

Global Youth

Global Youth:

*Understanding Challenges,
Identifying Solutions,
Offering Hope*

Edited by

Karen Rice and Marc V. Felizzi

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FOREWORD

Nostalgia sets in when most adults think of their youthful years. Somehow we all like to think that *as kids we were different*. We rewrite history and believe we were respectful of our elders, thoughtful, compassionate, and simply knew right from wrong. “*But these kids today...*” As adults, we firmly believe and pass on a mantra that states there is something intrinsically flawed in today’s youth. This defense mechanism allows all adults the ability to abdicate responsibility and deny the inevitable truth. Our children are not to blame for their current conditions, as adults, WE ARE.

Whether we want to admit it or not, today’s youth face challenges reminiscent of yesterday’s youth. They are grappling with the remnants of intense poverty and substance abuse they have often times inherited to no fault of their own. The level of violence that has been inflicted upon them, on an interpersonal and societal level is unprecedented. Instead of finding ways to alleviate the challenges our children face, the way we view and treat them has changed significantly, and over time, has exacerbated youth violence, addiction, teen pregnancy, and homelessness, just to name a few.

Youth today are faced with inadequate opportunities for education and training, inequities in afterschool programs and activities, and increased discrimination based on gender, sexual orientation, and immigration status. These challenges are not restricted to any single socially constructed demarcation such as race, ethnic or religious group, socio economic status, or gender. All of our children are susceptible, and therefore the health and welfare of all children throughout the world should be of high priority to us all.

Young people today live in communities where gunshots are so common they do not flinch. Parents strategically place bedroom furniture away from windows and walls to avoid stray bullets. Adolescents “mob up” and look for individuals to assault based on labels: “illegal,” “Jew,” “Muslim,” “terrorist,” and “gay.” They spray paint symbols of hate on houses of worship. All of them misguided attempts to fill a void, alleviate despair, and find coping mechanisms that allow them to escape their agonizing reality.

Overwhelmed by the futile loss of life, we implement policies that have proven to fail over the past decades. Metal detectors, surveillance cameras, and armed police patrol school buildings that lack heat in the

winter, air conditioning in the summer, and social workers and guidance counselors year round. Kids as young as 12 learn to line up, get patted down, and place their bags on conveyer belts for screening machines, without being asked if they have eaten breakfast. It is as if training for juvenile detention centers and correctional facilities has already begun.

At the same time, funding for pre-k programs, academic supports, and after-school programs is cut. Summer programs are available for those that can afford to pay, or are fortunate enough to win the lottery by which a few seats may be available to those in the lower economic rung. Violence prevention, mental health, and drug counseling fall by the wayside, slain by special interest groups who have more influence in legislative bodies than do our children and our families. The death toll of our young people often results in more pain and despair, the ripple effect more costly. Our grandparents outlive their grandchildren defying the natural order of life, as correction officers earn higher salaries monitoring those serving life.

Young people everywhere have future aspirations but require an inclusive, supportive society that encourages their hopes, visions, and dreams. For this reason, the United Nations has long recognized the need for societies to support the energies of their youth to ensure ongoing societal development.

The most effective drug prevention programs are those that inject love into the hearts of our children, sobering the minds of adults. Successful anti-violence initiatives beat back aggression by teaching compassion. Anti-bias curriculums are aimed at sensitizing hearts and building an inclusive community. The most important tools in saving our children are caring and nurturing adults who make children a priority of utmost importance. Ultimately, our children's success will not be measured by where they have gotten themselves, but by the foundation WE AS ADULTS have provided them.

