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COVER STORY

## How Can You Distinguish a Budding Pedophile From a Kid With Real Boundary Problems?

By MAGGIE JONES

In the early 1980s, a therapist named Robert Longo was treating adolescent boys who had committed sex offenses. Their offenses ranged from fondling girls a few years younger than they were to outright rape of young children. As part of their treatment, the boys had to keep journals — which Longo read — in which they detailed their sexual fantasies and logged how frequently they masturbated to those fantasies. They created “relapse-prevention plans,” based on the idea that sex-offending is like an addiction and that teenagers need to be watchful of any “triggers” (pornography, anger) that might initiate their “cycle” of reoffending. And at the beginning of each group session, the boys introduced themselves much as an alcoholic begins an Alcoholics Anonymous meeting: “I’m Brian, and I’m a sex offender. I sexually offended against a 10-year-old boy; I made him lick my penis three times.”

Sex-offender therapy for juveniles was a new field in the 1980s, and Longo, like other therapists, was basing his practices on what he knew: the adult sex-offender-treatment models. “It’s where the literature was,” Longo, a founder of the international Association for the Treatment of Sexual Abusers, told me not long ago. “It’s what we’d been doing.”

As it turns out, he went on to say, “much of it was wrong.” There is no proof that what Longo calls the “trickle-down phenomenon” of using adult sex-offender treatments on juveniles is effective. Adult models, he notes, don’t account for adolescent development and how family and environment affect children’s behavior. Also, research over the past decade has shown that juveniles who commit sex offenses are in several ways very different from adult sex offenders. As one expert put it, “Kids are not short adults.”

That’s not to say that juvenile sexual offenses aren’t a serious problem. Juveniles account for about one-quarter of the sex offenses in the U.S. Though forcible rapes, the most serious of juvenile sex offenses, have declined since 1997, court cases for other juvenile sex offenses have risen. David Finkelhor, the director of Crimes Against Children Research Center at the [University of New Hampshire](#), and others argue, however, that those statistics largely reflect increased reporting of juvenile sex offenses and adjudications of less serious offenses. “We are paying attention to inappropriate sexual behavior that juveniles have engaged in for generations,” he said.

The significant controversy isn’t whether there is a problem; it’s how to address it. In other words, when is parental or therapeutic intervention enough? What kind of therapy works best? And at what point should the judicial system get involved — and in what ways?

Longo and other experts have increasingly advocated for a less punitive approach. Over the past decade, however, public policy has largely moved in the opposite direction. Courts have handed down longer sentences to juveniles for sex offenses, while some states have created tougher probation requirements and, most significant, lumped adolescents with adults in sex-offender legislation.

The best-known example is Megan's Law. Since 1994, federal legislation has required many sex offenders to register with the police, which can aid sex-crime investigations. But Megan's Law, which went into effect in 1996, mandates that law enforcement also notify the public about certain convicted offenders in their communities. One of the ways states do this is through publicly accessible Web sites. At least 25 states now apply Megan's Law, also known as a community-notification law, to juveniles, according to a recent survey by Brenda V. Smith, a law professor and the director of the National Institute of Corrections Project on Addressing Prison Rape at American University's Washington College of Law. That means on many state sex-offender Web sites, you can find juveniles' photos, names and addresses, and in some cases their birth dates and maps to their homes, alongside those of pedophiles and adult rapists.

Now that concept has reached the federal level. In May, Attorney General [Alberto R. Gonzales](#) proposed guidelines for the Adam Walsh Child Protection and Safety Act, named for a 6-year-old boy (and son of John Walsh, the host of TV's "America's Most Wanted") abducted from a Florida store and murdered in 1981. Among other things, the legislation, sponsored by Representative F. James Sensenbrenner Jr., a Wisconsin Republican, and signed into law by President Bush last year, creates a federal Internet registry that will allow law enforcement and the public to more effectively track convicted sex offenders — including juveniles 14 and older who engage in genital, anal or oral-genital contact with children younger than 12. Within the next two years, states that have excluded adolescents from community-notification laws may no longer be able to do so without losing federal money.

