Mental health needs of young offenders and victims: Assessment, intervention and legal issues
Mental health needs of young offenders and victims: Assessment, intervention and legal issues

Overview 11 May 2016

<table>
<thead>
<tr>
<th>Presidencial Lecture</th>
<th>Oral Presentations</th>
<th>Symposium: Risk and protective factor studies I</th>
</tr>
</thead>
<tbody>
<tr>
<td>New developments in youth forensic mental health care by Chijs Van Nieuwenhuizen</td>
<td>First results from the femnat-cd study: unraveling female adolescent conduct disorder</td>
<td>Research on treatment outcomes I</td>
</tr>
<tr>
<td>Symposium: Maladjustment and deviance: studies on adolescents’ mental health and behavior problems</td>
<td>Symposium: Understanding sex differences in the relationship between conduct disorder and alterations in brain structure and function</td>
<td>Symposium: Practice and outcomes from family-centered care in closed institutions: A model for the daily living climate and a bridge for outpatient treatment</td>
</tr>
<tr>
<td>Oral Presentations: Interventions for young offenders: models and programs</td>
<td>Oral Presentations: Mental health screening in young offenders</td>
<td></td>
</tr>
<tr>
<td>KEYNOTE</td>
<td>SYMPOSIUM</td>
<td>ORAL PRESENTATIONS</td>
</tr>
<tr>
<td>------------------------------------------------------------------------</td>
<td>---------------------------------------------------------------------------</td>
<td>---------------------------------------------</td>
</tr>
<tr>
<td>Children and young people in residential child care: A therapeutic approach by Jorge Del Valle</td>
<td>Psychopathic traits: Measurement &amp; mechanisms</td>
<td>Developmental disorders and delinquency</td>
</tr>
<tr>
<td>SYMPOSIUM &quot;Breaking the walls&quot;: Mental health and juvenile justice in Portugal</td>
<td>The use of routine outcome monitoring (rom) for treatment, research and policy in complex residential samples</td>
<td>Aggressive behavior and mental health problems I</td>
</tr>
<tr>
<td>SYMPOSIUM Psychotraumatic aspects of the youth welfare system</td>
<td>SYMPOSIUM Crime and traumatic brain injury: Causal links and potential interventions</td>
<td>SYMPOSIUM From national policy in harmful sexual behaviour to clinical practice: Mind the Gaps!</td>
</tr>
<tr>
<td>SYMPOSIUM A shame and compassion based approach to psychopathy in adolescence</td>
<td>SYMPOSIUM A shame and compassion based approach to psychopathy in adolescence</td>
<td>SYMPOSIUM Treatment of male adolescent sexual offenders with paraphilic disorders: state of the art</td>
</tr>
<tr>
<td>SYMPOSIUM Development of adolescent delinquency in different intervention settings</td>
<td>SYMPOSIUM Use of neurobiological information in the sentencing and treatment of juvenile and young adult offenders</td>
<td>SYMPOSIUM Use of neurobiological information in the sentencing and treatment of juvenile and young adult offenders</td>
</tr>
<tr>
<td>SYMPOSIUM Use of neurobiological information in the sentencing and treatment of juvenile and young adult offenders</td>
<td>SYMPOSIUM How well do callous-unemotional traits really capture a clinically meaningful subgroup of antisocial youths and are there alternatives?</td>
<td>SYMPOSIUM How well do callous-unemotional traits really capture a clinically meaningful subgroup of antisocial youths and are there alternatives?</td>
</tr>
<tr>
<td>SYMPOSIUM Adolescents in residential care: Relationships and psychological adjustment</td>
<td>SYMPOSIUM Improving secure residential care climate: Practice and empirical based results</td>
<td>SYMPOSIUM Improving secure residential care climate: Practice and empirical based results</td>
</tr>
<tr>
<td>SYMPOSIUM Results from the academic workplace forensic care for youth: collaboration of research, practice, and education to improve care</td>
<td>SYMPOSIUM Aggressive behavior and mental health problems II</td>
<td>SYMPOSIUM Aggressive behavior and mental health problems II</td>
</tr>
<tr>
<td>SYMPOSIUM Therapeutic cornerstones of an adolescent forensic unit</td>
<td>SYMPOSIUM &quot;Breaking the walls&quot;: Bring out in educative center</td>
<td>SYMPOSIUM &quot;Breaking the walls&quot;: Bring out in educative center</td>
</tr>
<tr>
<td>SYMPOSIUM &quot;Breaking the walls&quot;: Mental health and juvenile justice in Portugal</td>
<td>IN CONGRESS WORKSHOP</td>
<td>Introduction to the saprof-youth version: assessment of protective factors for violence risk in juveniles</td>
</tr>
<tr>
<td>SYMPOSIUM Psychopathtic traits: Measurement &amp; mechanisms</td>
<td>SYMPOSIUM The use of routine outcome monitoring (rom) for treatment, research and policy in complex residential samples</td>
<td>SYMPOSIUM The use of routine outcome monitoring (rom) for treatment, research and policy in complex residential samples</td>
</tr>
<tr>
<td>SYMPOSIUM A shame and compassion based approach to psychopathy in adolescence</td>
<td>SYMPOSIUM Crime and traumatic brain injury: Causal links and potential interventions</td>
<td>SYMPOSIUM From national policy in harmful sexual behaviour to clinical practice: Mind the Gaps!</td>
</tr>
<tr>
<td>SYMPOSIUM Development of adolescent delinquency in different intervention settings</td>
<td>SYMPOSIUM Use of neurobiological information in the sentencing and treatment of juvenile and young adult offenders</td>
<td>SYMPOSIUM Use of neurobiological information in the sentencing and treatment of juvenile and young adult offenders</td>
</tr>
<tr>
<td>SYMPOSIUM Use of neurobiological information in the sentencing and treatment of juvenile and young adult offenders</td>
<td>SYMPOSIUM How well do callous-unemotional traits really capture a clinically meaningful subgroup of antisocial youths and are there alternatives?</td>
<td>SYMPOSIUM How well do callous-unemotional traits really capture a clinically meaningful subgroup of antisocial youths and are there alternatives?</td>
</tr>
<tr>
<td>SYMPOSIUM Adolescents in residential care: Relationships and psychological adjustment</td>
<td>SYMPOSIUM Improving secure residential care climate: Practice and empirical based results</td>
<td>SYMPOSIUM Improving secure residential care climate: Practice and empirical based results</td>
</tr>
<tr>
<td>SYMPOSIUM Results from the academic workplace forensic care for youth: collaboration of research, practice, and education to improve care</td>
<td>SYMPOSIUM Aggressive behavior and mental health problems II</td>
<td>SYMPOSIUM Aggressive behavior and mental health problems II</td>
</tr>
<tr>
<td>SYMPOSIUM Therapeutic cornerstones of an adolescent forensic unit</td>
<td>SYMPOSIUM &quot;Breaking the walls&quot;: Bring out in educative center</td>
<td>SYMPOSIUM &quot;Breaking the walls&quot;: Bring out in educative center</td>
</tr>
</tbody>
</table>

