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Family or Caregiver Instability, Parental Attachment, and the Relationship to Juvenile Sex Offending

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A violent or unstable home life—characterized by caregivers physically or sexually abusing children, physical violence in the home, homelessness, and other factors—and disrupted parental attachment are examined in this secondary data analysis for their possible relationship to juvenile sex offending. Parent or caregiver instability is measured by a demographic questionnaire administered to participants. Parental attachment is measured by the Inventory of Peer and Personal Attachment. The population included 502 adjudicated juvenile male sexual and nonsexual offenders in a Midwest state who responded to questionnaires in order to examine juvenile offending antecedents. The highest correlated parent or caregiver instability variables to juvenile sex offending status were multiple relocations or homelessness, children placed out of the home, slapping or punching in the home, and sexual abuse victimization. The quality of parental attachment had little impact on the respondents' offense status.

KEYWORDS *adolescent, homelessness, unstable families, sexual crime*

INTRODUCTION

While much has been written about the connection between a stable or unstable, violent or supportive family background and juvenile delinquency (Chen, Propp, Delara & Corvo, 2010; Kennedy, Edmonds, Dann,

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& Burnett, 2011; Schroeder, Osgood, & Oghia, 2010; Tyler & Melander, 2010; Tyler & Schmitz, 2013), little research examines the roles of disrupted parental attachment and caregiver instability on juvenile sex offending. This study utilized a secondary data analysis to investigate the effects of parent or caregiver instability and disrupted parental attachment on juvenile sex offending status. The study population was composed of 502 male adjudicated juvenile sexual and nonsexual offenders in a large Midwest state. The respondents answered questionnaires in an effort to examine juvenile offending antecedents and attitudes about sexual behavior.

JUVENILE SEX OFFENDING

As of December 2013, a total of 774,600 sex offenders were registered in the United States (National Center for Missing and Exploited Children, 2009). Of those, approximately 23%, or over 178,000, were juvenile offenders (United States Department of Justice, 2014).

Sexually offending behavior can be defined as any *sexual* interaction with a person of any age that is perpetrated (a) against the victim's will, (b) without consent, or (c) in an aggressive, exploitative, manipulative, or threatening manner (Ryan & Lane, 1997). The term "nonsexual offender," for the purposes of this study, refers to juveniles who have been adjudicated and incarcerated for crimes of a nonsexual nature. This behavior, often called "delinquent," includes assault, robbery, and drug offenses. Status offenses, reserved for juveniles, are included in this category for behaviors such as truancy and running away from home (Smith & Stern, 1997).

Juvenile sex offenders have been found to be older than nonsexual offenders at their first arrest (Ford & Linney, 1995; van Wijk, Vreugdenhil, van Horn, Vermeiren, & Doreleijers, 2007) and to have higher rates of sexual victimization than nonsexual offenders (Marini, Leibowitz, Burton, & Stickle, 2014; van Wijk, Vreugdenhil, van Horn, Vermeiren, & Doreleijers, 2007). Duane, Carr, Cherry, McGrath, and O'Shea (2003) found in their comparison study of juvenile sex offenders and nonsexual offenders that sexually abusive adolescents have experienced more family violence and disruption as well as physical or sexual abuse than their nonsexual offending counterparts.

PARENT OR CAREGIVER INSTABILITY

The effects of parent or caregiver instability on juveniles have been well documented in the literature (e.g., Ackerman & Brown, 2010; Ferguson, 2009; Forman & Davies, 2003; Lian & Bolland, 2014; Marcynyszyn, Evans, & Eckenrode, 2008). Parent or caregiver instability is defined as a caregiving unit characterized by lots of moves or homelessness and/or parents or caregivers

who physically, sexually, or emotionally abuse or neglect juveniles under their care. Physical abuse can be defined as punching, kicking, slapping, or any other physical violence directed toward family members, guests, or others residing in the home. Caregiver instability can be further characterized by caregivers committing illegal acts in the home, frequent changes in who lives in the home, and placement of family members outside the home, such as in residential care, foster care, or with other families. It should be noted that homelessness, whether unsheltered (living on the street) or sheltered (living in a shelter, or residing in a family or friends' home) is often a result of job loss or economic hardship and may not be a deliberate attempt to inflict instability on the family unit. For this study, respondents were asked if their families had suffered a loss of home as a result of parental instability, such as drug abuse or committing illegal acts.

