

# Assessing Risk of Victim Crossover with Children and Young People who display Harmful Sexual Behaviours

Assessments of children and young people who display harmful sexual behaviours need to consider – at a broad level – the safety of other children at home, in the community and in the wider family. To date, issues of victim selection have been marginalised in the relevant literature. Drawing on our experience of working with this client group, this article uses four composite case studies that reflect the heterogeneity of children and young people who sexually abuse and applies recent research findings about intra- and extra-familial sexual abuse to make suggestions for good practice in assessment and intervention with young people who display harmful sexual behaviours in different settings. Copyright © 2013 John Wiley & Sons, Ltd.

## KEY PRACTITIONER MESSAGES

- Young people with harmful sexual behaviour are a heterogeneous group who may be more likely than adults to vary victim type.
- A formulation approach to risk assessment allows us to move beyond merely the likelihood of future risk, to consider more dynamically issues of victim selection and circumstances in which risks may present.
- Assessments of family relationships, in particular sibling relationships, can help sharpen our approach to risk assessment and the potential for family-community crossover.

KEY WORDS: victim crossover; adolescent; sibling sexual abuse; risk assessment

A number of studies have shown that between one-fifth and one-third of all child sexual abuse in the UK involves other children and adolescents as perpetrators (Hackett, 2004). These findings are supported by a recent freedom of information request which revealed that a quarter of sexual offences against children in England and Wales involved suspected perpetrators under the age of 18 (NSPCC, 2011). Similar figures are reported in the United States, where at

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least 30 per cent of reports of child sexual abuse involve juveniles as alleged perpetrators (Ryan, 2010).

It is sometimes assumed that children and young people who display harmful sexual behaviours are at high risk of persisting with these behaviours into adulthood (Hackett, 2004). However, just as we now understand that most young people involved with non-sexual offending do not go on to be adult offenders (Elliot *et al.*, 1986; McAra and McVie, 2010; Moffitt, 1993), most children and young people who display harmful sexual behaviour also desist over time. Reitzel and Carbonell (2006) found in their meta-analysis of treatment studies a sexual recidivism rate of 12.5 per cent after a follow-up of five years, while Worling *et al.*'s (2010) recent longitudinal study found a sexual re-offending rate of 16.8 per cent after a follow-up of 20 years.

Although most children and young people will desist, a critical few will persist with such behaviours into adulthood. A continuum of services is required, ranging from crisis support and parent work where there is an early presentation of sexually problematic behaviour among young children, through to specialist programmes for adolescents at high risk of life-course persistent re-offending (Morrison, 2004). Risk assessment is therefore a key task in relation to these young people in order to ensure that risk management strategies are proportionate (Calder, 2001; Hackett, 2004) and that individuals receive the appropriate nature, intensity and duration of intervention (Ryan, 1999).

There has been an exponential growth over the last 20 years in the number of available assessment tools that calibrate risk with young people who display harmful sexual behaviours (Epperson *et al.*, 2006; Miccio-Fonseca and Rasmussen, 2009; Prentky and Righthand, 2003; Print *et al.*, 2007; Rich, 2007; Richardson, 2009; Worling and Curwen, 2001). In addition, the Structured Assessment of Violence Risk in Youth assessment tool has been designed to assess the risk of adolescent violence including sexual violence (Borum *et al.*, 2003). However, the process of understanding the nature and meaning of adolescent sexual behaviours and quantifying individual risk remains controversial. Assessment tools have proven to be less accurate than assessment tools in the adult sex-offending field (Viljoen *et al.*, 2012), and although superior in predictive validity to unguided clinical judgment (Hanson and Bussiere, 1998), there is to date no empirically validated tool to predict sexual risk in young people with an adequate level of accuracy in all situations (Viljoen *et al.*, 2008). These assessment tools typically band young people into broad risk categories such as high, medium or low risk, and this can limit their utility when complex risk management decisions need to be made.

Over the last few years, developments in the risk assessment field, such as the Structured Professional Judgment Approach (Borum, 1996), have emerged which require practitioners to move away from an overtly actuarial approach to assessment, encouraging instead a rating of risk factors according to relevance for the individual in their particular circumstances. Although they continue to provide a structured framework for assessment and therefore avoid the pitfalls of purely clinical judgment (Johnstone, 2011), the practitioner is required to bring an individualised and developmental perspective to risk.