Overview 12 May 2016
<table>
<thead>
<tr>
<th>Overview 13 May 2016</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>KEYNOTE</strong></td>
</tr>
<tr>
<td>Developmentally</td>
</tr>
<tr>
<td>appropriate</td>
</tr>
<tr>
<td>investigative</td>
</tr>
<tr>
<td>interviewing by</td>
</tr>
<tr>
<td>Michael Lamb</td>
</tr>
<tr>
<td>SYMPOSIUM</td>
</tr>
<tr>
<td>European longitudinal</td>
</tr>
<tr>
<td>studies of offending</td>
</tr>
<tr>
<td>SYMPOSIUM</td>
</tr>
<tr>
<td>Juveniles who</td>
</tr>
<tr>
<td>sexually</td>
</tr>
<tr>
<td>offended: Subtypes</td>
</tr>
<tr>
<td>and offense</td>
</tr>
<tr>
<td>characteristics</td>
</tr>
<tr>
<td>SYMPOSIUM</td>
</tr>
<tr>
<td>Forensic Camhs in</td>
</tr>
<tr>
<td>the UK: A description</td>
</tr>
<tr>
<td>Of services</td>
</tr>
<tr>
<td>SYMPOSIUM</td>
</tr>
<tr>
<td>Mental health</td>
</tr>
<tr>
<td>problems and</td>
</tr>
<tr>
<td>associated</td>
</tr>
<tr>
<td>variables II</td>
</tr>
<tr>
<td>ORAL PRESENTATIONS</td>
</tr>
<tr>
<td>Research on mental</td>
</tr>
<tr>
<td>health problems and</td>
</tr>
<tr>
<td>associated variables</td>
</tr>
<tr>
<td>II</td>
</tr>
<tr>
<td>SYMPOSIUM</td>
</tr>
<tr>
<td>Challenges in secure</td>
</tr>
<tr>
<td>treatment and youth</td>
</tr>
<tr>
<td>prison for adolescents</td>
</tr>
<tr>
<td>SYMPOSIUM</td>
</tr>
<tr>
<td>Towards a translational approach of disruptive behavior disorders?</td>
</tr>
<tr>
<td>SYMPOSIUM</td>
</tr>
<tr>
<td>Mental health problems and violent behaviours among juvenile offenders</td>
</tr>
<tr>
<td>ORAL PRESENTATIONS</td>
</tr>
<tr>
<td>Parental practices and violence</td>
</tr>
<tr>
<td>ORAL PRESENTATIONS</td>
</tr>
<tr>
<td>Risk need assessment</td>
</tr>
<tr>
<td>KEYNOTE</td>
</tr>
<tr>
<td>Risk factors for psychopathy in two generations by David Farrington</td>
</tr>
<tr>
<td>SYMPOSIUM</td>
</tr>
<tr>
<td>Developments in juvenile delinquency: from prevention, to evaluation and intervention</td>
</tr>
<tr>
<td>SYMPOSIUM</td>
</tr>
<tr>
<td>Multidisciplinary</td>
</tr>
<tr>
<td>therapeutic and</td>
</tr>
<tr>
<td>institutional</td>
</tr>
<tr>
<td>approaches for</td>
</tr>
<tr>
<td>adolescents with</td>
</tr>
<tr>
<td>disruptive behavior</td>
</tr>
<tr>
<td>disorders</td>
</tr>
<tr>
<td>SPECIAL SESSION</td>
</tr>
<tr>
<td>The O</td>
</tr>
<tr>
<td>ORAL PRESENTATIONS</td>
</tr>
<tr>
<td>Research on treatment outcomes II</td>
</tr>
<tr>
<td>ORAL PRESENTATIONS</td>
</tr>
<tr>
<td>Prevalence Of</td>
</tr>
<tr>
<td>Mental Health Problems Among Young Offenders</td>
</tr>
</tbody>
</table>

**Poster Presentations**

<table>
<thead>
<tr>
<th>SESSION I</th>
<th>SESSION II</th>
</tr>
</thead>
</table>
This page intentionally left blank
Mental health needs of young offenders and victims:
Assessment, intervention and legal issues

Contents

MAY 11TH 2016, WEDNESDAY, 14:30-15:15

PRESIDENTIAL LECTURE

New developments in youth forensic mental health care
Chijs van Nieuwenhuizen — 1

15:20-16:30 – PARALLEL SESSION I

SYMPOSIUM ”FIRST RESULTS FROM THE FEMNAT-CD STUDY:
UNRAVELING FEMALE ADOLESCENT CONDUCT DISORDER”

Disentangling emotion dysfunction in girls versus boys with conduct disorder
G. Kohls, S. Baumann, C. Biskup, I. Neitzel, B. Herpertz-Dahlmann, K. Konrad,
and the FemNAT-CD Consortium — 1

Basal and reactive neuroendocrinological measures in children and adolescents
with conduct disorder: First data from the European FemNat-CD consortium
A. Bernhard, A. Martinelli, K. Ackermann, C. M. Freitag, and The FemNat-CD
consortium — 2

Psychophysiological measures in the FemNAT-CD study: Autonomic Nervous
System Functioning in Girls with Severe Conduct Problems
H. Oldenhof, L. N. Jansen, A. Popma, and The FemNat-CD Consortium — 2

The Impact of Community Violence in Adolescents with Conduct Disorder
L. Kersten, L. Fehlbaum, W. Menks, M. Prätzlich, N. Raschle, S. Mannstadt, C.
Dietrich, C. Stadler, and The FemNAT-CD Consortium — 2

ORAL PRESENTATIONS “RISK AND PROTECTIVE FACTOR STUDIES I”

Compensatory and protective factors against violent delinquency in late
adolescence in a sample of at-risk males
N. Fontaine, M. Brendgen, F. Vitaro, and R. Tremblay — 3