Sergio Argueta, MSW
Youth Advocate/Community Organizer,
School Social Worker/Adjunct Professor,
Founder/Board Chair, S.T.R.O.N.G., Youth Inc.
Radio Host, WBAI Behind the News Long Island

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The faculty of the School of Social Work at Millersville University of Pennsylvania willingly gave of their time to support and present at the Learning Institute: Global Well-Being and Social Change Conference, in July, 2014, which is where the idea for this book emerged. Several faculty members were generous enough to provide chapters within this book. The School of Social Work's Graduate Assistants all spent many days, and nights, planning and working the Learning Institute, and also gathering the material for this text. Without them, much of the critical work in layout and information gathering may never have progressed.

The administration of Millersville University supported the Learning Institute by offering use of the spacious and modern Ware Center in downtown Lancaster, PA. In addition, several departments at Millersville University provided financial and logistical support for the Learning Institute.

Marc would like to thank his co-editor, Karen Rice, for the vision and dedication she provided to and for the Learning Institute, the School of Social Work at Millersville University, and the development of this text. Karen devoted much of the last three years to bringing the Learning Institute to life, and indeed, is the heart and soul of this effort to provide the community and the profession with new, innovative and creative ideas for the treatment, assessment and prevention of critical social issues. Without Karen's passion for Social Justice- and Social Work- we would still be pondering whether or not a conference and text of this magnitude would be a good idea. She is the heart and soul behind these efforts. I am also indebted to Karen for the many opportunities she has provided this

writer for service, teaching and scholarship, and for making me a better person, and colleague.

Karen would like to personally thank Marc Felizzi for his endless support and tireless commitment to this endeavor. His ongoing dedication to social justice and advocacy are contagious. Marc's passion for this work and making a difference in the lives of youth is evident through his work, which includes maintaining a private practice to provide counseling services to youth who have experienced trauma. He provides a perfect example for our students and our profession that to make a difference, you need to get involved. He "walks the talk!" We are fortunate to have him at Millersville University, and I am fortunate to call him my colleague and friend!

Above all, we both would like to thank our friends and colleagues, and most importantly, our families for their ongoing support. To Karen's daughter, Karlee Rice, for her creative talents with the design of the book cover.

INTRODUCTION

During the United States Presidential campaign of 1968, Vice President Hubert Humphrey, who was the Democratic nominee for president, said “The first sign of a declining civilization is bad manners.”¹ Humphrey was referring to the mostly young rioters who disrupted the city of Chicago during the Democratic National Convention that year. Indeed, recent events in the United States have caused many groups, but most notably young people, to state forcefully their anger and disgust at the current status quo, especially regarding race relations. Ferguson, Baltimore, Eric Garner, Charleston, and many other racially charged situations have caused the youth in this country to speak out against injustice. As a result, violence, in the forms of riots and looting, much like those in 1968, have occurred, and may underscore Humphrey’s assertion that our society may be in the midst of a decline, despite the efforts of youth to combat violence and inequality.

For statistical consistency, the United Nations² uses the ages between 15 and 24 as a range in which many young people are socially considered youth. Hargrove³ reports this stage is more of a social period, rather than a developmental period, as it is the time when youth are transitioning between the dependency of childhood and the responsibilities of adulthood. It is also during this time, that youth are faced with many challenges in their life that could have great impact on them later in life.

During 2010, an average of 13 young people were victims of homicide in the United States each day.⁴ Youth violence is the second leading cause of death in the United States for those between the ages of 10 -24, and in 2010, 4,828 young people died as a result of such violence.⁵ The numbers of young people affected by violence, either as a victim or a perpetrator, are staggering. According to Bradley,⁶ the 21st Century is the worst generation in which to grow up.