Such approaches encourage professionals to develop scenario planning to explore how risk may manifest itself in different settings in the future. However, current assessment tools and approaches give little consideration to the fact that a large proportion of harmful sexual behaviour displayed by children and young people takes place within the family. Indeed, between a third and a half of the abuse perpetrated by children and young people may involve siblings or close family relatives as victims (Beckett, 2006; Shaw *et al.*, 2000; Worling, 2001). Professionals are often in the position of needing to determine whether a child who has abused within the family may present a continued risk to siblings or other child relatives, as well as considering other potential risks to children in the wider community. Professionals will also be asked to assess whether a child who has abused in the community may present a risk to siblings or other relatives (Yates *et al.*, 2012). Calder (2001) stresses the importance in risk assessments of considering, at a broad level, the safety of other children at home, in the community and in the wider family. Approaches that encourage a banding of risk do not help practitioners to consider the risks to specific possible victims in particular settings.

The literature that a practitioner can draw on to help inform such decisions is also limited. To our knowledge, until recently there were just three studies which differentiated between children who abuse at home and children who abuse in the community (O'Brien, 1991; Tidefors *et al.*, 2010; Worling, 2001). The authors of each of these studies note that there is also a further crossover sub-group that has acted in abusive ways against siblings *and* victims in the community. None of these studies have published specific data on this crossover sub-group.

Yates *et al.* (2012) begin to address this gap by differentiating between boys who had abused only siblings, boys who had abused only in the community, and a crossover group of boys who had abused both siblings and in the community. A fourth sub-group of boys whose abuse included family members other than siblings was also identified. Their study found that boys in the crossover group were more likely to have a younger age of onset of harmful sexual behaviour, to have experienced more extensive abuse themselves and had started abusing at home before abusing in the community. The boys who abused only siblings and did not go on to abuse in the community were more likely to have been considerably motivated by jealous anger in the commission of their abuse of their sibling. A thorough discussion of this study and its methodology can be found in Yates *et al.* (2012).

This study, like most studies within the literature on children with harmful sexual behaviours, is a quantitative study based on a small clinical sample. On the one hand, its sample size is neither large enough nor representative enough to be able to draw general conclusions with confidence; on the other hand, it does not provide the kind of detail which allows the reader to understand how the various factors and characteristics identified can help inform risk assessment and treatment recommendations. Drawing on our practice experience of working with children with harmful sexual behaviours, this paper will therefore use four contrasting composite case studies in order to illustrate how the kinds of factors

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**'Help practitioners to conceptualise the different risks that young people may present to different potential victims in different settings'**

**'Brother-sister incest is the most common pairing'**

identified in Yates *et al.* (2012) can help practitioners to conceptualise the different risks that young people may present to different potential victims in different settings. Intervention recommendations in each case study will also illustrate a developmentally supportive approach to risk management and reduction.

### **Sibling Abuse Assessments: Kevin**

Kevin is a polite 14-year-old boy who is physically mature though small for his age. A car accident as a young child left Kevin with a limp and weakness down his left side. Kevin's parents appear to be friendly and loving. It is therefore something of a puzzle initially that Kevin has been referred to a specialist service for children with harmful sexual behaviour for the repeated and extensive sexual abuse of his seven-year-old sister.

Kevin's parents are highly committed to each other, although admit to past extra-marital affairs and incidents of domestic violence related to episodes of financial stress. Kevin holds an idealised view of his parents and craves their love and approval. He is keen to please and is watchful for criticism. Following the car accident, Kevin's father was keen that his disability would not hold him back and pushed him to achieve in sports and physical activities, expectations that Kevin was unable to meet. Kevin's mother was prevented from comforting him when he was upset in the belief that it would teach Kevin to be strong and independent. He learned ways to comfort himself, and frequently masturbated to internet pornography accessed on his computer. Whilst well-intentioned, Kevin's parents' love for him appears to be conditional on achievement and good behaviour. Kevin speaks about his sister in exclusively negative terms. According to Kevin, she is loud, bossy and attention-seeking; she is bought presents, even when she has been badly behaved; she always gets her own way, and as the older brother he is always expected to make allowances. Kevin is highly jealous of his sister, and resents the preferential treatment that he perceives her to receive.