The impact of community violence in adolescents with Conduct Disorder
L. Kersten, L. Fehlbaum, W. Menks, M. Prätzlich, N. Raschle, S. Mannstadt, C.
Dietrich, C. Stadler, and FemNAT-CD consortium — 3
Attachment, self-control and drug use: The relationship with antisocial behavior in adolescents from Argentine
A. Bobbio and K. Arbach — 4

“My neighborhood is cool!”: The social learning of violence and delinquency from children’s perspectives
M. L. Carvalho — 4

**ORAL PRESENTATIONS “RESEARCH ON TREATMENT OUTCOMES I”**

Adolescent forensic inpatient treatment: First results of the Basel Catamnesis Study
C. Perler and E. Lanzi — 5

Meta-analysis of the influence of CU-traits on treatment-outcome in juveniles with externalizing behavior

The effectiveness of treatment with sex offenders of three age categories: Late juveniles, early adults and adults
A. M. Catena and S. Illescas — 6

**ORAL PRESENTATIONS “INNOVATE APPROACHES IN MENTAL HEALTH CARE FOR CHILDREN AND ADOLESCENTS”**

Taking care of children with layered and complex life issues
J. Vanhee and E. Nouwen — 6

Public-private partnership in developing psychosocial interventions
N. Boonstra and X. Rooderkerk — 7

Multidisciplinary approach in assessing juvenile offenders
C. E. Schalk, R. Haveman, M. Hulshof and N. Beuk — 8

The use of a structured interview protocol in children’s statements in Portugal: A comparative study

**SYMPOSIUM “MALADJUSTMENT AND DEVIANCE: STUDIES ON ADOLESCENTS’ MENTAL HEALTH AND BEHAVIOR PROBLEMS”**

Explaining the antisocial phenomenon in adolescence through a Structural Equation Model
A. M. Morgado, and M. L. Vale-Dias — 9

Gender differences in strain, negative emotions and delinquency: a test for the general strain theory

Interplay between behavioural problems, social isolation and depressive symptoms
The influence of gender and socio-economic status on adolescents’ externalizing/internalizing problems and depressive symptoms

Stress and well-being of adolescent offenders and professionals in Brazilian Educational Centres
M. T. Figueiredo and M. L. Vale-Dias — 10

**SYMPOSIUM “MEASUREMENT ISSUES IN ADOLESCENT FORENSIC PRACTICE”**

Psychological & Psychiatric Assessment of violent extremism in radicalized youth
C. Lengua, and T. Diggle — 11

Evaluation of a child and adolescent forensic mental health service into secure settings in the North East of England
C. Lengua, and P. J. Kennedy — 12

Alnwood resource tool: a measure of service intensity in adolescent inpatient services
T. Diggle — 12

Acceptability of restrictive interventions to manage Clinical Risk
T. Foster — 13

17:00-18:10 – PARALLEL SESSION II

**SYMPOSIUM “UNDERSTANDING SEX DIFFERENCES IN THE RELATIONSHIP BETWEEN CONDUCT DISORDER AND ALTERATIONS IN BRAIN STRUCTURE AND FUNCTION”**

Sex-dependent brain structure alterations in adolescents with Conduct Disorder

Investigation of white-matter microstructure differences in male and female youths with conduct disorder in the FemNAT-CD study

Functional and structural brain alterations in typically-developing youths with callous-unemotional traits

Neural underpinning of reinforcement learning in children and adolescents with Conduct Disorder
J. Sidlauskaite, A. Smaragdi, R. Riccelli, K. Gonzalez, I. Puzzo, and G. Fairchild — 16

Sex matters: Preliminary findings on grey matter volume in youths with Conduct Disorder from the FemNAT-CD consortium
SYMPOSIUM “YOUTH FORENSIC PSYCHIATRY: THE IMPACT OF CHANGES IN SELF-ESTEEM ON BEHAVIOR”

Increasing implicit self-esteem as a underlying concept in the treatment of youth in a forensic hospital
M.I. Van den Bogerd — 17

Relation between self-esteem and internalizing problems in adolescents within a forensic youth psychiatric hospital
I.L. Bongers, and Ch. Van Nieuwenhuizen — 18

Adolescents in secure residential care: The role of active and passive coping on general well-being and self-esteem
C.S. Barendregt, A.M Van der Laan, I.L. Bongers., and Ch. Van Nieuwenhuizen — 18

ORAL PRESENTATIONS
“INTERVENTIONS FOR YOUNG OFFENDERS: MODELS AND PROGRAMS”

Ethnic minority caregivers’ experience of multisystemic therapy: Mechanisms of engagement and change
S. Fox, F. Bibi, H. Millar, and A. Holland — 19

Forensic Treatment Program for Juvenile Delinquents
C. Bessler, M. Aebi, and T. Best — 19

Reintegration of violent young men: the case of Rotterdam
C. H. Paalman, L. Harwig, and Th. A. H. Doreleijers — 20

Implementing Multidimensional Family Therapy targeting delinquent behavior and alcohol abuse among high-risk children and youth aged 12-18 in Estonia
A. Kala, T. Meres, and K. Joost — 20

SYMPOSIUM “PRACTICE AND OUTCOMES FROM FAMILY-CENTERED CARE IN CLOSED INSTITUTIONS: A MODEL FOR THE DAILY LIVING CLIMATE AND A BRIDGE FOR OUTPATIENT TREATMENT”

Practice of family-centered care
K. Mos — 21

Family-centered care in Juvenile Justice Institutions (JJIs): what do parents want?
I. Simons — 21

Family based care for young adults in JJI placed under adolescents criminal law
G. van de Waterbeemd — 21

Research about MDF and CBT
T. van der Pol — 22

SYMPOSIUM “INVOLUNTARY PSYCHIATRIC TREATMENT OF MINORS IN SELECTED EUROPEAN COUNTRIES”

Legislation and practice of involuntary psychiatric treatment of minors in Finland
R. Kaltiala-Heino — 23
Legislation and practice of involuntary psychiatric treatment of minors in Sweden
M. Bruenger — 23

Involuntary psychiatric treatment of minors in Germany – legislation and practice
L. Kjellin — 23

**ORAL PRESENTATIONS “MENTAL HEALTH SCREENING IN YOUNG OFFENDERS”**

Diagnostic performance of the MAYSI-2 in a sample of Swiss youths in welfare and juvenile justice institutions