Community notification makes people feel protected — who wouldn't want to know if a sex offender lives next door? But studies have yet to prove that the law does, in fact, improve public safety. Meanwhile, when applied to youths, the laws undercut a central tenet of the juvenile justice system. Since juvenile courts were created more than 100 years ago, youths' records have, with exceptions in some states, been sealed and kept out of the public's hands. The theory is that children are less responsible for their actions, and thus less blameworthy, than adults and more amenable to rehabilitation. But by publishing their photographs and addresses on the Internet, community notification suggests that juveniles with sex offenses are in a separate, distinct category from other adolescents in the juvenile justice system — more fixed in their traits and more dangerous to the public. It suggests, in other words, that they are more like adult sex offenders than they are like kids.

Last year, an eighth grader at a Delaware middle school arrived one morning to find kids in the hallway pointing at him and snickering. At first, the boy, Johnnie, who asked me to protect his privacy by identifying him by a friend's nickname for him, was confused. He thought it might be because of his new haircut. Then one kid called him a rapist. Another jeered, "Hey, aren't you a sex offender?" One teenage boy threatened to beat him up.

Four years earlier, when Johnnie was 11, he put his hand on his 4-year-old half-sister's vagina over her underwear. And then several months later, he told her to perform oral sex on him, which she did. When Johnnie's mother found out, she called the police. She may have felt she could no longer control Johnnie, who, according to his grandmother, both adored his sister (he made pancakes and snowmen for her) and tormented her (he punched and bullied her). Perhaps his mother also worried that her son might abuse other children. It's hard to know what went through her mind that day, because she never explained it to Johnnie or to her own mother, with whom Johnnie eventually went to live. And she did not return my phone calls.

Johnnie, who has sandy-colored hair and freckles, did not resort to violence or use a weapon, according to police records, and when a detective interviewed him, the fourth grader admitted what he'd done. Soon after, Johnnie was sentenced to a residential juvenile-sex-offender program, where he spent 16 months. By the time he was released,

he was considered a role model in his program, according to records that Johnnie's therapist, Marc Felizzi, of the Delaware Guidance Services, received from the facility. His mother, though, had little interest in reuniting the family, so Johnnie bounced from a foster home to his uncle's before going to live with his grandmother and then, ultimately, his father.

It was just two months after starting at a new school near his grandmother's house that Johnnie's childhood offense became the gossip of the hallways. It wasn't entirely clear how kids found out. Johnnie heard that the mother of a girl to whom he'd written a love note discovered him on the Delaware Sex Offender Central Registry Web site. The mother may have typed in Johnnie's last name. Or she may have been scanning her ZIP code for local sex offenders. In any case, she found him. And there on the Internet was a photo of Johnnie when he was 11, along with his address, birth date, height and weight at the time of his offense. Below that were two police charges: one was a misdemeanor for the touching over his sister's underwear; the other was a felony for engaging his sister in oral sex, which because it involved mouth-to-genital contact was charged as "rape second degree."

In dozens of interviews, therapists, lawyers, teenagers and their parents told me similar stories of juveniles who, after being discovered on a sex-offender registry, have been ostracized by their peers and neighbors, kicked out of extracurricular activities or physically threatened by classmates. Experts worry that these experiences stigmatize adolescents and undermine the goals of rehabilitation. "The whole world knows you did this bad thing," notes Elizabeth Letourneau, an associate psychology professor at the Medical University of South Carolina and an expert on juveniles with sex offenses. "You could go to treatment for five years; you could be as straight as an arrow; but the message continues to be: You are a bad person. How does that affect your self-image? How does that affect your ability to improve your behaviors?"

It wasn't long ago that therapists and victim advocates had to fight to get the justice system to take sex abuse by adults, much less by juveniles, seriously. If a case even made it past the police, the charges were often dismissed in court, notes Craig Latham, a Massachusetts psychologist who treats sex offenders and consults with law enforcement.

Around the same time, though, the victims' rights movement began to burgeon, bringing much-needed attention to sexual abuse. Rape-crisis lines and centers were created; the federal government started providing states with money for victim services; and men, women and children went public with their stories about being sexually assaulted.

Robert Longo, now the director of clinical services at Old Vineyard Behavioral Health Youth Services, a psychiatric hospital in Winston-Salem, N.C., remembers appearing on "Donahue" and "[Oprah](#)" in the 1980s, making pronouncements like: "Sex offenders can't be cured." And: "Victims are damaged for life." Neither statement was based on good research, he now says. "We were desperately trying to bring attention to the issue," Longo says of himself and other sex-abuse experts, "and we went way overboard."