Families with adolescents who have displayed inappropriate sexual behavior have been characterized as being "unstable, with few resources" (Barbaree, Langton, & Peacock, 2006, p. 424). These unstable families are often characterized by "disorganized family structures" (Thornton et al., 2008, p.362), which include domestic violence, poorly defined personal and sexual boundaries, parental sexual victimization, family dysfunction, substance abuse issues of one or both parents, and the absence of a biological parent (Thornton et al., 2008). These disordered family structures, along with an unstable home environment, may produce externalizing behaviors in juvenile sex offenders and nonsexual offenders, such as inappropriate sexual activity, sexual offending, domestic violence, drug and alcohol abuse, criminal activity, and antisocial behavior (van Wijk, Vreugdenhil, van Horn, Vermeiren, & Doreleijers, 2007).

ATTACHMENT AND JUVENILE SEX OFFENDERS

Attachment theory has evolved in several phases since Bowlby's interpretation of the mother-infant interaction (Bowlby, 1969). Smallbone and Dadds (1998) researched the role of childhood and adult attachment and discovered that sex offenders reported less than secure attachment as children and adults. Securely attached adolescents likely hold an internal working model of themselves as competent and worthy of care. Their internal representations of others are positive; they are seen as people who can be responsive and supportive (Bartholomew & Horowitz, 1991; Bowlby, 1969; Riggs, 2010). Children who are not securely attached can hold an internal working model of the self as unsure, incompetent, and tentative. They may often view others with mistrust and hold an internal model of others as cold and uncaring (Riggs, 2010).

Marshall (1989) wrote that juveniles with negative and rejecting caregiver experiences often develop poor social skills and less than appropriate

emotional regulation and display a poor ability to differentiate among intimacy, sexuality, and aggression. Juveniles alienated by rejecting and distant parents are often unable to develop secure attachments with caregivers and peers. These juveniles may later carry that representation of a relationship throughout their life, which may cause them to develop an inhibited sense of intimacy. The loneliness that may result from poor and insecure attachments may cause the juvenile sex offender to gain intimacy through inappropriate means, such as forced sex (Barbaree, Marshall, & Hudson, 1993). Anxious-ambivalent and avoidant attachment styles may be specifically linked to such inappropriate sexual behavior and juvenile sexual offending (Stinson, Sales, & Becker, 2008).

The relationship the poorly attached adolescent sex offender has with the child victim often imitates what the offender views as an ideal intimate relationship, although the victim is much younger (Stinson et al., 2008). Adolescent child molesters, who often feel uncomfortable in the presence of same age peers, seek out nonthreatening child victims as they are perceived as less judgmental and discerning than adults (Marshall & Mazzucco, 1995).

However, Stinson and colleagues (2008) wrote that directionality regarding attachment may be in question and that not all juvenile offenders have reported negative caregiver attachments. Rich (2006) further doubted attachment's role as a strong correlate in juvenile sex offending when he stated that there is no clear empirical evidence that attachment styles are an important area of dysfunction in juvenile sexual offenders.

ATTACHMENT AND JUVENILE NON-SEXUAL OFFENDERS

Poor parental attachment is evident with juvenile nonsexual offenders as well. Katsiyannis, Zhang, Barrett, and Flaska (2004) found that both avoidant and ambivalent attached juvenile nonsexual offenders reported a lowered need for support from others and tended to participate in poorly formed and superficial relationships with peers. Elgar, Knight, Worrall, and Sherman (2003) wrote that juvenile nonsexual offenders often felt detached from and let down by their parents.