The 2014 National Report on Juvenile Offenders and Victims⁷ stated that more than half of the youth in the United States have been exposed to violence. Over 707,000 young people aged 10 to 24 years had physical assault injuries treated in U.S. emergency departments in 2011—an average of 1,938 each day.⁸

Despite the fact that the numbers of perpetrators of youth violence have declined over the last 10 years, the statistics are still startling. In

2011, there were 202 arrests for Violent Crime Index offenses for every 100,000 youth between 10 and 17 years of age. The juvenile Violent Crime Index arrest rate increased in the mid-2000s, and then declined through 2011 to its lowest level since at least 1980. The rate in 2011 was 31% below its 1980 level and 59% below the peak year of 1994.⁹ Despite this drop in perpetration, close to 2,000 young people are treated, daily, in emergency rooms across the United States – solely due to youth violence. In 2011, juveniles were involved in about 1 in 13 arrests for murder, and about 1 in 5 arrests for robbery, burglary, and larceny-theft.¹⁰

Youth violence is not a unique phenomenon and in fact, youth have been plagued with challenges throughout the centuries that have placed them at risk of violent tendencies. These challenges include poverty, inadequate healthcare, limited educational opportunities, exploitation, gender inequality, substance abuse, mental health concerns, homelessness, gang involvement, and family dysfunction. Increasing concern has surrounded the phenomenon of social media and its effects on today's youth. One of the chapters deals with the emergence of many applications that can increase the potential of youth violence in society.

These challenges are not unique to youth within the United States; however, the experiences may differ in terms of chronicity, intensity, and impact. In all youth, these challenges create stress and trauma that compromise well-being.

This book will explore the challenges that youth experience and provide context to better understand the factors related to and/or contributing to those challenges. The unique sections of the book are the chapters describing realistic and practical violence prevention and remediation programs, which are both innovative and effective. Additionally, there are a number of chapters that discuss the latest technological advances to help young people, as well as evidenced based assessments and evaluations to help those who work with young people understand the needs of at-risk youth.

Real life experiences with youth violence, and its victims are presented in the book. The reader will find a number of chapters devoted to the assessment of at-risk youth, but practical and applicable solutions for working with this population can be found in the many programs that are presented. In addition to chapters that describe at risk youth, one will learn about effective community based programs that have helped reduce youth violence. Additionally, accessible and creative interventions using expressive arts, such as photography, current music, and readily available materials, with at risk youth, are discussed. An international perspective

on youth violence discussing the “Troubles” in Northern Ireland is presented, to compare issues with at risk youth, globally.

While Vice-President Humphrey may have feared a declining civilization, due to the actions of disenfranchised American youth in the ‘60s, it should be noted that globalization has negatively affected societies, and in particular Third World Countries, and that the only way to address the negative effects of what is inevitable, is to engage our youth and empower them to become active within their community.¹¹ This text aims to not only shed light on the challenges of our youth as a result of some of these negative effects from globalization but to also provide options with how to engage and empower this next generation in order to minimize youth violence and build strong communities. As McWhirter and colleagues¹² report, the well-being of our society depends on our ability to prepare well-adjusted, responsible, well-educated young people to step forward as the older generation passes.

Notes

¹ Sidey, 1985

² United Nations, 2015

³ Hargrove, 2014

⁴ Centers for Disease Control and Prevention, 2015

⁵ Ibid

⁶ Bradley, 2014

⁷ Centers for Disease Control and Prevention, 2015

⁸ Ibid

⁹ Ibid

¹⁰ Ibid

¹¹ Schuftan, 2010

¹² McWhirter, McWhirter and McWhirter, 1995

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CHAPTER ONE

EMOTIONAL ABUSE, PARENT AND CAREGIVER INSTABILITY, AND DISRUPTED ATTACHMENT: THE RELATIONSHIP TO JUVENILE SEX OFFENDING STATUS

MARC V. FELIZZI

Sex offenders in the United States frequently bring about an immediate visceral response, often of revulsion. Juvenile sex offenders however, are vastly different than their adult counterparts in many ways, including treatment needs. While many call for imprisonment and close monitoring of adult sex offenders, juvenile sex offenders are often in need of specialized treatment to prevent recidivism.