MAYSY-2: Construct validity in Russian sample
E. Dozortseva and A. Pally — 24

Massachusetts Youth Screening Instrument – Version 2 (MAYSI-2): Portuguese convergent validity studies in male juvenile offenders

Self-report juvenile delinquency and victimization in Portugal: Preliminary data from the third international self-report delinquency study (ISRD-3)
P. Martins, S. Mendes, G. Fernández-Pacheco, and I. Tendais — 25

Factor structure of the Spanish version of the Child Problematic Trait Inventory in a population sample of 4- to 13-year old children
B. Molinuevo, L. López-Romero, A. Bonillo, and E. Romero — 25

18:15-19:00 – PLENARY SESSION I

The future of forensic youth care in a changing society
Theo Doreleijers — 26

MAY 12TH 2016, THURSDAY
09:00-09:45 - PLENARY SESSION II

Children and young people in residential child care: A therapeutical approach
Jorge del Valle — 27

PARALLEL SESSION III AND IN CONGRESS WORKSHOP

**SYMPOSIUM “PSYCHOPATHIC TRAITS: MEASUREMENT & MECHANISMS”**

The Youth Psychopathic traits Inventory: A bifactor model, dimensionality, measurement invariance and the relation with mental health problems
W. Zwaanswijk, V. Veen, and P. Vedder — 28

Predicting child behavioral maladjustment from the three-factor model of psychopathic personality
L. López-Romero, and E. Romero — 28
How do psychopathic traits manifest in early childhood?
E. Platje, V. Veen, and H. Swaab — 29

Psychopathic traits modulate anterior insula encoding of guilt during everyday moral transgressions
A. S. Cardoso, C. Sebastian, E. McCrory, L. Foulkes, M. Buon, J. Roiser, and E. Viding — 29

**ORAL PRESENTATIONS “DEVELOPMENTAL DISORDERS AND DELINQUENCY”**

Type of delinquency in juveniles with autism spectrum disorders
A. Rutten, M. Kempes, R. Vermeiren, and C. van Nieuwenhuizen — 30

The psychological evaluation of the juvenile delinquents affected by mild intellectual disability in judicial context in the French-speaking part of Switzerland
F. Carvajal Sánchez and Y. Gouba — 30

Foetal Alcohol Spectrum Disorder (FASD), its relevance to forensic adolescent services
E. Gralton — 31

Presser – the forgotten story
J. Kasinathan, J. Le, A. Barker, and G. Sharp — 31

**ORAL PRESENTATIONS “AGGRESSIVE BEHAVIOR AND MENTAL HEALTH PROBLEMS I”**

Violent and homicidal ideations: Their assessment and relation to mental health and violence in youth
A. Murray, M. Eisner, D. Ribeaud, and I. Obsuth — 32

The experience of using different types of personality assessment to enhance the formulation of adolescent sexually harmful behaviour (SHB) in the Adolescent Resource and Therapy Service (ARTs) - a community based forensic child and adolescent mental health service (fCAMHS) in South London, England
P. Collins and R. Chandy — 32

Sexual aggressive behavior of adolescents in institutional care – Data from the German sample SGInst
M. Allroggen, T. Rau, and M. Kölch — 33

Investigating limbic white-matter microstructure in adolescents with Conduct Disorder and typically developing control subjects

**SYMPOSIUM “BREAKING THE WALLS”: MENTAL HEALTH AND JUVENILE JUSTICE IN PORTUGAL**

Psychotherapeutic intervention model with young offenders
A. Lavado and A. Vieira — 34
Giving meaning to the bricks: the co-construction of change with juvenile offenders’ families
D. Santos — 34

Proposal for a therapeutic unit – bringing mental health care into the juvenile justice
M. Macedo — 35

SYMPOSIUM “THE USE OF ROUTINE OUTCOME MONITORING (ROM) FOR TREATMENT, RESEARCH AND POLICY IN COMPLEX RESIDENTIAL SAMPLES”

Serious juvenile offenders: subgroups of offenders and differences in treatment needs

Routine Outcome Monitoring in juvenile justice institutions: successes and pitfalls
E. Mulder, and N. Hornby — 35

Applicability of data from nationwide monitors for policy making and scientific research

In Congress Workshop "Introduction to the SAPROF-Youth Version: Assessment of protective factors for violence risk in juveniles"
M. Vries Robbé, and A. Kleeven — 36

11:30-12:45 – PARALLEL SESSION III

Callous-unemotional traits and pathways to persistent conduct problems
Essi Viding — 37

11:30-12:45 – PARALLEL SESSION IV

SYMPOSIUM “PSYCHOTRAUMATIC ASPECTS OF THE YOUTH WELFARE SYSTEM”

Interpersonal trauma in youths in compulsory residential care: Assessment and treatment

Multisystemic therapy for Child Abuse and Neglect (MST-CAN) as a possible intervention for parents and children with trauma experience
S.Hefti, T. Pérez, U. Fürstenau, B. Rhiner, and M.Schmid — 38

What protects child welfare staff from burnout and secondary traumatic stress?
Psychophysiological correlates of personal boundary violations experienced by professional caregivers
N. Kind, C. Dölitzsch, S. Fischer, and M. Schmid — 38

**ORAL PRESENTATIONS “MENTAL HEALTH SERVICES FOR CHILDREN AND ADOLESCENTS: ORGANIZATIONAL AND INTERVENTION MODELS”**

Polyvictimisation, mental health outcomes and service use
K. Mueller-Johnson, I. Obsuth and M. Eisner — 38

Current situation of cooperation between Mental health Services and Police in Shiga Prefecture, Japan
T. Inagaki, T. Nakabayashi, and T. Tanaka — 39

“I don’t want to live like that!” Delinquent boys seeking help themselves – A voluntary forensic outpatient treatment
B. Plattner, E. Marte, and L. Thun Hohenstein — 39

Building a cross-sectoral network organization for adolescent girls with a combination of psychiatric problems and a problematic family situation
R. Steens and J. Manssens — 40

The Child Protection Services histories of multiproblem young adults

**ORAL PRESENTATIONS “YOUTH CARE AND TREATMENT ISSUES”**

Relating therapist characteristics to client engagement and the therapeutic alliance in an adolescent custodial substance misuse treatment programme
R. Daniels and E. Holdsworth — 41

Intensified care and supervision in Croatia: Perspective of juvenile offenders and measure leaders
A. Mirosavljevic, I. Boric, N. Ricijas, and M. Rihtaric — 41