Sex crimes became a media sensation. Though the overwhelming majority of offenses against kids — 80 percent to 90 percent — are committed by someone the victim knows, the news media focused on the rare and very chilling rapes and murders of young girls by strangers. Children as sex offenders became the next obvious step in our national anxiety about sex crimes, Philip Jenkins, author of "Moral Panic: Changing Concepts of the Child Molester in Modern America" and a professor of religious studies and history at [Pennsylvania State University](#), told me. "First it's adult predators, and then it's what about children? To draw attention, you have to up the ante. The issue

moves up a notch, and you can't move it back easily."

Among states that do include juveniles in community-notification laws, there is little consistency in terms of who is eligible and for how long. Some jurisdictions allow for judicial discretion on whether to include juveniles or permit youths to petition to be removed after a number of years. In some states, a juvenile has to be 14 to be listed on public sex-offender registries. In others, they may be eligible at 10 or 12. And while some states list only a handful of youths on their Web sites, Kansas currently includes about 340 on the Internet, and Texas lists more than 3,400 people for offenses committed when they were juveniles. Meanwhile, in South Carolina, anyone — whether adult or child — who is placed on its Internet registry is there for life.

When I heard about these juveniles, I wondered who they were and what types of offenses they'd committed. How old were they? Had they used violence or assaulted numerous children? Would they become adult offenders? I asked Mark Chaffin, one of the country's leading experts and the director of research at the Center on Child Abuse and Neglect at the [University of Oklahoma](#) Health Sciences Center. Chaffin notes that while most juveniles who have committed sex offenses are boys around 13 or 14, in other ways they are not a homogeneous population. Though a small percentage — no one knows how many — will become adult rapists or pedophiles, the vast majority, 90 percent or more, will not, Chaffin says. Most have not committed violent assaults or abused multiple children repeatedly. Usually they have had sexual contact — from fondling to oral sex to intercourse — with a child who is at least two years younger than they are. Also, many of the juveniles have been sexually abused themselves, and as a consequence, they act out sexually, typically for a transitory period.

Some, whether they have been abused or not, are what therapists call "naïve experimenters" — overly impulsive or immature adolescents who are unable to approach girls or boys their own age; instead, they engage in inappropriate sexual acts with younger children. Others are generally delinquent juveniles for whom sexual abuse is just one of the ways they break laws, and according to studies, they are much more likely to commit a property crime than they are to commit a second sex offense. They are from working-class, middle-class and upper-middle-class homes, from intact families as well as very broken ones. There are also a number of children — how many is unclear — who are adjudicated for what some therapists would say is "playing doctor" or normative "sexual experimentation." These are broadly considered to include sexual acts that are spontaneous, intermittent and "consensual" (legally, children under 16 usually cannot consent to sex) between youths within a couple of years age. Similarly, there are the so-called Romeo and Juliet cases, like the highly publicized one in Georgia involving [Genarlow Wilson](#), who is serving an 11-year prison sentence for having consensual oral sex with a 15-year-old girl at a party when he was 17. There have also been court cases of 12- and 13-year-old boys who grabbed girls' breasts or buttocks in school hallways and were adjudicated as "sex offenders."

It's not hard to categorize an act in which a 12-year-old grabs a girl's rear end. And, on the other extreme, it's not difficult to classify a 17-year-old who rapes young children. But many juveniles adjudicated (a term used in juvenile court to indicate a determination of delinquency) for sex offenses fall somewhere in between, both in terms of ages and offenses. How, for instance, should we categorize a 13-year-old who rubbed his penis against the rectum of a 9-year-old? Or a 14-year-old who was sexually aroused and asked a kindergarten-age girl to lick his penis? Both were adjudicated in juvenile court and placed on an Internet registry. Their offenses don't fall under what therapists consider childhood experimentation. Any parent would be very upset if her elementary-school daughter was asked to perform oral sex — much less if she did it — by an adolescent boy; and depending on the offense and circumstances, there could be lasting damage to the victim. But should these adolescents be in a different legal category than teenagers who commit robberies or physically assault young children?

Under the Adam Walsh Act, a 35-year-old who has a history of repeatedly raping young girls will be eligible for the public registry, and so will a 14-year-old boy adjudicated as a sex offender for touching an 11-year-old girl's vagina. According to the law, the teenager will remain on the national registry for life. He will have to register with authorities every three months. And if he fails to do so — not an unlikely prospect for some teenagers, especially those without involved parents — he may be imprisoned for more than one year.