The author conducted a study in 2011 that examined these treatment needs in a population of 502 male juvenile sexual and nonsexual offenders, in a secure placement facility in a large Midwestern state. Questionnaires were administered in an effort to examine not only treatment needs, but causal factors regarding sexual behavior. A smaller group of non-sexual offenders were also compared with the juvenile sex offenders throughout this study to contrast the differences between the groups of adolescents.

Background and History

As of December 2013, a total of 774,600 sex offenders were registered in the United States.¹ Of those, approximately 23%, or over 178,000, were juvenile offenders.²

Treatment for juveniles who sexually offend in the United States has evolved over the past 100 years. Prior to the 1970s, juveniles who sexually offended were usually released into the custody of their caregivers. Since

that time, many specialized facilities and programs designed to treat juvenile sex offenders have been established.³

Laws that were intended to address adult sex offenders have been adapted to apply to juveniles in many states.⁴ The idea of treating juvenile offenders in the courts as adults has created substantial legal and clinical concerns. These concerns involve juveniles receiving the same criminal sentences and prison treatment as adult sex offenders, and being placed on public access sex offender registries where classmates, neighbors, and community can locate them.^{5 6}

Zimring⁷ wrote that since the establishment of the first juvenile court in the 1890s until the 1970s, the court-ordered treatment for juvenile sex offending was limited largely to the family and the community. Until the 1970s, most courts took a “rehabilitation, not retribution” stance towards juvenile offenders.^{8 9} Little research, quantitative or qualitative, was conducted on causal factors or theories of offending. Most in the legal or clinical community focused on beliefs that blamed juvenile sex offending on “curious impulses” as juveniles and adolescents strove to learn about sex first hand.¹⁰

Not until the 1970s, when many wholesale changes in American societal institutions such as the legal system occurred, did the direction of justice, especially juvenile justice, shift. A move towards prosecuting juvenile offenders became evident during the 1970s, and the “rehabilitation, not retribution” ideal began to change towards secure placement, and ultimately treatment. This move towards juvenile prosecution of sex crimes was spurred by the *In re Gault* Supreme Court decision, which gave juveniles the right to due process in a court of law.

The few facilities that accepted and worked with juvenile sex offenders prior to the 1970s often used treatment protocols that showed little proof of efficacy.^{11 12} While relatively few mental health providers specialized in the treatment of sex offenders, no dedicated offender treatment was conducted on a large scale.

As more attention was placed on sexual offending in the United States, more juveniles were adjudicated and ordered to receive treatment for their behavior.¹³ The increasing number of adjudicated juvenile sex offenders placed a greater need on existing and new treatment programs. This increase in both programs and juvenile sex offenders led to more research on the causes and treatment of juvenile sexual offending. Despite the uptick in studies examining juvenile sex offending, the number of empirical studies remained small.¹⁴ Gail Ryan, who wrote several texts on juvenile sex offending and adolescent development, stated that a large body of legislation, aimed at juvenile sex offenders since the 1980s, was

based on unsubstantiated and non-empirical findings, which pointed out a need for “rigorous evaluations” of juvenile sex offender treatment.¹⁵

How different are juvenile sex offenders from their non-sex offending counterparts? It has been argued that the two groups are vastly different¹⁶¹⁷. Most research¹⁸ 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. Brown and Burton¹⁹ found that juvenile sex offenders were also found to be more hyper masculine than their same age non sex offending peers, and tended to believe that women were thought to be only worthy for sexual gratification.

How and where do young people develop an idea that other humans are only to be used to satisfy sexual urges? Social Learning Theory²⁰ states that children often learn behaviors by observing influential adults in their lives. Learning starts before experience, and that the observation of deviant behavior by adults in a child’s life may serve as reinforcement to commit such behaviors in their own lives.²¹²² Inappropriate sexuality, poor relationships, violence, and criminality are often found in juvenile sex offenders’ families.²³

These negative behaviors and illegal activity, in the juvenile’s environment, was found in emotionally abusive families 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.²⁴

Emotional abuse is often committed by parent figures who are in a position of power that may render the child vulnerable. Emotional abuse can “damage the behavioral, cognitive, affective, social, and psychological functioning of the child.”²⁵ For juvenile sex offenders, childhood emotional abuse was a “common developmental risk factor” for pedophilia, exhibitionism, rape, or multiple paraphilias.²⁶

Families with adolescents who have displayed inappropriate sexual behavior have been characterized as being “unstable, with few resources,”²⁷ 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.²⁸

This unstable family unit may be characterized by a family or caregiving system that displays 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 model for future intimate behaviors.