Effect of high security need psychiatric adolescent patients on a medium security care unit
G. Sofi — 42

Forensic-psychiatric inpatient care for juvenile offenders in Germany
W. Weissbeck — 42

**SYMPOSIUM “A SHAME AND COMPASSION BASED APPROACH TO PSYCHOPATHY IN ADOLESCENCE”**

Child and adolescent psychopathy: An evolutionary shame based perspective
D. Ribeiro da Silva, D. Rijo and R. Salekin — 43

The impact of shame and shame maladaptive coping strategies in the endorsement of psychopathic traits
P. Vagos, D. Ribeiro da Silva, D. Rijo, and N. Brazão — 43

Shame and shame related variables: Comparisons between a community and a forensic adolescent sample
N. Brazão, D. Ribeiro da Silva, P. Vagos, and D. Rijo — 44
Compassion focused therapy with young offenders presenting psychopathic traits: Overview of a new intervention program
D. Rijo, D. Ribeiro da Silva, P. Castilho, N. Brazão, P. Vagos, and P. Gilbert — 44

SYMPOSIUM “CRIME AND TRAUMATIC BRAIN INJURY: CAUSAL LINKS AND POTENTIAL INTERVENTIONS”

The prevalence of traumatic brain injury among young offenders in custody: reflections on systematic review
Nathan Hughes, Huw Williams, and Prathiba Chitsabesan — 44

A Health economic analysis of TBI in relation to the costs of crime and the promise of neurorehabilitation
H. Williams, D. Ramsbotham, M. Parsonage, T. McMillan, P. Chitsabesan, and S. Fazel — 45

Traumatic brain injury in young offenders and co-morbid mental health needs; findings from the Comprehensive Health Assessment Tool (CHAT) Study
P. Chitsabesan, C. Lennox, H. Williams, O. Tariq, and J. Shaw — 45

Review of evidence based interventions for young offenders and suggestions for practice, including a focus on TBI
S. Fox — 46

SYMPOSIUM “DEVELOPMENT OF ADOLESCENT DELINQUENCY IN DIFFERENT INTERVENTION SETTINGS”

Predictive utility of the Youth Psychopathic Traits Inventory
T. Pérez, N. Jenkel, K. Schmeck, and M. Schmid — 47

Antecedents of delinquency – results of two longitudinal studies
K. Schmeck, N. Jenkel, J.M. Fegert, and M. Schmid — 47

Childhood traumatic experiences and mental health problems in sexually offending and non-offending juveniles

14:50-16:00 – PARALLEL SESSION V

SYMPOSIUM “TREATMENT OF MALE ADOLESCENT SEXUAL OFFENDERS WITH PARAPHILIC DISORDERS: STATE OF THE ART”

Treatment Approach and WFSBP Guideline
F. Thibaut — 48

Evaluation of Juvenile Sexual Offenders
Y. Taneli — 48

Ethical Issues in Treating Juvenile Sexual Offenders
P. Cosyns — 49
ORAL PRESENTATIONS “RISK AND PROTECTIVE FACTOR STUDIES II”

Youngsters on probation: An approach from protective factors
M. Zanoli and E. Peruzzo — 49

The familial basis of changes in brain structure in adolescents with Conduct Disorder and their unaffected first-degree relatives
G. Fairchild, K. Sully, A. Darekar, L. Passamonti, E. Sonuga-Barke, and N. Toschi — 50

Experience of child sexual abuse in two neighboring countries: is there a common pattern?
M. Raleva, G. Qirjako, and M. Boshkovska — 50

The impact of street hawking on the psychosocial well-being of young people in Nigeria
N. Okeke, T. Alwyn, A. Tatham, and D. Clayton — 51

Student-teacher relationship and adolescent delinquency
I. Obsuth, M. Eisner, D. Ribeaud, A. Murray, and P. Sulger — 51

ORAL PRESENTATIONS “RESEARCH ON MENTAL HEALTH PROBLEMS AND ASSOCIATED VARIABLES I”

Emotional maltreatment among detained adolescents: Relations with aggression and mental health problems
P. Vahl — 52

Quality of life in relation to future mental health problems and offending: Testing the Goods Lives Models among detained girls
L. van Damme, M. Hoeve, R. Vermeiren, W. Vanderplasschen, and O. Colins — 52

A snapshot of adolescent offenders profile in one Kosovo correctional centre
G. Halilaj, F. Drevinja, M. Gjocaj, S. Haxhibeqiri, J. Majkovci, and N. Fanaj — 53

Public mental health care needs of young adult violent repeat offenders
M. Segeren, T. Fassaert, M. de Wit, and A. Popma — 53

“Me and my home”: Residential care quality and adolescents’ psychological adjustment, self-esteem and satisfaction with life
S. Rodrigues, M. Barbosa-Ducharne, J. Del Valle, A. Mota, and J. Iglésias — 54

SYMPOSIUM “USE OF NEUROBIOLOGICAL INFORMATION IN THE SENTENCING AND TREATMENT OF JUVENILE AND YOUNG ADULT OFFENDERS”

Age and development appropriate sentencing of juveniles and young adults: Juvenile criminal law in the Netherlands
C. Barendregt, M. Beerthuizen, and A. van der Laan — 54

Delinquent young adults: delayed development or not?
Maaike Kernes, and Katy de Kogel — 55

Neurobiology in forensic assessment of adolescents and young adults: prevalence and consideration of neurobiological deficits
I. Berends, M. Kempes, N. Duits, and W. van den Brink — 55
Autonomic Nervous System Functioning during Empathic Response to Sadness in relation to Psychopathic Traits in Detained Juveniles
E. Ruigh, L. Jansen, R. Vermeiren, T. Doreleijers, and A. Popma — 55

**SYMPOSIUM “ADOLESCENTS IN RESIDENTIAL CARE: RELATIONSHIPS AND PSYCHOLOGICAL ADJUSTMENT”**

The predictive role of emotional dysregulation on peer attachment of institutionalized adolescents
A. Lino, and L. N. Lima — 56

A comparative study on dating violence between institutionalized and non-institutionalized adolescents
L. N. Lima, and C. Fonseca — 56

Shame as a mediator of the relationship between negative emotional memories and dating violence of institutionalized adolescents
L. N. Lima, and A. Lino — 56

“Falling seven times and getting up eight”: The importance of the relationships established with peers and residential caregivers to the resilience of institutionalized adolescents
S. Inácio, A. Lino, and C. Farate — 57