Also, under the proposed guidelines issued by the attorney general's office in May, the law is retroactive: hundreds of juveniles who are on probation for sex offenses that preceded the law could be eligible for the nationwide registry. Regardless, the Adam Walsh Act sets only the minimum guidelines; many states will retain their own, more stringent community-notification laws for juveniles. Already the Juvenile Law Center in Philadelphia and other organizations are considering challenges to the law based on, among other things, the fact that juveniles are subject to the same registration requirements as adults without the benefit of a jury trial or similar protections.

Amie Zyla was 8 years old when a 14-year-old family friend named Joshua Wade molested her. Wade was adjudicated for a misdemeanor in juvenile court in Wisconsin, where he and Zyla lived, and sent to a residential juvenile facility. That was the last Zyla knew about Wade until almost a decade later, in 2005, when she heard a TV news report that Wade was arrested for sexually assaulting numerous children. At the time of his arrest, Wade was 23. Authorities said that Wade befriended children, molesting many in his apartment and secretly videotaping some of them in the shower. He is currently serving a 25-year prison sentence.

It is a disturbing story that still haunts Zyla, who is now 19 and has become an advocate for including juveniles on public registries. If Wade had been subject to community notification as a teenager, parents and other community members would have been able to find out about his past record. During her testimony to the House Judiciary Subcommittee in support of the Adam Walsh Act, Zyla said, "The simple truth is that juvenile sex offenders turn into adult predators."

That was certainly the case for Wade, who showed signs of heading for trouble long before he became an adult. When he was at his juvenile treatment program for molesting Zyla, Wade made almost no progress and admitted that he had also assaulted numerous other children, according to records obtained by The Milwaukee Journal Sentinel. (His defense attorney said that the police were never able to confirm those assaults.) He was also considered a high-enough risk that he was sent to a detention facility following his juvenile program.

Experts say there are, indeed, warning signs that one teenager may be at higher risk for committing repeat offenses. Not surprisingly, a pattern of multiple sexual offenses is of greater concern than a single instance, and the prognosis for a 16- and 17-year-old is typically worse than it is for a 12- or 13-year-old boy. And though age alone doesn't predict recidivism, a 16-year-old with a long list of criminal and antisocial behaviors, who fails to complete a court-mandated therapy program, as Joshua Wade failed to do, and has a clear and persistent sexual interest in very young children is at real risk for becoming a pedophile, experts say.

According to the Diagnostic and Statistical Manual of Mental Disorders, a diagnosis of pedophilia requires a person to be at least 16 years old and with "recurrent, intense, sexually arousing fantasies" over a period of six months or longer, that he acts upon with a child who is at least five years younger. Many sex-abuse therapists, however, say they'd be wary of diagnosing pedophilia in even a 16- or a 17-year-old. At 16, a teenager's history of sexual interest is relatively short, notes David Prescott, a therapist and the president-elect of the Association for the Treatment of Sexual Abusers, and it is still subject to change, compared with the history of a 40-year-old who is sexually attracted

to young children.

Though there is no definitive way to predict, unfortunately, who will be the next Joshua Wade, some juvenile-assessment tests — which include questions about a youth’s sexual history, antisocial behavior and support system — can help clinicians evaluate the risk of that individual committing another offense. The questionnaires, however, have not been scientifically validated, and no single actuarial tool — even for adults — is airtight. For juveniles, the task is even trickier because, by definition, adolescence is a time of development and flux; a boy who seems at high risk for repeat offenses at 14 may no longer be so at 16. And a low-risk 14-year-old boy could become higher risk by the time he is 16. Indeed, the manual of one juvenile-assessment test highlights the complications: “No aspect of their development, including their cognitive development, is fixed or stable. In addition, their life circumstances often are very unstable. In a very real sense, we are trying to assess the risk of ‘moving targets.’ ”

The image of 15-year-old boys as moving targets is not terribly comforting for those of us worried about whether a neighborhood teenager might be a budding pedophile. And the fear of the unknown sexual predator certainly influences public policy. As [Mark Green](#), a former Republican congressman from Wisconsin and one of more than three dozen co-sponsors of the 2006 Adam Walsh Act, told me: “If we are going to have a sex-offender registry that’s a useful tool for authorities and the public, it has to cover a broad enough spectrum of offenders. I err on the side of covering more offenders because these crimes are so destructive to victims, families and communities.”