Juveniles or adolescents who experience such unstable caregiving may also experience disrupted attachment with their caregivers or parents. In his 1989 study, Marshall wrote that adolescents disaffected by rejecting and distant parents often cannot develop secure attachments with caregivers and peers. This may cause them to develop an inhibited sense of intimacy, as displayed by coercive sex, throughout their life. Marshall also wrote that these juveniles often develop poor social skills and less than appropriate emotional regulation, which may lead to loneliness. This loneliness often causes the juvenile sex offender to gain intimacy through forceful or inappropriate means, such as forced sex.²⁹

The relationship the poorly 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.³⁰ Because poorly attached juvenile 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 juvenile claims to understand the child.³¹

The Study

Data were collected from 502 male participants, residing in six secure juvenile facilities in a large, Midwestern state. This was a secondary analysis of the data, which were first gathered in 2004.

The following questions were applied to the data:

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?

The group was split into 332 juvenile sex offenders, and 170 non-sex offenders. The respondents ranged from 12-21 years. In addition to asking

respondents demographic information, such as age, educational level, history of sexual abuse, and offending history, family history was gathered. 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.” In addition, the Childhood Trauma Questionnaire (CTQ) and the Inventory of Parent and Peer Attachment (IPPA)³² gathered data regarding emotional abuse and parental attachment, respectively.

The specific type of sexual assault was measured in the questionnaire by the use of the SERSAS.³³ Respondents were asked 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.

Results of the Study

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.

To answer the first question, “What effect does exposure to emotional abuse have on juvenile sex offending?” it was discovered that 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.

In order to answer the second question, “Do juvenile sex offenders experience more emotional abuse and display more severe behavioral difficulties than non-offenders?”, 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.

The third question, “What additional effects does caregiver instability and less than secure parental attachment have on juvenile sex offending?” was addressed by examining the relative strength of the variables of parental attachment and the eight parent caregiver instability variables of (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.

Discussion

A large majority (approximately 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.^{34 35 36} Williams³⁷ 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 and colleagues³⁸ wrote that juvenile offenders who were emotionally abused were at high risk for such offenses as exhibitionism and multiple paraphilias.

Those respondents who perceived themselves to suffer a “lower level” of emotional abuse victimization, still 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. In comparison, those perceived to have suffered high levels of emotional abuse committed more penetrative or hands-on offenses; 74.5% fondled, 66.2% forced oral sex, and 54.7% committed rape.

It was discovered 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 strength of these disruptive to the family variables, such as homelessness, match with the findings of other researchers, who stated that family violence and instability were often found in homeless situations.^{39 40} 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. This may be attributable to the design of the IPPA, which is a 75 question device that asks similarly worded questions. This design may add to test fatigue for the respondent. Also, it should be noted that many juveniles and adolescents tend to idealize their relationships with their caregivers.⁴¹ Additionally, because many caregiver associations are the only adult relationships the respondent may know, there is no template to compare the affiliation to for the respondent. Simply put, their family may be all they know regarding adult interaction.

Practice Implications

While those who work with juvenile sex offenders are often aware of their clients' prior behavior, it is essential to research their feelings about their parents or caregivers, and their home environment, in order to compile a more complete assessment of behavior and risk for re-offense. Pledging to commit to a comprehensive relapse prevention plan means little if the client cannot come to terms with the various forms of abuse to which they have been subjected, or is unable to make sense of an unstable and often chaotic upbringing.