**SYMPOSIUM “IMPROVING SECURE RESIDENTIAL CARE CLIMATE: PRACTICE- AND EMPIRICAL BASED RESULTS”**

Improving climate in 9 Dutch juvenile Justice Institutions over a 3 years period, results and challenges
J. Nagtegaal, and A. Dekker — 57

Improving institutional climate in 5 Youth Prisons and secure residential Schools for Children at risk in Estonia, results and challenges
J. Salla, and K. Tamms — 58

Improving institutional climate in Belgium residential institutions & youth prisons: Results and future plans
D. Levrouw, E. Strijbosch, R. Roosen, and Bie Tremmery — 58

Improving living group climate in secure residential care for children with a Mild Intellectual Disability
J. van der Linder, and M. Beld — 58

16:30-17:40 – PARALLEL SESSION VI

**SYMPOSIUM “HOW WELL DO CALLOUS-UNEMOTIONAL TRAITS REALLY CAPTURE A CLINICALLY MEANINGFUL SUBGROUP OF ANTISOCIAL YOUTHS AND ARE THERE ALTERNATIVES?”**

The Low Prosocial Emotions specifier to the Conduct Disorder diagnosis in the DSM 5 – How well does it really work?
O. Colins — 59
Comparing Different Approaches For Subtyping Children With Conduct Problems: Callous-Unemotional Traits Only Versus The Multidimensional Psychopathic Personality Construct
H. Andershed — 60

Heterogeneity in antisocial behavior at age 3: Early life antecedents and association with age 15 biological and environmental measures
K. Fanti — 60

**ORAL PRESENTATIONS “ASSESSMENT AND TREATMENT OF CHILD AND ADOLESCENT VICTIMS I”**

Child and adolescents victims of sexual crimes: From the complexity of the phenomenon to the good practices of intervention by the Portuguese Judiciary Police
C. Soeiro and R. Guerra — 61

Is it crime or peer sexuality? Reexamining the age of consent and perception of young adults on criminality of sexual acts among minors
Celik, M. Sarikaya, A. Faruk Ekinci, H. Ozdemir, and F. Gokcek — 61

Evidence-based assessment of child sexual and physical abuse in custody dispute cases
Laajasalo Taina — 62

Intervention with children victims of domestic violence in Portugal: Legal and regulatory framework, constraints and challenges

The impact of intimate partner violence on children
M. J. Martins and C. Baptista — 63

**ORAL PRESENTATIONS “AGGRESSIVE BEHAVIOR AND MENTAL HEALTH PROBLEMS II”**

Psychopathologic symptoms among perpetrators and victims of sibling violence
I. Relva, O. M. Fernandes, and P. Lopes — 63

Drug Abuse among Peruvian young offenders: an evaluative research from a developmental approach
H. Córdova — 64

The Importance of Studying the adolescence age in offenders in the institute of Kosovo Forensic Psychiatry
S. Haxhibeqiri, F. Drevinja, G. Halilaj, N. Fanaj, V. Haxhibeqiri, and S. Rexhepi — 64

**SYMPOSIUM “BREAKING THE WALLS”: BRING OUT IN EDUCATIVE CENTER**

Making Outcomes (In)
C. Delgado — 65

The circus arts as an instrument to promote social inclusion and the civic empowerment of young offenders
A. Peças — 65
Assessing an integration through art project
L. Rocha, and T. Santos — 66

Johnson’s Academy
J. Semedo — 66

**SYMPOSIUM “RESULTS FROM THE ACADEMIC WORKPLACE FORENSIC CARE FOR YOUTH: COLLABORATION OF RESEARCH, PRACTICE, AND EDUCATION TO IMPROVE CARE”**

The reliability of observation and the development of an observation checklist in two JJIs
K. Lampe — 66

Family-centered care (FC) in JJIs: quantitative and qualitative study
I. Simons — 67

Development of a Decision Support Tool for treatment in JJIs
S. Hillege — 67

**SYMPOSIUM “THERAPEUTIC CORNERSTONES OF AN ADOLESCENT FORENSIC UNIT”**

Aggression management in an adolescent forensic unit
R. Kaltiala-Heino — 68

Aggression Replacement Training (ART) in adolescent forensic care
T. Röning — 68

Adventure education in adolescent forensic care
V. Turunen — 69

**17:45-18:30 – PLENARY SESSION IV**

Children’s rights perspective on the mental health needs of young offenders and victims
Ton Lieffard — 69

**17:45-18:55 – SYMPOSIUM**

**SYMPOSIUM “FROM NATIONAL POLICY IN HARMFUL SEXUAL BEHAVIOUR TO CLINICAL PRACTICE: MIND THE GAPS!”**

Developing National Guidelines on Harmful Sexual Behaviour in England: a sneak preview
A. Kraam — 69

Developing a Service Specification for Harmful Sexual Behaviour Services in the Secure Estate for Young People: commissioner and clinicians working together
P. Phillips — 70
May 13th, Friday
09:00-09:45 – Parallel Session V

Developmentally appropriate investigative interviewing
Michael Lamb — 71

09:50-11:00 – Parallel Session VII

Symposium “European Longitudinal Studies of Offending”

Adult outcomes of social rejection in childhood
A. C. Fonseca, M. Oliveira, and J. T. Silva — 71

Family psychosocial characteristics influencing criminal behaviour and mortality
B. Klinteberg, Y. Almquist, U. Beijer, and P. Rydelius — 72

What does the FinnCrime Study tell about crime?
H. Elonheimo, D. Gyllenberg, L. Sillanmäki, J. Huttunen, T. Ristikari, and A. Sourander — 73

Intergenerational Transmission of Self-Reported Offending
M. M. Ttofi and D. P. Farrington — 73

Symposium “Forensic CAMHS in the UK: A Description of Services”

Community Forensic CAMHS in the UK: a model for the future?
O. White — 74

Mental health inreach for young people: working within a prison
H. Hales — 74

Medium secure inpatient treatment for young people: a national provision
J. Preston — 74

Symposium “Juveniles Who Sexually Offended: Subtypes and Offense Characteristics”

Patterns of Adverse Childhood Experiences in Juvenile Sexual Offenders and their Relations to Offense Characteristics
S. Barra, C. Besser, M. Landolt, and M. Aebi — 74

Psychopathic disturbances among subgroups of serious and violent youth: specificities of adolescent’s sexual offenders
R. Barroso — 75