But the Adam Walsh Act and similar legislation may risk ensnaring low-risk teenagers who were never headed toward becoming adult sex offenders. Numerous studies show that recidivism for juveniles who commit sex offenses is about 10 percent. That’s lower than most other juvenile offenses, including property and drug crimes. It’s also a significantly lower recidivism rate than that of adult sex offenders, which ranges from about 25 percent to, for the most serious offenders, 50 percent or higher. (Official recidivism rates are lower than actual rates; some sex offenders commit later offenses that go undetected.) And though the Adam Walsh Act requires many first-time teenage offenders to publicly register for life, if an adolescent hasn’t committed another sex crime within five years of his first offense, research suggests that he is unlikely to do so, notes Mark Chaffin of the University of Oklahoma.

As Elizabeth Letourneau, the professor at the Medical University of South Carolina, explains, most adolescents don’t have the sexual deviancy that prompts an adult predator to offend repeatedly. “If you’re an adult child molester, you’re violating clear age and legal boundaries. You’re crossing over a lot of lines, so you have to be highly motivated,” she said. “Kids typically don’t cross as many lines when they offend; they do stupid things all the time because their brains aren’t developed.”

As research by the [National Institutes of Health](#) shows, our brains don’t finish maturing until we are in our mid-20s. In its 2005 *Roper v. Simmons* decision, the [United States Supreme Court](#) acknowledged this when it said that adolescents, even those as old as 17, were not eligible for the death penalty because they “cannot with reliability be classified among the worst offenders,” because of their immaturity.

The last part of the brain to develop is the frontal lobe, which is responsible for impulse control, moral reasoning and regulating emotions — the things that adolescents lack when they decide, if they make a conscious decision, to molest a younger kid. So, instead of being compulsive like pedophiles, adolescents tend to be impulsive, which means tactics like “grooming,” in which an offender woos a child for weeks or months before a sexual assault, tend not to apply to the majority of juveniles, Chaffin notes. It’s not that juveniles can’t distinguish right from wrong; it’s that they don’t perceive risks and consequences the way adults do — as parents of teenagers know all too well. “I’ve

been arguing for a classification called ‘puberty in the first degree,’ ” said Timothy Kahn, a Seattle therapist who has treated and evaluated thousands of juveniles with sex offenses, “which gives them a break for what they do when they are 12, 13, 14.”

After being adjudicated for a sex offense, a juvenile is often sent to a community-based or residential treatment program, where he might spend anywhere from a few months to a few years or more. In some cases, a judge might recommend a residential program because a boy has sexually abused a family member and the family can’t adequately supervise him. But in other cases, adolescents wind up in residential programs simply because their community lacks outpatient programs.

Whether residential or outpatient, the treatment philosophies among the programs vary widely. Some focus on family dynamics and teaching boundaries and understanding social cues, as well as helping immerse juveniles in mainstream activities. Other programs embrace the model that Longo and some of his colleagues once practiced but now see as outdated, in which youths are treated much like adult offenders.

In a Newton, Kan., program, teenagers keep logs of their masturbation habits, in which they detail their fantasies and how often they masturbate to those fantasies, which therapists then read, in addition to working on anger management and doing other exercises. Some of the teenagers also participate in what’s known as psychodrama. During these exercises, a teenager stands in front of an audience of peers, parents and other relatives who attend the group therapy. Then, the teenager describes the victim — hair color, personality, age — and what the offender did.

The teenager often chooses a friend in the program to play the role of the victim, whose task it is to pepper the teenager with questions: “Why me?” “Did you molest other kids?” “I thought we were friends; will we ever be friends?” Then audience members offer their own questions, along with praise for the teenager’s bravery and honesty, during a process that lasts about an hour and a half. Jeffrey King, the director of the program, explains the rationale behind psychodrama, saying: “Sharing is a way of getting it out of their soul. If they are moving forward with treatment, they’ll be able to say, ‘I was only thinking of myself and getting my needs met.’ ”

But Longo argues that when these exercises re-enact offenses, they may shame boys and reinforce their self-image as “sex offenders” with bad, deviant traits rather than as kids needing lessons in setting boundaries and creating better relationships. Critics complain, too, that intensive monitoring of adolescents may have similar consequences. Adolescents in some therapy and probation programs, for example, aren’t allowed to go to playgrounds or swimming pools, even with adult supervision. “You can’t see what they are doing underwater,” a Colorado probation officer, DeeDee Cagle, told me, referring to the pool rule, which applies to adolescents with a single sexual offense, as well as those with multiple offenses.