METHODS

Characteristics of the Sample Population

A total of 502 surveys were collected from adjudicated juvenile male sex offenders ($n = 332$) and male nonsexual offenders ($n = 170$). The respondents ranged in age from 12 to 20 years, with the average age of respondents at 16.6 years and a standard deviation of 1.53 years. The average age of the juvenile sex offender respondents was 16.7 years with a standard deviation of 1.65 years. For the juvenile nonsexual offender group, the average age

was 16.5 years with a standard deviation of 1.28 years. The racial breakdown of the offender group was: White = 66.6%; Black = 28.9%; Native American = 24.4; Hispanic = 10.5; Asian = 1.2%; Arab American = 1.2% and other = 12.3%. For the juvenile nonsexual offender group, the racial breakdown was as follows White = 42.9%, Black = 54.1%, Native American = 14.7%, Hispanic = 4.1%, Asian = 1.2%, Arab American = 0%, other = 1.2%. The percentage totals were greater than 100% for each group due to the construct of the demographic question, which asked, "Which racial group do you identify with?" It is possible that several answers were checked by the respondents.

Both the juvenile sex offender and nonoffender groups were attending in-placement educational programs while incarcerated. The grades ranged from 5th to 12th grade, plus vocational program training for those post-high school age.

Study/Research Design

This study is a secondary analysis of an existing data set, which was first gathered in a large Midwest state in 2004. Surveys were administered to 505 male juvenile sexual and nonsexual offenders who were placed in secure facilities post-adjudication. Of the 505 surveys administered, 502 were usable.

Sample and Data Collection Procedures

Approval for this study was obtained through the Widener University Institutional Review Board (IRB) in June 2010. The data set was collected in spring 2004 using six pen-and-paper surveys from six juvenile residential placement facilities in a Midwest state.

The surveys were administered in a group setting in each of the residential facilities. Respondents were separated to prevent participants from viewing one another's answers. No monetary incentives were provided, although free time in the placement setting and pizza were offered for good behavior during the administration of the questionnaire. Graduate research assistants were available to assist with the reading of the surveys for respondents who had difficulty reading or comprehending the questionnaire.

Instrumentation

DEMOGRAPHIC QUESTIONNAIRE

Demographic questionnaires were used in the original data collection. The demographic questions, not the data, have been used in previous studies (Burton, 2003; Burton, Miller, & Shill, 2002). Demographic data were

collected, including the respondent's age, educational level, sexual abuse and sexual offending history, and historical questions regarding their families. This questionnaire also asked which types of nonsexual offenses were committed by the respondents. Responses included stealing, burglary, grand theft, assault, robbery, drug sales, attempted murder, and murder.

SELF-REPORT SEXUAL AGGRESSION SCALE (SERSAS)

The specific type of sexual assault was measured in the questionnaire by the use of the SERSAS (Burton, 2003). The SERSAS was designed by Burton and Fleming (1998) and was created to measure juvenile sex offenders' abuse of their victims. The data analyzed were based on asking respondents if they had 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 had forced their own penises, fingers, or objects into their victims' private areas. Respondents were also asked if they had sexually assaulted animals. Voyeurism, exposure, fondling, rape, and animal abuse are considered crimes in all states (U.S. Department of Justice, 2010). Sexual acts that involve force and coercion are considered the "most extreme end of the sexual behavioral spectrum" (Broach & Petretic, 2006).

PARENT/CAREGIVER INSTABILITY

The study variable of parent or caregiver instability was derived from questions within the SERSAS that asked respondents to describe their family setting by asking, "Do these describe your family and/or home: Frequent changes in who lives in the home, neglect of children, physical abuse of children, sexual abuse of children, illegal acts by family members (other than you), 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?" All questions were rated by the respondent as "No," "Yes," or "Don't know."

INVENTORY OF PARENT AND PEER ATTACHMENT (IPPA)

The IPPA was developed to assess juveniles' perceptions of the positive and negative dimensions of their relationships with their parents, caregivers, or peers (Armsden & Greenberg, 1987). Quality of communication, degree of trust, and extent of anger and alienation are measured. The measurement is a self-report questionnaire with a Likert-scale response format. This study utilized the 25 question maternal and paternal attachment scales of the IPPA and excluded the peer attachment scales from analysis. Quality of communication,

degree of trust, extent of anger, and extent of alienation were four subscales included in both maternal and paternal attachment questionnaires.