As we wonder why these juveniles commit such sexually offensive acts, Social Learning Theory helps to explain the behavior noted in this study. Mastery over a situation is gained by re-creating behavior that they believe will garner them praise. It is crucial for the practitioner to not only note family history, but to assess how behaviors within the family and home were displayed or reinforced.

Those who work with sexually offensive youth will want to discover the emotional history of the client, given that this study's findings showed that even low levels of emotional abuse correlate strongly with penetrative sex offenses. The findings illustrate a need for those who work with such juveniles to be proficient in identifying the effects of emotional abuse and, as found in this study, the possible behaviors emotionally abused at risk youth can present.

Anyone who works with homeless youth, or those whose families have lost their housing, need to be aware of the effects of such experiences on the client. The trauma of losing your home, or the instability of not knowing where you will sleep that evening or what school you will attend, may offer an emotionally abused child a number of chances to sexually act out, as they live in a transient and often unsupervised world.

Successful juvenile sex offender treatment includes an assessment of the client's feelings towards family members. A client's progress in treatment often accounts for dynamic and static factors. Static or historical factors do not change. Dynamic factors—feelings and thoughts about sex, sexuality, victims, or intimate relationships—can change, and that ability to evolve, is often an attribute of successful juvenile sex offender treatment.⁴² 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. The helper's role is critical in aiding families to pinpoint what risk factors exist in the home, such as many of this study's variables (physical abuse, domestic instability, and emotional abuse), in order to establish a more supportive home and family setting and to reduce the odds of further sexually offensive behavior.

Limitations of the Study

The study's participants were limited to 332 juvenile sex offenders in a large Midwestern state. While 332 is a robust number, it would be challenging to generalize the results to the close to 178,000 juvenile sex offenders in the United States. Also, the survey was conducted during a one day period and may be but a brief "snapshot" of how respondents were feeling at the moment. As all respondents were male, these results should not be generalized to a population of female juvenile sex offenders, whose etiology of offending, and treatment needs are markedly different from juvenile males.^{43 44 45} Female offenders generally commit fewer offenses than their males, undergo higher percentages of sexual victimization, and often offend in conjunction with a partner.^{46 47}

It should be noted that the survey was conducted at inpatient facilities only. Those living at home were not included, and while the results were substantial for the effects of emotional abuse and parent and caregiver instability on offender status, future research may want 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 the study's variables.

Summary

The relationship between emotional abuse and parent and caregiver instability on juvenile sex offender status has been shown to be quite significant. While an unstable home environment may be observed, it still remains that emotional abuse may have a fragile, hard to define, quality. Indeed, what is emotionally abusive to one youth may be a normal familial interaction to another. However, the relationship between emotional abuse and juvenile sex offending was found to be quite strong. Little emotional support and warmth within the family may add to the assemblage of risk factors that cause a juvenile to offend sexually. It is noteworthy for those who assess and treat juvenile sex offenders to understand that even low levels of emotional abuse may cause a juvenile offender to commit a more serious penetrative or hands-on sexual offense.

Notes

¹ United States Department of Justice, 2014

² National Center for Missing and Exploited Children, 2009

³ Zimring, 2004

⁴ Ibid

⁵ Ibid

⁶ Ibid

⁷ Ibid

⁸ Ibid

⁹ Ibid

¹⁰ Ibid

¹¹ Ibid

¹² Ryan and Lane, 1997

¹³ Zimring, 2004

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¹⁵ Ibid

¹⁶ Brown and Burton, 2010

¹⁷ Miner and Munns, 2005)

¹⁸ Felizzi, 2011

¹⁹ Brown and Burton, 2010)

²⁰ Bandura, 1986

²¹ Ibid

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²³ Lee et al., 2002

²⁴ Righthand and Welch, 2004

²⁵ Doyle, 1997

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- ³⁰ Ibid
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- ⁴² Fanniff and Becker, 2006
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CHAPTER TWO

BIG, BLACK, TEENAGED QUEENS: NAVIGATING INTERSECTIONS AND UNDERSTANDING “NO FATS, NO FEMS” PHENOMENON

EDWARD D. SCOTT, JR.