But Barbara Bonner, a longtime expert on children and sex offenses and a co-director of the Adolescent Sex Offender Treatment Program at the University of Oklahoma Health Sciences Center, questions such practices. For 20 years, the program has been letting kids go on supervised visits to parks and swimming pools. “We’ve never had an incident,” she told me. Her program, whose population includes juveniles adjudicated for a wide range of offenses, does have rules: no baby-sitting; no supervisory role with young children; no pornography. But the program also makes a point of encouraging mainstream activities with peers as much as possible. “It’s different if a particular child has a history of going to the park and grabbing kids,” notes Bonner, who was recently the president of the International Society for Prevention of Child Abuse and Neglect. “But why make it a rule for everyone?”

Some programs also monitor adolescents by requiring them to undergo polygraphs. While the exams are not typical in other juvenile-delinquent programs, according to a 2002 report by the Safer Society Foundation, a sexual-abuse research and advocacy organization, about 44 percent of outpatient adolescent-sex-offender programs use polygraphs — up from 25 percent eight years earlier. Researchers have long questioned the reliability of the polygraph as a lie detector, and Elizabeth Letourneau says that adolescents may be particularly vulnerable to “admitting” to more than they actually did. “A polygrapher might say, ‘You failed this part; is there something else you’re not telling me?’ Then you may give up more information to try to pass.”

Judith V. Becker is a professor of psychology at the [University of Arizona](#) and is considered one of the foremost experts in juvenile-sex-offender evaluation and treatment. She told me that she and her colleague Kurt Bumby have visited adolescent-sex-offender programs and asked teenagers if polygraphs ever failed to pick up lies the boys told. Yes, some of them said. Becker and Bumby also asked if the boys ever told the truth and polygraph results indicated it was a lie. That happened, too. Similarly, Mark Chaffin, co-director of an Oklahoma program for adolescents, said that teenagers there told counselors that in previous programs they felt pressured to confess to sex offenses they didn’t commit. “They thought they would never get out of there otherwise,” he told me. “It’s not an uncommon occurrence; it’s part of the culture of some facilities.”

Adolescents’ treatment progress may also be delayed by unfavorable results from a test known as PPG, or penile plethysmography, in which a band is placed around a boy’s genitals to measure his erectile response to audio or visual stimuli. Only about 10 percent of adolescent outpatient programs in the United States still use PPGs, according to a 2002 Safer Society report. “Years ago, people were using them on children as young as 11 and 12,” says Peter M. Byrne, the C.E.O. of Behavioral Technology Inc., which distributes PPG technology in the United States. Now Byrne doesn’t generally recommend PPG for anyone under the age of 16.

But according to Colorado’s state guidelines on juvenile sex offenders, adolescents 14 and older are eligible for PPGs. Cagle, the probation officer, told me that while she requires every adolescent client with a sex offense to undergo either a PPG or a much less invasive viewing time test, which measures sexual interest by the length of time someone looks at photographs, she prefers the PPG. “I like to know what kind of kiddo I’ve got,” she said. But no one has ever done a controlled trial of PPG comparing “normal” adolescents to those with sex offenses. “Kids are aroused by anything,” said Craig Latham, the psychologist, who along with other sex-abuse experts have been trying to ban the use of PPG with adolescents. “They are aroused by sitting there with this thing on their penises.”

Last October, Johnnie, the Delaware teenager on the sex-offender registry, sat slumped in a chair in his therapist’s office. After the bullying incidents at his middle school earlier in the year, he enrolled in an alternative school for juvenile delinquents. He wasn’t required to attend, and he didn’t particularly like it. But there wasn’t a lot of choice. And now he was telling his therapist, Marc Felizzi, about a new incident that took place two weeks earlier on the school bus. “He said, ‘Hey, dude, you’re a sex offender.’ And the other one said, ‘You tried to rape your sister!’ ”

Trying to catch Johnnie’s gaze, which was focused at his feet, Felizzi said: “Maybe you need to talk to a teacher and say you need to have your back covered. If you don’t tell someone at school and you smack some kid, you could pick up a new police charge,” Felizzi said. Johnnie had already been suspended for mouthing off to a teacher shortly after the incident on the school bus.