RESULTS

Descriptive statistics were computed for the independent variables of parental attachment and parent or caregiver instability. The number of assaults and victims as well as the types of acts committed by the respondents were tabulated and treated as dependent variables in this study. Pearson correlation coefficients were used to determine the strength of association between acts committed, identified as voyeurism, fondling, forced oral sex, penetration by the victim and to the victim, sex with animals, and independent variables. Logistic regression analysis was used to determine the association between parent or caregiver instability and juvenile sex offending. Chi-square analysis was used to determine the goodness of fit among all variables. Data were missing on each variable, which may be due to fatigue or a refusal to answer questions. Missing data were managed by assigning a score of 99 or 96.

Number of Assaults and Victims

The number of assaults refers to the number of sexual assaults admitted to on the demographic section of the questionnaire. "How many people have you sexually abused?" was asked to determine the number of victims and assaults each respondent claimed, in varying increments, from 1–90.

Outcome Variable: Juvenile Sex Offending

Within the population of 502 respondents, 332 sexual offenders were identified. The most frequently reported type of assault was the hands-on act of fondling (88.3 %; $n = 293$). Forced oral sex was the next highest reported act (51.8%; $n = 172$). Placing their fingers, objects, or penis into their victims' private parts was third (44.2%; $n = 147$). The act of exposure was fourth (36.7%; $n = 122$). Surreptitiously viewing others having sex (voyeurism) was the fifth most reported act (20.2%; $n = 67$). Forced penetration was sixth most frequent act (11.1% $n = 37$). Sex with animals was the least frequently reported act (1.2%; $n = 4$).

The nonsexual offender group reported very little sexual perpetration, with 6 out of 170 respondents (3.5%) admitting to any inappropriate sexual activity. The most frequently reported acts for the nonsexual offenders were exposure and watching sexual acts (2.4%; $n = 4$), followed by fondling and oral sex (8%; $n = 3$). Penetration was reported by 2 (1.2%) nonsexual offenders, and no other sexual offenses were reported.

TABLE 1 Descriptive Statistics for Parental Attachment: Offender versus Nonoffender Groups

Variable	Offender <i>M</i> (SD)	Nonoffender <i>M</i> (SD)	TOTAL <i>M</i> (SD)	<i>t</i> (df)___
Maternal Attachment	91.3 (25.1)	97.4 (25.0)	93.3 (25.1)	2.5 (461)
Paternal Attachment	82.1 (28.2)	88.4 (27.2)	83.8 (28.0)	2.0 (363)

Note. All *t*-tests were significant at $p < .05$ comparing offender and nonsexual offender groups.

Independent Variables: Parent or Caregiver Instability and Parental Attachment

Table 1 presents the descriptive statistics for parental attachment, while Table 2 presents the descriptive statistics of parent or caregiver instability. The sample sizes for these yes/no questions are somewhat reduced as a small subset of respondents answered “don’t know.” This ranged from 13 to 26 respondents depending on the item (this did not occur for two items that had complete data available). In subsequent analyses that used this variable, respondents who answered “don’t know” were excluded. A series of chi-square tests that were all significant showed that parental caregiver instability was greater for the juvenile sex offender group than for the nonsexual offender group. All differences between groups were statistically significant, with the offender group having more experiences with poorer maternal and paternal attachment (higher scores on the IPPA indicate better attachment) than the nonsexual offender group.