In 1990, a white man named Patrick Giles published an article in *Outweek* magazine where he described a negative encounter he had at a New York night club for queer-identified people.¹ The unnamed night club was facing a protest from the Black queer community for its “no-Blacks” policy. By Giles’ account, the protesting crowd became too overwhelming for the club staff at the door to continue to prevent its entry, so the club began to admit the Black patrons. Giles wrote that when he got to the door, the club staff prevented him from entering the club, and the bouncer remarked, “No whales in here.” Giles objected, and he was assaulted by the bouncer.

In the op-ed, Giles goes on to talk about how he takes issue to the “Lose weight, or get lost” mentality emerging in the queer community, specifically noting that it may not actually apply to lesbian women, as well as noting that he did not appreciate being placed in the “queer ghetto” because of his size.² Giles did well to say that the emerging beauty standards, supplemented with prejudice actions like what he experienced, suggest that physically-larger queer community members are not beautiful, not desirable, not valued. Giles took issue to the fact that such a suggestion runs counter to the queer community’s best interest: non-discrimination and inclusion. The narrative was broadly received, and has been a common point of reference for research related to sizism in the queer community. However, there are a few additional underlying issues both with and in Giles’ presentation that give cause for greater concern.

After Giles places context on the assault (i.e., mentioning what was happening outside the club), he does not again mention the ban on the Black people, which was the original cause of the protest and high volume of patrons. While some might argue that Giles expounding upon the racial dynamics of the protest would have been beyond the scope and purpose of his op-ed, another likely explanation is that the racial dynamics were not a factor of his critical consciousness, which speaks to privilege. Throughout Giles' article, he notes that there needs to be consistency in the queer community's message about inclusion. He wrote, "As long as we are bigots ourselves, all this fine talk of solidarity and community will never grow beyond talk."³ However, when saying so, he only juxtaposed oppression he faced as a big man to the discrimination and persecution queer people experience from their heterosexual peers. What happened to a reflection on the Black-banning policy? Race was the first issue.

While Giles' encounter definitely was an unfortunate experience, there is a preexisting racial component that must be explored. The narrative Giles presents causes one to posit a question about how his race impacted his understanding of the entire experience (i.e., how white privilege limited his perspective) and how his experience might have been different if he was both big and Black while being gay. Then, to take it a step further, given the multidimensional nature of preference politics in the queer community, and the connection often made between physical traits and perceptions of masculinity, there also is a need to look at how perceptions of masculinity might have contributed to the experience. Giles' article further prompts an interesting discussion about the interactions of multiple minority identities, how those interactions emerge in various media, and the potential harm those interactions have on young people finding their place within the queer community.

The Issue

Current literature related to the lived experience of gay, bisexual, and questioning (GBQ) males who identify as men largely limits analysis to individual factors' independent impacts on their queer experience (race *or* gender presentation *or* size *or* geographic location, etc.). There is a growing call for further exploration of multiple-minorities' lived experience, specifically those aiming to capture the long-term impacts of the daily stressors associated with multiple-minorities' identities. Holding membership to a marginalized community brings its own challenges to daily living, which literature broadly conceptualizes as *minority stress*.^{4 5} It also is important to note that minority stress is considered *additive*, which

means that it does not replace, but rather compounds the stressors that are shared with those of non-minority status.⁶

As such, those who carry multiple minority memberships experience oppression associated with each individual membership as well as the more nuanced and unique oppressions resultant of how those memberships compound and interact with one another. The theoretical framework used to conceptualize this is called intersectionality, which will be further discussed below.

