## Qualifications For Providers of Sex-Specific Assessment and Treatment

The treatment of adolescent sexual issues is specialized and differs from generic mental health treatment approaches. Indeed, "treatment requires a specially skilled clinician and clinical approach;" thus a "high level of therapist skill for clinicians working with youthful offenders is paramount" (Ward, T.; Polaschek, D. and Beech, A. <u>Theories of Sexual Offending</u>, John Wiley & Sons, Ltd. 2006, page 324). Accordingly, sex-specific treatment should be provided by licensed master's level mental health professionals who have additional training and experience in working with adolescents, sexual abuse and sexual abuse issues and have been trained or certified by nationally and/or State recognized organizations (i.e., NOJOS, ATSA, Safer Society). [See NOJOS Clinical Certification section]

Specifically, at a minimum, mental health clinicians working with youth who engaged in sexual misconduct and/or sexually abusive behavior need to have specialized "sex-specific" training and experience in the following specialized skills: (1) adolescent development involving expected and normative attitudes, emotions, experiences, interactions, and behaviors of childhood and adolescent development; (2) juvenile antisocial behavior or deviations in child and adolescent behavior that fall outside of age-appropriate and age-expected social norms that propel the youth to engage in antisocial or criminal behaviors in an effort to meet personal needs; (3) adolescent psychopathology involving the nature and diagnosis of mental disorders; (4) adolescent assessment requiring the capacity to evaluate, understand and interpret behavior with a special emphasis on projecting risk for future antisocial and sexually abusive behavior; (5) and knowledge of, or at least a strong theory about, the dynamics of healthy sexual development and development of sexually abusive behavior including its onset, and maintenance over time [Rich, P. (2009). Juvenile Sexual Offenders: A Comprehensive Guide To Risk Evaluation. Hobokon, NJ: John Wiley]. See also, ATSA Adolescent Practice Guidelines, 2017].

## Additional suggested areas of basic foundational training include the following:

- Child development, including typical sexual development and behavior
- Differential diagnosis of childhood mental health and behavioral problems
- Specific familiarity with common problems seen among children with sex behavior problems, including non-sexual disruptive behavior problems, learning disorders, ADHD, ASD and other developmental issues, child maltreatment, child sexual abuse, trauma, and posttraumatic stress related problems.
- Familiarity with conditions that may affect self-control, such as ADHD and childhood bipolar.
- Understanding environmental, family, parenting and social factors related to child
- behavior, including the factors related to the development of sexual and nonsexual attitude and behavior problems.
- Familiarity with the current research literature on empirically supported intervention and treatment approaches for childhood behavior and mental health problems.
- Cultural variations in norms, attitudes and beliefs about childrearing and childhood sexual behaviors.

Overall, sex-specific therapists should have the knowledge and skills necessary to provide effective interventions and adequately address youth responsivity factors and/or special needs by consulting with knowledgeable experts, accessing specialized training, and participating in other professional development activities as needed so as to remain apprised of contemporary research and evidence-based interventions for adolescents who have engaged in sexually abusive behavior.

Thus, those individuals providing targeted sex-specific therapy interventions (whether it is individual, family or group therapy), should be certified/trained by NOJOS/ATSA/Safer Society (or other best practice standard of care equivalent) as a licensed mental health clinician with sex-specific expertise and specialized professional training as outlined above.

Additionally, all practitioners should actively educate others including those involved in treatment, mental health, child welfare, juvenile justice, government, and policy making about these protocols and standards. Doing so will help promote current evidence-based and ethically sound practices; offer a measure of protection for adolescents, practitioners, and the public against unethical, non-informed, or unprofessional practices with this population; and serve as a catalyst for additional empirical research to further inform practices and policies regarding adolescents who have engaged in sexually abusive behavior.

Those individuals providing skills-development services or other skills-based groups (i.e., anger/aggression, mood management, pro-social skills, etc.) must be trained and competent to provide the service; however, although they are not required to have a clinical license or be certified by NOJOS, it is recommended that they have attended and completed training on children and adolescents with problematic sexual behavior. These service providers are also encouraged to attend annual NOJOS/ATSA/Safer Society sponsored trainings. All providers of adjunct paraprofessional services to youth with problematic sexual behaviors should work under the supervision of an experienced/certified sex-specific clinician. See <a href="https://example.com/ATSA-Professional-Guidelines-Code of Ethics">ATSA Professional-Guidelines-Code of Ethics</a>