Kevin was given responsibility for looking after his sister a number of times over a period of two years and sexually abused her on each occasion. Kevin's sister eventually disclosed the abuse to her mother, after which Kevin moved to stay with foster carers whilst an assessment was undertaken.

An understanding of Kevin's abuse of his sister reflects much of the literature on the characteristics of boys who sexually abuse their siblings. Brother-sister incest is the most common pairing (Adler and Schutz, 1995) and the respective age of the children is also quite typical (Adler and Schutz, 1995; Carlson *et al.*, 2006; Cyr *et al.*, 2002). Kevin's abuse could be understood within the context of highly dysfunctional family dynamics including domestic violence and extra-marital affairs (Adler and Schutz, 1995; Ballantine, 2012; Hardy, 2001; Latzman *et al.*, 2011; Laviola, 1992; Loreda, 1982; Salazar *et al.*, 2005; Smith and Israel, 1987; Worling, 1995), a lack of supervision (Bank and Kahn, 1982; Sgroi, 1982) and an exposure to pornography (Kambouridis, 2012; Latzman *et al.*, 2011). Most studies of sibling sexual abuse focus on the victim or the perpetrator rather than the relationship between the siblings (Bass *et al.*, 2006). Green (1984) and Kambouridis (2012) found that physical and sexual assaults between siblings were often motivated by revenge against the child favoured by the parent. It is very clear that Kevin's abuse of his sister took place within the context of an insecure attachment relationship with his parents and was motivated by what Yates *et al.* (2012) refer to as 'jealous anger' towards his sister, as well as curiosity and experimentation.

Kevin regrets his abusive behaviour in terms of the consequences for himself and is keen to do whatever is necessary to be reunited with his parents. Kevin's parents also want him to receive treatment in order to allow him to return home. However, Kevin blames his sister for disclosing and expresses no concern for

any harm that he may have caused her. A standardised assessment tool may tell us that Kevin presents a low level of risk to other children in the community and would require a low level of supervision. However, this does not give an indication of the ongoing risks that Kevin might pose to his sister or to other younger children he might know within a family context. An understanding of the dynamics of jealous anger required as a driver in the abuse of his sister would support the assessment that Kevin presents a low level of risk to children in the community, but would suggest that without treatment the ongoing risks to his sister and other family children are likely to be high.

One of the key treatment goals for a boy like Kevin is to work towards a return home. A number of authors outline processes of family reunification following sibling sexual abuse which draw on family therapy (such as DiGeorgio-Miller, 1998; Haskins, 2003; Schladale, 2002; Thomas and Viar, 2005). Therapeutic tasks for the abusing child, abused child, any non-abusing siblings and parents all need to be achieved in order for this process to progress. These tasks are not simply a matter of ensuring safety, but of uncovering and transforming the family and sibling dynamics which promoted the abuse in the first place. Kevin needs to understand that his jealous anger towards his sister is misdirected, and belongs to his parents. At the same time, Kevin needs his relationship with his parents through family therapy to be strengthened rather than further weakened. It would be vital that Kevin's parents have the capacity to hear Kevin's perspective and to remain loving and caring towards him. All this needs to be done while Kevin begins to learn ways to express his sexual feelings more appropriately.

### **Community Abuse Assessments: Mark**

Mark was 11-years old when he was referred to a specialist service in relation to his harmful sexual behaviour. He is a small, shy boy who lives with his father three days of the week and his mother four days. They separated when he was five and both parents have new families. Mark has a three-year-old sister on his mother's side and a four-year-old brother on his father's side.

Mark was referred after the six-year-old son of a neighbour disclosed that he had been sexually abused by Mark. The abuse took place weekly over a ten-month period when Mark played with him, progressing from inappropriate touch to attempted anal sex. The boy reported that Mark threatened him and said he would hurt him more if he told anyone.

Mark witnessed domestic violence between his parents around the time of their separation. His father was also charged with physically assaulting Mark at this time. At age eight, he reported that two teenage boys in the community sexually abused him. This was investigated and substantiated. While being questioned in relation to his abuse of the six-year-old boy, he disclosed that he had previously been involved in mutual masturbation with a male peer in the school toilets. This had been going on weekly for about a year. No coercion or force was involved. This was investigated and accepted by the other boy in question who said that he told Mark they should stop because he was scared they would be found out.