Correlation Analysis

While the correlations between the variables of parent or caregiver instability and the sexual acts committed by the offender group were low, they

TABLE 2 Logistic Regression Parent/Caregiver Instability and Parental Attachment: Effects on Juvenile Sex Offending Status

Variable	Beta	SE	Wald	df	Sig	Odds Ratio
Lots of moves or homelessness	-1.540	.550	7.841	1	.003*	4.67
Children placed out of home	.906	.539	2.827	1	.046*	2.48
Sexual abuse	-1.214	.727	2.787	1	.047*	3.37
Observing hitting, slapping or punching	-.716	.478	2.239	1	.063	2.04
Neglect	.904	.873	1.072	1	.155	2.47
Physical abuse	-.453	.741	.374	1	.275	1.57
Frequent changes in who lives in home	-.089	.568	.025	1	.438	1.09
Illegal acts	-.094	.416	.051	1	.410	1.09
Maternal attachment	.000	.009	.009	1	.463	1.00
Paternal attachment	.000	.006	0.17		.448	1.00

Note. Beta values greater than 1 refer to the change in standard deviation in the dependent variable.

nonetheless were statistically significant $p < .01$ level. The strongest correlation between parent/caregiver instability and the sexual acts committed by the offenders was between the parent and caregiver instability variable of sexual abuse and fondling (.254). Sexual abuse and forced oral sex (.188) was the second strongest correlated variable, while sexual abuse and watching someone having sex (.152) and sexual abuse and exposure (.147) were, respectively, the third and fourth strongest correlated variables. The variable of frequent changes in who lives in the home were highly correlated with watching someone have sex (.157) and penetration of the victim with fingers, penis, or objects (.150). Neglect was highly correlated with watching someone having sex (.155) and exposure (.181). Physical abuse by a family member or a caregiver was highly correlated with the acts of watching someone having sex (.125) and exposure (.178), while observing hitting or being hit was highly correlated with watching someone having sex (.123) and penetration of the victim with fingers, penis, or objects (.145). Maternal and paternal attachment was not highly correlated with any of the sexual acts.

The parent/caregiver instability variable of illegal acts, or viewing their parents or caregivers committing criminal activity ($r = .323$, $p < .01$), was highly correlated to offender status. Witnessing hitting, slapping, or punching in the home was the third highest correlated variable ($r = .320$, $p < .01$), while sexual abuse ($r = .285$, $p < .01$), homelessness ($r = .281$, $p < .01$), physical abuse ($r = .268$, $p < .01$), neglect ($r = .221$, $p < .01$), frequent moves ($r = .213$, $p < .01$), and children placed outside the home ($r = .117$, $p < .05$) ranked in descending order.

Multivariate Analysis

Logistic regression was utilized to investigate the effects of parent or caregiver instability and parental attachment on juvenile sex offending status. The following question was analyzed: What effects do parent or caregiver instability and parental attachment have on juvenile sex offending status in the study population? Logistic regression was used to analyze this question and included examining the relative strength of the variables of parental attachment (mother and father separately) and the eight parent caregiver instability variables: (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. The parent/caregiver instability variable of "lots of moves" was the strongest predictor of offender status, followed by children placed outside of the home and sexual abuse. The parent/caregiver instability variables significantly increased the Nagelkerke R-square to .30 from .20. A goodness of fit

chi-square (Hosmer & Lemeshow test) was not significant at .749, again suggesting that the model provided adequate fit.

Odds ratios (OR) were computed on all variables and ranked in descending order as predictors of sexual offender status. Using a Wald chi-square test for the beta values, three variables were significant: lots of moves (OR = 4.67, $p < .003$), children placed outside the home (OR = 2.48, $p < .046$), and sexual abuse (OR = 3.37, $p < .047$). Maternal and paternal attachment did not significantly contribute to the model as they were two of the weakest predictors of sexual offender status, with no ability in terms of odds ratios to separate juvenile sex offenders and nonsexual offenders (OR = 1).

DISCUSSION

The strongest predictive variable of offender status was the parent or caregiver instability attribute of 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; and physical abuse. The nonsex offenders had significantly fewer self-reported experiences with an unstable or violent home life than the identified juvenile sex offenders.

While the variable of homelessness or lots of moves may not indicate inappropriate parental behavior or unstable caregiving, these findings are consistent with a number of studies that suggest that family violence and instability, such as witnessing parents or caregivers hitting, slapping, or punching; physical and sexual abuse victimization; and neglect were often found in homeless situations (Grant, Gracy, Goldsmith, Shapiro, & Redlener, 2013; Pardeck, 2005; Tyler & Schmitz, 2013). Pardeck (2005) also found that sexual abuse and physical abuse had the highest degrees of occurrence in his study of child maltreatment among homeless families.

