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Treatment for Girls with Problem Sexual Behaviors



GEORGIA

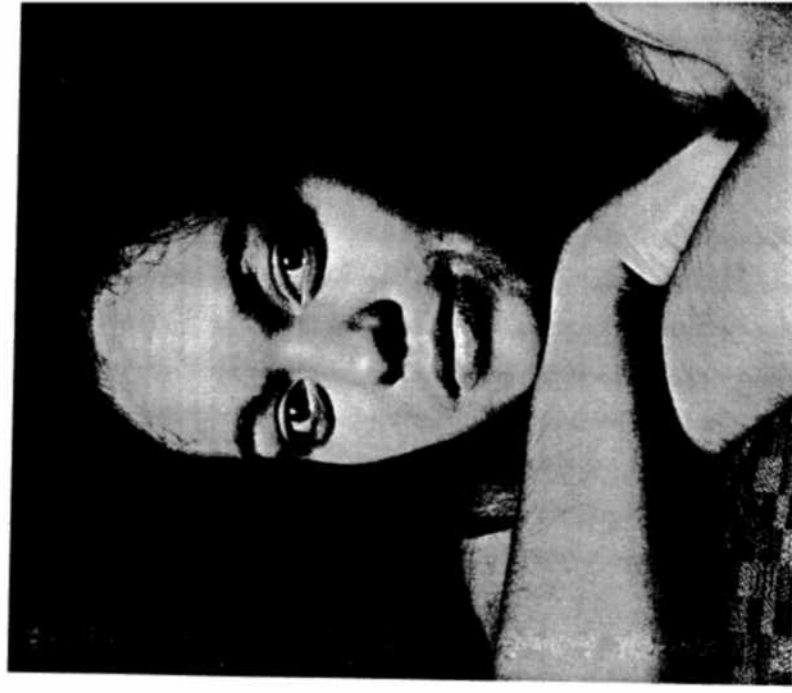
The force for families

To make a referral, please visit or call:

www.YouthVillages.org/ga

1-770-852-6333 or 1-800-255-8657

fax: 1-770-920-2745



Youth Villages is accredited by JCAHO and is an approved provider for many states' Medicaid and Departments of Human Services.

Youth Villages provides specialized treatment for girls ages 9-17 with problem sexual behaviors. We accept youth with an IQ of 45 and above. Current research suggests that children and youth with problem sexual behaviors are a diverse group who are likely to have experienced difficulties in a variety of areas: in their families, school and with peers. Several differences exist between boys and girls who sexually offend. Youth Villages assesses each girl's unique risk factors and devises an individualized treatment plan.



ASSESSMENT Risk Factors & Trauma

Part of the assessment process for all girls is screening for a history of trauma. Adolescent girls who do have a history of trauma are assessed for symptoms of post-traumatic stress disorder (PTSD) utilizing the UCLA PTSD index. Individual sexual risk factors are also assessed.

Youth Villages uses two assessments for the identification of sexual risk factors.

- Estimate of Risk of Adolescent Sexual Offense Recidivism version 2.0 (ERASOR v. 2.0)
- Treatment Progress Inventory of Adolescents who Sexually Abuse (TPI-ASA)

TREATMENT Identified Risk Factors & Trauma



Once assessments have been completed and issues identified, an individualized treatment plan is developed.

For girls with significant PTSD symptoms, treatment begins with Trauma-Focused Cognitive Behavior Therapy (TF-CBT). Additionally, girls receive treatment for their identified sexual risk factors.

For girls who show no significant signs of PTSD, treatment focuses on directly addressing their individual sexual risk factors. This is accomplished through cognitive behavioral therapy techniques in individual, group and family sessions. Each girl's treatment concepts and goals are reinforced throughout the day.

Treatment progress is monitored at three-month intervals for adolescents utilizing the Treatment Progress Inventory of Adolescents who Sexually Abuse (TPI-ASA).

Additional issues that are uniquely important for girls with problem sexual behaviors and that are addressed in treatment include:

- Relationship Development
- Healthy Sexuality
- Identity Development

DISCHARGE & Safety Planning

Discharge planning decisions are made by the treatment team in collaboration with parents, referral sources, courts and child welfare agencies. Decisions are based upon comprehensive treatment information and discharge assessments including the TPI-ASA, when age appropriate, and, if warranted, the ERASORv.20. Post-discharge safety plans are developed with the child and parent and reviewed thoroughly in family therapy prior to discharge.

If the risk assessment shows no major areas of concern, the discharge process continues. However, if the risk assessment identifies that the youth remains at high risk for re-offending or points to a need for continued 24-hour supervision, discharge is postponed and treatment continues.