What we know about pre-adolescent children with sexual behaviour problems is considerably lacking in comparison to our knowledge of adolescents who abuse (Hackett, 2004). Mark is one of a small group of pre-adolescent children who use force and intimidation to coerce other children into sexual behaviour and where the primary motivation is the acting out of negative emotions on another (Gil and Johnson, 1993).

However, Mark has had a range of different sexual experiences beyond being the perpetrator of sexual violence, including sexual victimisation and sexual

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interaction with a peer. All of these sexual experiences coincide with a period when he is caught between two families and when the birth of new siblings absorbs the attention of his parents. A sense of rejection and difficulty in finding a place in new reconstructed families has been challenging for Mark. The regularity and repetitiveness of Mark’s sexual behaviour with a peer carry some of the characteristics of what Gil and Johnson (1993) have classed as ‘extensive mutual sexual behaviours’: Behaviours involving a wide range of adult sexual behaviours which have been learned through inappropriate or abusive experiences, and which meet a range of different needs including that of attachment. Aggression and retaliation are rarely motivations for this group of children. Once this sexual outlet is stopped, Mark expresses a need for power and control through his sexual behaviour towards the younger boy.

As well as considering Mark’s access to potentially vulnerable individuals in the community, decisions about whether he can continue to reside with his younger sister and brother will also be need to be made. The risk of harmful sexual behaviour crossing over from extra- to intra-familial abuse needs specifically to be considered in cases such as Mark’s where a child has abused in the community and has younger siblings or relatives at home (Costin *et al.*, 2012).

In Yates *et al.* (2012) study, the vector of abuse tended to move from family to community. This is not to preclude the possibility of young people who abuse in the community subsequently abusing at home, but is to underline that victim selection can often be a function of availability. It should therefore be considered whether there is any evidence that Mark may already have sexually abused his siblings. The findings from Yates *et al.* (2012) suggest that Mark’s early onset of harmful sexual behaviour and the multiple abuse that he has experienced himself would elevate these concerns. In addition, it would be helpful to assess the quality of Mark’s relationships with his siblings, and to consider whether the family environment and levels of supervision would be conducive to concealed sibling sexual abuse taking place. We would not recommend an intrusive approach to assessment that involved interviewing his siblings when they have made no disclosure, but discussions with the parents about the family environment would be vital. A robust safety plan may need to be in place at home if Mark is to remain there during the time it takes to complete an assessment. Alternatively, a placement may need to be found whilst the assessment is carried out.

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Mark’s case reflects the complexity of work with children and young people who display harmful sexual behaviours. The meaning of Mark’s different sexual experiences will need to be sensitively explored with him to unpack the similarities and differences between what has happened to him and what he has done to others (Hackett, 2002). Timeline work (Wieland, 1998) could help Mark situate his sexual experiences within the context of other experiences in his life and help him to begin to understand the implicit messages of both his own behaviour and the behaviour of others. Jenkins (2005) recommends using young people’s experience of abuse to help construct a ‘moral compass’ that allows them to explore the impact of their own behaviours more successfully than they could prior to exploring their own victimisation. Knowledgeable supervision may be necessary to ensure that the worker holds in mind Mark’s victim experience while remaining alert to the risk that he poses, without unconsciously allying with either the

abusing or abused aspects of his personality (Banks, 2002; Horne, 2009; Woods, 2003).

Although some offence-specific cognitive behavioural work will be relevant, family work looking at attachment repair and developing a sense of belonging will be critical for Mark (Barnes and Hughes, 2002). Helping Mark to develop his social skills and to establish a sense of place in the community – within the context of a safety plan – will also be vital in helping him move towards a healthy sense of adolescent sexuality (O’Callaghan, 2002).

### Victim Crossover Abuse Assessments: Simon

Simon is 15-years old and lives with foster carers. He has a learning disability resulting from problems during pregnancy. He is a friendly boy but struggles to behave appropriately with peers and is socially isolated. While his mother was very loving towards him, Simon has experienced considerable trauma. His home life was characterised by high levels of domestic violence. His mother associated with a number of sexual offenders, and it is known that Simon was sexually abused by at least one of these men when he was five-years old. At age seven, Simon was found in bed simulating sex with his four-year-old sister, and he continued to engage in sexual behaviours towards her which resulted in injury when she was seven-years old. At age nine, he was accused of sexually touching two three-year-old boys in the community, and at age 11, he was charged with a sexual offence against the seven-year-old daughter of a family friend who visited regularly.