For much of his life, Johnnie has struggled with anger and depression. Twice, he spent several days in a psychiatric hospital. The first time was last year after he walked into oncoming traffic near his grandmother’s house; he told the

police officer who found him that he wanted to die. The second time was several months ago. He had transferred to yet another school and sought out a counselor to tell her he felt both suicidal and so enraged at a fellow student who continually taunted him that he wanted to kill the student. "He was at the end of his rope, and he knew where to turn when he needed help," said a school staff member who asked that I not use her name to protect Johnnie's privacy. Johnnie, she told me, had no disciplinary problems at her school and is a "wonderful and very respectful student and a leader in the school."

It has been five years since Johnnie sexually abused his sister and, though it is impossible to know with certainty if he has sexually assaulted anyone since then, no one I spoke to knew about any other offense: not the staff at his school, not Felizzi, not Johnnie's prosecuting and defense attorneys. And Johnnie, whom Felizzi told me had always been forthcoming about his past, repeatedly told me he's never sexually abused anyone else. "I was young and stupid," he said, recalling what he did to his sister. "It was really terrible."

In part, he said, his struggles with depression are related to his guilt about his sister, as well as his troubled relationship with his mother, who, family members told me, verbally and physically abused her son. Added to that, Johnnie was sexually assaulted by a family friend when he was 5. (In abusing his sister, Felizzi said, Johnnie "was re-enacting what was done to him.") And then there's the Internet registry. His first suicide attempt was two weeks after his sex offense became known at school. The day students found out, he told me, "my whole world dropped to the ground."

Marc Felizzi has seen the pattern before. Kids Google one another's names; curious neighbors type in their ZIP codes on sex-offender Web sites. And the problems begin. "A large part of treatment," he said, "is coping mechanisms: 'What do I do when I'm found out?'"

I spoke to a 14-year-old girl who was on a state's public registry. When she was 11, she repeatedly fondled a 7-year-old boy's penis and had him touch her vagina; the incidents were then reported to authorities by a therapist. "I was going to try out for the basketball and volleyball teams," she told me, but decided the team wasn't worth the risk, after one of the players sent her an instant message on her computer: "What did you do? I saw you on the Internet!" While posted on the Internet registry, she said, she lost all of her friends but one. ("People think I've done something worse than I did," she told me. "They think I'm not a virgin.") She also received anonymous phone calls from guys wanting to "hook up" with her, while neighbors asked her family to move away. And her father was worried that his daughter's Internet listing made her easy prey for adult men looking for adolescents who they assume are sexually experienced. But the girl is fortunate in one respect. She lives in a state that recently gave judges discretion about placing juveniles on public registries. Several months ago, her lawyer won a motion to have her information removed.

Lucy Berliner, the director of the Harborview Center for Sexual Assault and Traumatic Stress, in Seattle, notes that the stories of teenagers like these are only anecdotes; there are no studies on how community notification affects children's development and self-image. And, as Berliner says, some juveniles stay on public registries for a limited period and are unscathed by it. But given that few labels carry as much stigma in our society as "sex offender," it makes sense that some adolescents become depressed and isolated.

Certainly, one consequence of community notification is that as these adolescents move into adulthood, they may struggle to stay in the mainstream because they have a hard time finding and holding jobs. Becoming a teacher or a doctor or joining the military may be virtually impossible for those labeled as sex offenders on public registries.

Even job prospects at Target, McDonald's or any business that performs background checks aren't promising. In interviews, people in their 20s told me that they have been either fired or turned down for jobs at retail stores, fast-food restaurants and social-service organizations after employers discovered they were adjudicated as juveniles for sex offenses.

Another unintended consequence may be that some families will remain silent to protect their children from decades on an Internet registry rather than seek intervention that would benefit both the victim and the offender. One mother I spoke to regretted not keeping quiet. When she discovered that her 11-year-old son had engaged in a sexual act with his younger sister (the mother wouldn't specify the offense except to say that it did not involve penetration and no force was involved), she called a therapist. "I thought it was the right thing to do," she told me. "I figured counseling would help." She thought she knew how the law worked and that her son's behavior might be reported to law enforcement. "But I thought: O.K., it will teach him a lesson. He'll get a little probation, but his record will be sealed." She didn't realize that one year earlier her state had made children as young as 10 eligible for the state's Internet sex-offender registry. Police entered her son's DNA into a database. They took his fingerprints and mug shots. And they placed him on the state's Web site. That's where his photo and address have been for the past four years. "I feel it was my fault," the mother told me. "I did it."