The nonsignificant finding for parental attachment in this study appears to contradict several studies on the role of attachment in juvenile sex offenders (Creeden, 2013; Goodrow & Lim, 1998; Marshall et al., 1993; Miner et al., 2010). Indeed, many of the study's respondents stated that their attachment to their mothers or fathers was appropriate or nonproblematic.

The relative lack of strength of the parental attachment variable may be attributable to the respondents "idealizing" their parents or caregivers as warm and supportive. This notion is consistent with the findings of Noshpitz (1994), who wrote that idealization of parents may allow a "difficult pattern of defense [to emerge] . . . that in which the very deprivation that gave rise to the inner sense of worthlessness and unlovability leads as well to an idealization of the neglectful and punitive caregiver" (p. 360). Idealization often serves as a defense against a painful realization of the parents' or caregivers' shortcomings and may be an adaptive mechanism to allow the juvenile to function (Barth, 2010). It is also possible that the respondents may idealize

parents or caregivers as a coping method in order to adjust to life while incarcerated (Shulman & Cauffman, 2011).

Another possible explanation for the lack of strength of the parental attachment variable is noted by Lehmann (2008), who found that the use of the IPPA scale and other “self-report attachment instruments may not assess attachment security within the sex offender population” (p. 148). Lehmann (2008) also wrote that limitations with such self-report instruments may include response bias and an “unconscious defensive exclusion of traumatic events” (p. 148) that the IPPA and similar questionnaires fail to capture. Respondents, therefore, may be blocking or repressing negative thoughts, beliefs, or perceptions of their parents or caregivers.

While attachment has been extensively discussed in the literature, parent and caregiver instability in relation to juvenile sex offending has been understudied. This lack of research is of concern, as social learning theory states children often learn what they see (Bandura, 1986). This study presents opportunities for those who wish to further examine the role an unstable and unsupportive home life plays in the formation of risk factors within a juvenile’s environment.

Further examination of a juvenile offender’s family and home life should be considered. As many states reconsider the utility and economics of sending juveniles to residential placements, the need for more outpatient and community-based care may necessitate that juvenile sex offenders reside with their families during treatment. Indeed, increased outpatient and community-based care may compel families to become more involved and vested in treatment (Letourneau, Bandyopadhyay, Sinha, & Armstrong, 2009).

The findings of the current study resonate with the research of Bandura (1977) who stated that the learning of behavior through observation was sufficient to reinforce such behavior in a child’s developing brain. While the explanation for sexually offensive behavior displayed by the study’s respondents cannot be solely attributed to social learning theory, the observation of an unstable parent or caregiver who is sexually and physically abusive, engages in illegal acts, and is emotionally abusive toward intimate partners may serve as a powerful model for the impressionable child. Thus, social learning theory may provide an explanation for juvenile sexually offensive behavior; Bandura and Walters (1963) wrote that inappropriate sexual behavior can be the result of “parental encouragement and reinforcement of such behavior” (p. 154). Burton, Nesmith, and Badten (1997) found that exposure to negative family norms and behaviors, such as sexual abuse, criminality, domestic violence, and drug or alcohol use and abuse can profoundly and negatively affect the conduct of the child. While 76% of the juvenile sex offenders in this study stated they had observed unstable parental behaviors, the role of other societal influences, such as television, access to the Internet pornography, drug and alcohol use, and peer influences must also be

considered (Burton, Duty, & Leibowitz, 2011; Duane et al., 2003; Dunn et al., 2008; Marini et al., 2014; Nabi & Riddle, 2008; Seto & Lalumière, 2010).

