there has been an increasing interest in juvenile sex offenders (JSOs) showing that this population is highly heterogeneous and diversified on many accounts (e.g. sex and age of the victims, psychological and developmental characteristics of the perpetrator, family and social environment in which the offense occurs) (Gamache et al., 2012). In the USA, about 30–50% of child sexual abuse cases, 56% of child molestation cases and 20–30% of rape cases are attributed to young people under the age of 18 years (Lowenstein, 2006; Vandiver, 2006). In Europe, the countries with a higher percentage of JSOs seem to be Lithuania with 24.4%, France with 21.6%, Norway with 18.8%, and Italy with 5% (Merenda and Mufali, 2012). Clinical and forensic data shows that there is a significant difference between sex crimes committed by adults and those committed by minors. The spectrum of

sexual offenses in childhood and adolescence includes both behaviors with physical contact (frottage, fondling, groping and all aggressive sexual acts with penetration) and without physical contact (exhibitionism, voyeurism, obscene phone calls) (Shaw, 1999).

Although originally formulated to explain adult sexual offending, several multifactorial theories provide a useful framework for studying adolescent sexual offending. These theories suggests that sex offenders should differ from other offenders on measures of different individual (genetic and environmental) risk factors (Hall and Hirschman 1991, 1992; Marshall and Barbaree, 1990; Ward et al., 2006). These theories are sometimes vague about the specific predictions that one could make regarding differences between sex offenders and other types of offenders. Thus, the issue of JSOs remains a complex phenomenon due to a multiple risk factors that includes individual and environmental factors that interacting with each other may have causal impact. In the present study, we focus on personality profile, coping styles and parental care of JSOs.

Characteristics of personality such as impulsivity, aggression,

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extroversion, and low conscientiousness were all found to be related to delinquency in JSOs (Jolliffe et al., 2013; Mak et al., 2003; Veltri et al., 2009). Finding differences in personality between JSOs and other populations could help in understanding the motivation behind offending, as well as indicators of future offending. Identifying personality differences could also lead to the creation of more appropriate treatments as well as a better understanding of the possible responses to or outcomes of treatments (Heighes, 2014).

Previous evidence suggests that a relationship exists between sexual offending behaviors and coping deficits (Becker and Hunter, 1993) however, studies related to coping skills and how they relate to patterns of sexual offending are rare. Coping style may be understood as the cognitive and behavioral strategies individuals employ in response to stress (Compas et al., 2001). The possibility that JSOs actually use sexually related activities as a coping strategy to alleviate negative emotional states is one aspect of sexual offending, which has not yet been examined.

Different studies link parental care with high levels of psychological distress, which leads to delinquency (Chambers et al., 2001; Wittenborn, 2002). Good parenting and strong families can, in fact, help to protect children from developing aggressive behaviors. Despite the value of the above research findings, the link between the quality of adolescent sexual offenders' interactions with their caregivers in juvenile offenders is not well understood.

For this reason, the aim of present study was to evaluate the personality profile, coping and parenting styles comparing JSOs, Juvenile Sexual Non Offenders (JSNOs) and Juvenile Non Offenders (Control Group) in order to identify possible different profiles that could help to understanding the motivation behind offending, as well as a better understanding of possible target for specific treatments.

2. Methods

2.1. Participants

The sample consisted of 93 male participants, with an age range from 14 to 20 years, divided into three groups: JSOs, JSNOs and Control group.

The JSOs group consisted of 31 participants convicted of sexual offenses (sexual touching offense, oral-genital contact, pornographic material, physical aggression and psychological and verbal offenses).

The JSNOs group included 31 participants convicted of different type of offenses (e.g. offense against the person, against property) but with no history of sexual offenses.

The JSOs and JSNOs were included in the Italian probation system and were enrolled in the study within 2 years of the crime. The purpose of offender probation is to safely supervise youth charged with criminal conduct in the least restrictive placement, to promote the growth and maturation of the minor and to promote the reconciliation between the offender and the victim. The JSOs and JSNOs with previous psychiatric disorders were excluded from the study because the Italian justice system considers a suspect not punishable if he/she was suffering from a psychiatric disorder at the time of committing the offense.

The control group consisted of 31 participants who never had contact with the Italian Juvenile Justice. The control group was recruited from schools located in Puglia. We selected a random sampling, based on the availability of parents or subjects to participate in the study.

2.2. Procedure

The research project was authorized by the Research Office of Juvenile Justice Section of the Ministry of Justice of the Italian State. The study was conducted by the Child Neuropsychiatry Unit, Psychiatry Unit and Section of Criminology and Forensic Psychiatry of the University of Bari.

The JSOs, JSNOs were recruited during the period between February 2012 and May 2014, in the Social Services Offices of Juvenile Justice of Puglia (Italy). The JSOs and JSNOs had been preliminarily contacted by the caseworker of the Juvenile Justice Office who gave information about the aims of the study. The control group was recruited in schools of Puglia during the same period. A written informed consent was obtained from all participants in addition to parental consent for adolescents under 18 years of age.

2.3. Assessment

A data collection form was used to characterize the study subjects. This included the following information: age, sex, educational qualification (elementary school, middle school, high school), academic failure, criminal records, previous sexual intercourse (prior to sexual offenses), family unit (nuclear or single-parent family) and offense types (Sexual toucher offense, oral-genital contact, pornographic material, physical aggression, psychological and verbal offenses, group or individual offense).

The assessment included the administration of clinical standardized scales including the Minnesota Multiphasic Personality Inventory-Adolescent (MMPI-A) (Butcher et al., 1992) or Minnesota Multiphasic Personality Inventory-2 (MMPI-2) (Butcher et al., 1989), the Coping Inventory for Stressful Situations (CISS) (Enderler and Parker, 1999) and the Parental Bonding Inventory (PBI) (Parker et al., 1979).

(I) MMPI-A or MMPI-2 were used for the assessment of personality traits. The MMPI-2 is a 567 true-false item questionnaire composed of three validity and ten clinical scales. The questionnaire also includes content scales and supplementary scales which evaluate broad personality traits, generalized emotional distress and behavioral dyscontrol.

The MMPI-A is a 478-item true-false questionnaire and contains adolescent specific scales and other unique features designed to make the instrument especially appropriate for adolescents.

In order to verify the mean differences between the three groups of participants, we took into account only the common scales between MMPI-A and MMPI-2. For each scale, a *T*-score of 65 was considered as the level of clinical significance in the 95th percentile.

(II) The CISS measures the following three types of coping styles: Task-Oriented Coping (dealing with the problem at hand), Emotion-Oriented Coping (focus on consequent emotions) and Avoidance-Oriented Coping (Two sub-scales for the Avoidance coping style which are Distraction and Social Diversion). The CISS includes separate adolescent and adult forms. The two main forms of CISS have 48 items and use a five-point response format. The adolescent version of the CISS is suitable for individuals between the ages of 13 and 18. The adult version of the CISS is suitable for individuals who are 18 years of age and older.

(III) PBI is a self-report questionnaire about retroactive experiences of children about parental behaviors during the childhood period. This questionnaire was completed by adolescents separately from mothers and fathers. This questionnaire comprises of 25 items assess an adolescent's view about parenting styles in two aspects. One of them is care with 12 items, and it evaluates warmth and affection; another one is overprotective parenting style with 13 items that evaluate the opinion of children about the control parenting styles. All questions are in 4-point Likert scales

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