Simon moved to live with foster carers after his mother took an overdose when he was 13. He was charged with sexually assaulting a 13-year-old girl when he was 15, both Simon and his victim being pupils at a school for children with special needs.

Yates *et al.* (2012) found that young people with a pre-adolescent onset of harmful sexual behaviour and who have experienced multiple forms of trauma were more likely than other groups to abuse in the family home and in the community. Vizard *et al.* (2007) also found that those who were below the age of 11 at onset were likely to have a wider range of victims.

Like many of the young people in Vizard *et al.*’s (2007) study, Simon has experienced considerable abuse and neglect in his early years. The finding that the majority of children who develop sexual behaviour difficulties in pre-adolescence have extensive histories of sexual victimisation has been found in several studies (Friedrich and Luecke, 1988; Gray *et al.*, 1999; Taylor, 2003). Simon is fond of his sister, with no clear signs of rivalry, jealousy or animosity, and it is more likely that he abused her as a reaction to his own experiences of abuse, rather than being motivated by any particular sibling relationship dynamics. Children like Simon, with early onset of harmful sexual behaviours resulting from extensive abuse histories and who have abused a sibling due to their availability, would seem more likely to extend to other victims in the wider family or in the community where opportunities are present.

In assessing a young person like Simon, it is important to develop a formulation in relation to the different individuals who he has victimised at different times. Simon’s harmful sexual behaviours may have met different needs at different stages. His later offending in the community may be more about meeting his sexual needs rather than his needs for intimacy and belonging. Standard assessment tools would be able to indicate the general level of risk that Simon may present, but would not be able to tease out the

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particular circumstances in which Simon may present a higher level of risk, and when in fact he might be relatively safe. A robust multi-agency safety plan will be necessary to provide stability and containment and to reduce opportunities to re-offend, while providing Simon with appropriate developmental opportunities in order to help reduce the risks that he presents in the longer term. Ward and Gannon (2006) remind us that interventions need to address dynamic risk through fostering the development of both internal and external resources for the individual, in addition to promoting goals which reflect their personal identity. Cognitively orientated offence-specific work may be possible, although in light of Simon's level of cognitive functioning, it is likely that this will be behaviourally orientated initially, looking at relapse prevention and consequences (Fyson, 2006). Considerable therapeutic input around trauma may be necessary, informed by an understanding of how trauma affects Simon's impulse control, emotional arousal and cognition (Creeden, 2009). A multi-agency 'helping team' approach could be employed (Brady and McCarlie, 2012) in order to ensure clarity of roles, responsibilities and clear information-sharing. The sequencing, duration and intensity of different elements of treatment need to be thought about very carefully and guided by the principle of responsivity (Bonta and Andrews, 2007).

#### **Family Abuse Assessments: Matthew**

Matthew is a reserved 14-year-old boy who can be highly critical and quick to show his temper. He has extensive prior social work involvement including concerns from the age of five about inappropriate sexualised behaviours. He was repeatedly sexually abused by a man in the community when he was eight-years old. He was accommodated with foster carers at the age of ten, after a long history of physical abuse and neglect by his mother. Matthew's mother admits that she has always favoured his younger half-brother, Christopher. Matthew is highly jealous of Christopher's relationship with their mother, and is extremely angry with his mother for abandoning him to foster care. While Matthew's foster carers take good care of Matthew physically, they are not sensitive to his emotional needs. After being accommodated, Matthew continued to visit home often, and he also spent a lot of time at his uncle's house. He was referred to a specialist service for children with harmful sexual behaviours having sexually abused Christopher during home contact, the abuse involving forced oral sex and sodomy. During the investigation, Matthew said that he had also sexually abused his female cousin while visiting his uncle, and an examination of Matthew's computer revealed a number of indecent images of young boys. Matthew's mother rejected him completely when his sexually abusive behaviour became known.