Of all the worries the public registries create, though, the most frightening for many families is vigilantism. In 2005, a man killed two adult sex offenders he tracked through a Washington State community-notification Web site. And last year, a 20-year-old Canadian man with a list of 29 names and addresses from the Maine Sex Offender Registry went to the homes of two convicted offenders, shooting and killing them. Both men were strangers to the killer. One of the offenders had raped a child. The other was convicted for statutory rape; he was 19 when he had sex with his girlfriend, who was two weeks shy of her 16th birthday.

One question about juveniles with sex offenses that remains unanswered is what kind of treatment works best. New studies are, however, beginning to suggest potential directions. One of the most promising is what's known as multisystemic therapy, which tries to minimize antisocial behavior by helping caregivers more effectively supervise their children. Multisystemic therapy typically focuses on improving parent-child bonds and encouraging teenagers' involvement in class work and after-school activities, as well as healthy friendships. Two small, controlled studies with juveniles who committed sex offenses suggest MST reduces recidivism more effectively than individual psychotherapy and some other treatments. In a third, a federally financed clinical trial led by Elizabeth Letourneau, researchers are looking at 127 juveniles adjudicated for sex offenses, between ages 11 and 18, and their families. About half of the kids were randomly assigned to multisystemic therapy and half to a traditional sex-offender treatment program that focuses on, among other things, relapse prevention. Both programs are outpatient. (No published study, Letourneau notes, has ever shown that residential programs — which she and other critics contend are overused — are more effective than less costly outpatient programs.) According to Letourneau, early results from the MST study are promising.

And last year, Mark Chaffin, at the University of Oklahoma, and other researchers published the results of a longitudinal study of 135 children ages 5 to 12 who had sexual-behavior problems and participated in a therapy program. The program took just 12 weeks, during which counselors addressed inappropriate sexual behavior, concrete sexual-behavior rules, self-control techniques and sex education. Given that the children were under 13, it's hard to know if the results can be replicated with older adolescents, though Chaffin has just such a study under way. But in the study of younger children, the 10-year recidivism rate was 2 percent. "You can't get a whole lot lower than that," Chaffin said. "That's a functional definition of a cure."

Best, of course, would be stopping juveniles before they offend. While some sex education in schools includes lessons on how kids can avoid perpetrators, it is much less common for children to learn how to avoid committing sex offenses themselves. “It is morally wrong,” said Timothy Kahn, the Seattle therapist, “to do nothing to educate kids about the laws and then have them have to register as sex offenders and they haven’t even hit puberty.”

In his book “An American Tragedy: Legal Responses to Adolescent Sexual Offending,” Franklin E. Zimring, a professor of criminal law at the [University of California](#), Berkeley, suggests, as an alternative to community-notification laws for juveniles something known as “time-conditional record sealing.” Under Zimring’s plan, if an adolescent with a sex offense goes on to commit another offense as an adult, law enforcement would be able to access the juvenile records to help assess the offender’s recidivism risk and make judicial decisions accordingly. “The number of career sex offenders who would be able to hide official records behind the protective policies of juvenile justice would fast approach zero,” Zimring writes. “The number of low-risk juveniles kept from permanent stigma would be quite large.” Other experts have suggested a restricted registration system that would allow certain child-centered employers — like camps and schools — to access high-risk juveniles’ records for several years to help ensure that those adolescents and young adults don’t work with children.

As Zimring notes, keeping juveniles off public Internet registries isn’t just a civil rights issue. “It’s also about bringing some kind of rationality into law enforcement,” he says, given that including low-risk offenders in these laws adds to police workloads with no proof that it’s actually effective.

In the meantime, if thousands of juveniles do accumulate on state and federal Internet registries, Mark Chaffin argues that at the very least we should be studying the impact on these adolescents. “We’d need to follow these kids for 10 years to look at their different experiences and outcomes,” he said. “Frankly, we could easily find these policies do more harm than good.”

As Elizabeth Letourneau told me recently, “If kids can’t get through school because of community notification, or they can’t get jobs, they are going to be marginalized.” And marginalized people, she noted, commit more crimes.

*Maggie Jones is a contributing writer for the magazine. Her last article was about boys in Japan who refuse to leave their homes.*

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