Leaders and followers in juvenile multiple perpetrator sexual offending (MPSO)
T. da Silva, and J. Woodhams — 75
Juveniles, Internet & Sexual Offending
A. Boonmann, A. Grudzinskas, and M. Aebi — 76

ORAL PRESENTATIONS “RESEARCH ON MENTAL HEALTH PROBLEMS AND ASSOCIATED VARIABLES II”

Oppositional Defiant Disorder (ODD) and Conduct Disorder (CD): Empathy, anxiety and self-regulation
J. Pijper, M. de Wied, S. van Rijn, H. Swaab, S. van Goozen, and W. Meeus — 76

Characterizing the Process Underlying Emotion Recognition Deficits in Adolescents with Conduct Disorder
N. A. Martin-Key, W. J. Adams, E.W. Graf, and G. F. Fairchild — 77

Error related brain activity, cannabis use, and internalizing and externalizing problems in multiproblem young adults

The evolutionary roots of psychopathy: An explicative model of the impact of shame coping strategies
D. Ribeiro da Silva, P. Vagos and D. Rijo — 78

Shame memories and paranoia among sexual offenders: The role of external shame
P. Castilho, L. Palmeira, A. Pinto, L. Fonseca, J. Amílcar, E. Mendes, and G. Santos — 79

SYMPOSIUM “CHALLENGES IN SECURE TREATMENT AND YOUTH PRISON FOR ADOLESCENTS”

Repression in (secure) residential youth care, results of a systematic review and multi-level analysis
S. de Valk, and C. Kuiper — 79

Children rights in secure residential care
S. Hofte, and C. Forder — 80

Peer influences in secure residential care, positive or negative?
J. Sonderman, and F. Bekken — 80

Treatment motivation, social problem situation and aggression in a Dutch Youth prison, results from a longitudinal study
T. de Jong, and E. Eltink — 80

Therapeutic Alliance, treatment motivation and development in arts therapy with juvenile offenders in Dutch detention
E. Heynen, and S. van Hooren — 81

SYMPOSIUM “TOWARDS A TRANSLATIONAL APPROACH OF DISRUPTIVE BEHAVIOR DISORDERS?”

Dimensional aspects of disruptive behavior disorders
U. Schulze — 82
Imaging-epigenetics: animal models of aggressions and antisociality
Buitellar, and J. Glennon — 82

Role of gene-environment interactions in disruptive behavior disorders
P. Hoekstra — 82

Do trauma symptoms mediate the relation between neurobiological stress
parameters and conduct problems in girls?
L. Babel, T. Jambroes, S. Oostermeijer, P. M. van de Ven, A. Popma, R.
Vermeiren, T. Doreleijers, and L. Jansen — 83

11:30-12:45 – PARALLEL SESSION VIII

SYMPOSIUM “MENTAL HEALTH PROBLEMS AND VIOLENT
BEHAVIOURS AMONG JUVENILE OFFENDERS”

Family-based coaching in mental health care: Feasibility and effectiveness
M. Manetsch, R. Mäkeläinen, and C. Stadler — 83

Posttraumatic stress as a mediator of the relationship between experienced
trauma and violent behavior in a community sample of adolescent girls and boys
M. Aebi, M. Mohler-Kuo, S. Barra, U. Schnyder, T. Maier, and M. Landolt — 84

Affective, anxiety, substance related and externalizing disorders and their
relation to criminal recidivism in detained male adolescent offenders
D. Stiefel, C. Bessler, B. Plattner, and M. Aebi — 84

Treatment of a female juvenile offender with serious conduct disorder and
psychopathic traits: A case study
B. Aeby — 85

ORAL PRESENTATIONS “PARENTAL PRACTICES AND VIOLENCE”

Parental alienation: Research project and early study
G. Camerini, T. Magro, and U. Sabatello — 85

Parenting practices and sexual violence
V. Sigre-Leirós, J. Carvalho, and P. Nobre — 86

Family Group Conferencing in youth care: Family and problems characteristics
that make it happen

ORAL PRESENTATIONS “SEVERE OFFENSES AND
PUBLIC ATTITUDES TOWARD OFFENDING”

Cyberstalking prevalence and coping strategies on college students
C. Soeiro, A. Sani, and J. Carrasquinho — 87

A model for differentiating school shooters characteristics
M. Ioannou, L. Hammond, and O. Simpson — 87

Age effects on juvenile homicide perpetration
L. Hammond and M. Ioannou — 88
Content of juvenile crime news and its' effect on public attitudes toward juvenile offending
D. Celik, B. Celebi, E. Coban, and M. Habuloglu — 88

**ORAL PRESENTATIONS “RISK NEED ASSESSMENT”**

Risk and Needs Assessment through Children's Perspective
I. Boric, A. Mirosvavljevic, and N. Koller-Trbovic — 89

Adding a positive focus to risk assessment and treatment: the value of the SAPROF-YV and SAVRY in juvenile justice institutions
M. Robbé, A. Kleeven, E. Mulder, and A. Popma — 89

Does agreement between informants on externalizing problem behavior of adolescents in forensic predict a lower risk of recidivism?
M. J. Noom, I.L. Bongers, Ch. Van Nieuwenhuizen — 90

**SYMPOSIUM “DEVELOPMENTS IN JUVENILE DELINQUENCY: FROM PREVENTION, TO EVALUATION AND INTERVENTION”**

Growing up with adversity: From juvenile justice involvement to criminal persistence and psychosocial problems in young adulthood
M. Basto-Pereira, A. Miranda, S. Ribeiro, and A. Maia — 91

Assessment of Juvenile Offenders within the Portuguese Context
P. Pechorro and R. Barroso — 91

Continuities and discontinuities from transgression to delinquency
A. Morgado, and M. Vale-Dias — 91

Reliable clinical change after a 25 session cognitive behavioral program with male young offenders
D. Rijo and N. Brazão — 91

**SYMPOSIUM “MULTIDISCIPLINARY THERAPEUTIC AND INSTITUTIONAL APPROACHES FOR ADOLESCENTS WITH DISRUPTIVE BEHAVIOR DISORDERS”**

Psychosocial and institutional interventions for adolescents with DBD
S. Tremmery — 92

Clinical Pharmacology of Disruptive Behaviour Disorders
Zuddas, C. Balia, and S. Carucci — 92

Philado: a professional network for adolescents with DBD
D. Purper-Ouakil, and M. Paradis — 93