IMPLICATIONS FOR PRACTICE

While those who engage in clinical work with juvenile sex offenders may be aware of their clients' prior behavior, it is essential to assess clients' thoughts and feelings about parents and caregivers as well as home life in order to compile a more complete and effective assessment of behavior and risk for reoffense. If the practitioner views the family as constantly evolving, socially and sexually, the development of emotional competence and attachment may be best captured by in-depth and dynamic histories such as Miccio-Fonseca's (2014) "Family Lovemaps," which chart the juvenile's development within the psychosexual realm. This developmental tracking could bring attention to deficits in intimacy, which could assist in determining risk factors for inappropriate sexual behavior. Having the client admit to behavior and pledge to work on a comprehensive relapse prevention plan means little if the client cannot come to terms with the abuse he or she may have suffered or tries to make sense of an unstable, nonsecure, and chaotic upbringing and home environment.

Furthermore, those who practice with youth and families who are homeless must be aware of the effects of the trauma of losing one's home, the instability of not knowing where they will reside, what school they will attend, who their peers will be, and other outcomes of an uncertain existence. Such experiences may contribute to a traumatized juvenile's tendency to engage in sexually inappropriate or offensive behavior.

LIMITATIONS

The study's participants were limited to 332 male juvenile adjudicated sex offenders in a large Midwest state. Therefore, while 332 is a robust number, it would be difficult to generalize the results to the close to 34,000 registered juvenile sex offenders in the United States (Puzzanchera, Adams, & Sickmund, 2010). It should also be noted that the survey was conducted during a 1-day period and may be only a brief "snapshot" of how the respondent was feeling that particular day.

Second, the study was conducted on male adolescents. 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 (Elliott, Eldridge, Ashfield, & Beech, 2010; Freeman & Sandler, 2008; van der Put, van Vugt, Stams, & Hendriks, 2014; Wijkman, Bijleveld, & Hendriks, 2010). Female offenders have been noted to commit fewer offenses

than their male counterparts, suffer higher percentages of sexual victimization, and often offend in conjunction with a partner (Johansson-Love & Fremouw, 2009; Wijkman et al., 2010).

Third, it should be noted that the survey of the respondents was conducted at inpatient facilities throughout the state. Juveniles who were living at home were not included; therefore, while the results were convincing for the effects of parent and caregiver instability on offender status, it would be a consideration for future research to assess the feelings, thoughts, and emotions of juvenile offenders who are living and interacting with parents or caregivers at the time of survey so as to evaluate perceptions of parent and caregiver instability and parental attachment.

Finally, as mentioned, the idea that the IPPA may not be a wholly accurate measure of internalized perceptions of parental attachment merits further exploration. The IPPA scales used in this study were from the initial version, published in 1987 (Armsden & Greenberg, 1987). Since the data was first gathered for the original study in 2004, the IPPA has undergone revisions that claim to better capture perceptions of parental attachment in both younger and older adolescents (Gullone & Robinson, 2005). In addition, the factor structure of the newer IPPA-R can more accurately represent attachment quality in lower income families (Johnson, Ketring, & Abshire, 2003). Test fatigue, as noted, may also be a consideration in the accuracy of the study's findings.

CONCLUSIONS

This study is one of only a few that examines the relationship of the combination of parent and caregiver instability and parental attachment on juvenile sex offending. The relatively weak standing of disrupted parental attachment as a correlated factor of juvenile sex offending in this study may be a result of the incarcerated juveniles' desire to idealize their view their parents or caregivers positively. The findings on the effects of parent and caregiver instability in this study are consistent with research that reported juvenile sexual acting out and criminality may be a result of poor boundaries and chaos within the family (Dallaire & Wilson, 2010; Merrick, Litrownik, Everson, & Cox, 2008). The variables most strongly correlated for juvenile sex offense status in this study, homelessness or lots of moves, merits further research, as understanding the dynamics of not having a secure place to live, combined with the lack of supervision in a homeless setting, is critical for creating treatment options for at-risk clients. Observing hitting, slapping, or punching in the home may serve to reinforce negative behavior in the juvenile's mind and, in turn, cause them to display such behavior when involved in an intimate relationship. Juvenile sexual abuse victims within the family structure are often considered

at risk for replicating what was perpetrated on them as they struggle to make sense of their victimization.

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AUTHOR NOTE

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