At the time of his referral, Matthew is living with his foster carers in a small, semi-rural community. He is socially very isolated with no friends or associates. Matthew is adamant that he will not abuse again and has no desire to change anything about his current lifestyle. He is willing to attend for treatment, but sees no need for him to do so.

Like Kevin, Matthew's abuse of his sibling could be understood to be motivated by jealous anger. His abuse of his cousin was also fuelled by a desire for belonging, and a jealousy of her perceived happy family life. The dynamic of Matthew's sibling relationship, exacerbated by Matthew's accommodation with foster carers and coupled with earlier concerns about Matthew's sexual behaviour, would suggest that more attention needed to be paid to supervising home contact. The dynamics motivating Matthew's abusive behaviour might suggest that Matthew would be less likely to go on to abuse within the wider community. However, unlike Kevin, Matthew has clearly experienced extensive

abuse himself, and concerns about his sexual behaviour have been raised from a young age. He would appear to have a sexual interest in young boys. A standardised assessment tool may suggest that Matthew presents a moderate risk to children in the wider community. This assessment would be supported by the other findings from the Yates *et al.* (2012) study, with the addition that the ongoing risks that Matthew might present to his younger brother and other family children are likely to be high. Without intervention, there would also be significant concerns about Matthew developing relationships with other children in a family context in the future. Only Matthew's current lifestyle and living arrangements mean that little is needed to be done to manage the risks that he might present in the short term.

In order for Matthew to move on from his abusive behaviour, Matthew needs to begin to understand the potential value of relationships and to develop some emotional literacy (Way, 2005). Key to Matthew's future safety and development is his experiencing a nurturing environment. With no prospect for reunion with his family, long-term individual therapy would be recommended in order to help Matthew to understand his past and its impact upon his sense of self. Extensive life-story work drawing on narrative therapy may be beneficial. There would need to be a strong focus on the therapeutic relationship itself to give Matthew a more positive experience of a relationship. A robust safety plan would be helpful while Matthew engages in this challenging work, which might increase the levels of risk that he presents in the short term. While emotional capacity is developed, Matthew will need cognitive work to understand how to manage his sexual interests in young boys and to build on social skills which will help him – over time – to establish healthy sexual relationships with people his own age.

## Conclusion

We have argued that current assessment approaches downplay the importance of intrafamilial sexual abuse perpetrated by children and young people. Although structured assessment tools can contribute to our work with individuals who display harmful sexual behaviour, a formulation approach to risk assessment allows us to move beyond considerations of 'likelihood' of future harmful behaviour to explore issues such as the nature and context of future behaviour, as well as victim selection. Family assessments and sibling assessments can help sharpen our approach to evaluating future potential for offending behaviour, as can preliminary research into drivers relating to victim crossover (Yates *et al.*, 2012).

Victim crossover is increasingly being recognised in the adult sexual offending field. Although some studies support victim specialisation by adult offenders (Friendship and Thornton, 2001; Soothill *et al.*, 2000), others have found a high level of crossover. Carr *et al.* (2007) found that a quarter of sexual offenders in a prison sample had crossed over in victim type according to at least one of the victim dimensions of age, gender and relationship. Becker and Coleman (1988) also found that 44 per cent of adult intrafamilial abusers of girls abused girls outside the family. Heil *et al.* (2003) conclude that relatively few adult sexual offenders abuse only one type of victim.

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**'Victim crossover is increasingly being recognised in the adult sexual offending field'**

**‘There are undoubtedly factors that can help us with prediction in victim crossover in adolescence’**

It is likely that at a time of adolescent developmental change, young people are even more prone to vary victim type (Emerick and Dutton, 1993). We have, for some time, recognised that children and young people who sexually abuse are a heterogeneous group through age, gender and background (Hackett, 2004), but they are heterogeneous in terms of individual offending patterns as well. Children and young people can abuse young children, peers or adults; victims who are male and female and people within or outwith their family. Critically, some will move between and within victim age, gender and relationship dimensions.

It is unlikely that adolescent victim selection is random and there are undoubtedly factors that can help us with prediction in victim crossover in adolescence. This study has looked at the small evidence base for understanding victim selection as being intrafamilial, extrafamilial, or both. Further research into this subject is necessary, including data to help us understand why children and young people vary victim type by gender and age, as well as relationship.

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