This chapter speaks to intersectionality and explores the ways in which Black GBQ adolescents who are considered effeminate and overweight potentially are introduced to and impacted by the “No Fats, No Fems” Phenomenon (NF2). This analysis of the NF2 is inspired by the idea that being a part of multiple subaltern groups must be a consideration when conceptualizing an individual’s lived experience and promoting a positive developmental trajectory.⁷ Adolescence is a major period of sexual exploration and identity development, and that evolution takes place within a special sociocultural context that can be engaged through a variety of mediums. Thus, this chapter aims to explore the ways in which Blackness, fatness, effeminacy, and sexuality intersect to impact the developmental trajectories of teenaged males who survive within those ascribed identities simultaneously.

Within the gay, bisexual, and questioning community—specifically referring to men who have sex with men (MSM)—there is a phenomenon commonly regarded as “No Fats, No Fems,” which dubs those who present as both masculine and nonfat as being most sexually or romantically desirable.⁸ When combined with the evident racial divide that exists in the GBQ community, NF2 serves as an additional basis for stratifying men within the GBQ community in a way that grossly replicates heteronormative paradigms of male-value and masculinity.^{9 10} NF2 is a form of intragroup oppression in so much as it serves to establish a social hierarchy among those within the greater GBQ community, where fit is better than fat, “butch” (e.g., masculine) is better than “fem” (e.g., effeminate), and White is better than Black. These socially constructed norms and standards are taught and learned through a variety of mediums the moment a person begins to explore his GBQ identity. The phenomenon manifests itself in many forms and can be seen in a variety of arenas, with examples ranging from Giles’ aforementioned article to the more contemporary avenue of social networking sites and mobile applications targeting the gay community (e.g., Jack’d, Grindr, and Growlr).

Social media sites are any site that involves the creation and sharing of content (e.g., photos, sound files, videos, and other uploadable electronic

material).^{11 12} Social networking sites take the function of general social media sites a step further by adding the ability to create and manipulate individual and personalizable profiles through which one shares his or her media.^{13 14} There are three characteristics to social networking sites: 1) the user is able to create a unique profile that is associated with a specific web site or domain, 2) the user is able to communicate with other users through the profile, and 3) the user is able to manage the profile's content and interpersonal connections freely.^{15 16} Fundamental to the use of social networking sites is the creation of an online identity.

To facilitate the development of such identity, social networking sites often are structured in a way that encourages the interaction of folks with common interests or having similar demographics. Recent improvements to mobile technology have allowed social networking sites once only accessible via full web-browsing tools (e.g., desktop computers and laptops) to be converted into mobile form and accessible virtually anywhere there is a wireless internet connection. Some of the sites even exist solely on a mobile application (i.e., app) platform. Nevertheless, regardless of the form in which the social networking site comes, the function remains the same: connecting people.

However, there can be dangers to connecting people through social networking sites, particularly people who still are formulating their off-line identities (e.g., adolescents). Research suggests that strong, impactful relationships can be formed via social networking sites and affirms a direct relationship between those interpersonal connections and an individual's self-esteem.¹⁷ In instances where a person's self-concept is tied directly to his or her social networking interactions and online identity, therein lies the potential for harm if that person is met with rejection with which he is unable to positively cope. The maintenance of productive online identities and relationships is then paramount to the good mental, social, and emotional health of users; this seems to be particularly true for marginalized groups.¹⁸

So, when Black GBQ adolescents who are considered effeminate and overweight engage in social networking sites and mobile applications targeting the gay community as a way to explore and promote their raced sexual identity development, and they are confronted with overt racism, sizism, and effemiphobia, those encounters serve as negative acculturation experiences that tell those youth: "You're not welcome here;" "you have no place;" and "you have little-to-no value." The adolescents' development is potentially arrested, or they could be at-risk for adopting maladaptive behaviors to mitigate their loss of social capital due to their