**14:00-14:45 - PLENARY SESSION**

Risk factors for psychopathy in two generations
David Farrington — 93
SPECIAL SESSION “THE O”

Prevalence of mental health problems including suicidality and learning disabilities among young offenders in detention: A meta-analysis
M. Livanou, V. Furtado, A. Silvester, and S. Singh — 94

Risky decision making in ADHD: A meta-regression analysis

Boys with ODD/CD show impaired adaptation during stress: An executive functioning study
J. Schoorl, S. van Rijn, M. de Wied, S. van Goozen, and H. Swaab — 95

Linking heart rate variability to psychological health and brain structure in female youths with conduct disorder
M. Prätzlich, N. Raschle, L. Fehlbaun, W. Menks, L. Kersten, S. Mannstadt, C. Dietrich, and C. Stadler — 95

ORAL PRESENTATIONS “ASSESSMENT AND TREATMENT OF CHILD AND ADOLESCENT VICTIMS II”

Clinical and psychological consequences of child sexual abuse: A multi-faceted phenomenon
E. Dozortseva, E. Noutskova, and V. Badmaeva — 96

Care project and care network: Support to children and youngsters victims of sexual violence
B. Brito and C. Ferreira — 96

Adolescent male sexual offenders and online sexual behaviour: Consequences for assessment and therapy
Z. Lkasbi, E. Bradt, and D. Neves Ramos — 97

The Looking-Glass Self Hypothesis in maltreated children and adolescents: Parents’ influence in the construction of their self-representations
Silva and M. Calheiros — 97

ORAL PRESENTATIONS “RESEARCH ON TREATMENT OUTCOMES II”

Lessons learned? Iatrogenic effects of psychosocial interventions for juvenile offenders
M. Aebi — 98

Specialized Foster Home: Youngsters and families’ perspectives regarding the intervention model
L. Barbas and M. E. Mendes — 98

Clozapine use in the treatment of emerging Personality Disorders in adolescents
E. Delmage, S. Hill, and O. White — 99
ORAL PRESENTATIONS “PREVALENCE OF MENTAL HEALTH PROBLEMS AMONG YOUNG OFFENDERS”

Evaluation of mental health needs of adolescent offenders in one Kosovo Correctional Centre  
N. Fanaj, E. Melonachi, S. Mustafa, and B. Fanaj — 100

Mental health problems, self-esteem, hopelessness and attachment style: Exploring possible links with adolescent offending in Kosovo  
N. Fanaj, F. Shkëmbi, B. Kabashaj, E. Zogaj, and I. Poniku — 100

Psychopathology in juvenile sex offenders: A follow-up after 12 years  
M. Versloost, C. Paalman, R. Overmars, and L. Jansen — 101

POSTER PRESENTATIONS

MAY 12TH 2016, THURSDAY
09:00-19:30 – SESSION I

1. Needs and achievements of juvenile justice system: Insights from two matched control-studies  
M. Basto-Pereira, S. Ribeiro, and A. Maia — 103

2. Authenticity and contagion in response to real and posed laughter stimuli in adolescents with conduct problems and callous unemotional traits  

3. Extreme/‘Pathological’ Demand Avoidance: An Examination of the Behavioural Features Using a Semi-Structured Interview  
E. O’Nions, C. Floyd, E. Quinlan, A. San José Cáceres, C. Pigeon, E. Viding, and F. Happé — 104

4. Cross-sectoral collaboration in care for adolescent girls with multiple and complex problems’– population characteristics and care trajectories  
H. Van den Steene, I. Glazemakers, and D. van West — 104

5. Cornelia de Lange Syndrome and Gilles de la Tourette Syndrome in the same individual – forensic aspects  
K. Karher, I. Banda, J. Karher, and B. Malbasa — 105

6. The Finncrime study  
H. Elonheimo, D. Gyllenberg, L. Sillanmäki, J. Huttunen, T. Ristikari, and A. Sourander — 106

7. Juvenile offenders: Risk factors for violent behavior  
J. Martinez Mas, M. R. Siñol, N. D. P. Sanchez, C. Mendoza, Jaume, R. S. M. P. Conill, M. C. Ramirez, and O. C. P. — 106

8. Antisocial behaviours in adolescence: What is behind deviancy?  
A. M. Morgado and M. L. Vale-Dias — 107

9. Preventing aggression in schools: Qualitative analysis on a community-based and universal intervention with adolescents  
P. Vagos, D. Rijo, and I. M. Santos — 107
10. Preventing aggression in schools: preliminary evaluation of a psycho-educational intervention with teachers
P. Vagos, D. Rijo, and I. M. Santos — 108

11. What do others feel? Association between callous unemotional traits and conduct problems among preschools and cognitive empathy deficits
G. Georgiou, K. A. Fanti, and E. R. Kimonis — 108

12. Monitoring and evaluation of adolescent criminal law in the Netherlands

13. Investigating sex differences in risk-taking behaviour in adolescents with conduct disorder in the FemNAT-CD study

14. The family influence through the deviant peer group on substance use in adolescence
O. Cutrín, L. Maneiro, and A. Gómez-Fraguela — 110

15. Children and adolescent multiple victimization: Guidelines for intervention
S. Caridade, A. Sani, and L. Nunes — 110

16. Psychological assessment in young people with deviant behaviours
S. Caridade, L. Nunes, and A. Sani — 111

17. School diagnostic: perceptions of educational professionals
S. Caridade, L. Nunes, and A. Sani — 111

18 Attention in individuals with conduct problems and callous unemotional traits: eye tracking data
M. N. Kyranides and K. A. Fanti — 111

19. Self-rated psychopathic traits in a sample of Finnish treatment-seeking girls with internalizing and externalizing disorders

20. The assessment of Psychopathic Personality (PP) in Greek Cypriot children from the age of 3: the child and problematic traits inventory
C. A. Demetriou and K. A. Fanti — 112

21. Neuronal basis of facial expression processing in youths with conduct disorder
W. M. Menks, L. V. Fehlbaum, L. El Qirinawi, F. Euler, N. M. Raschle, and C. stadler — 113

22. Individual risk factors for antisocial behaviour in institutionalized youths
L. Maneiro, O. Cutrín, and J. Sobral — 113

23. The design of an effect study on multiproblem young adults: What works for whom?
M. Luijks, F. Bevaart, J. Zijlmans, L. van Duin, R. Marhe, T. Doreleijers, and A. Popma — 114

24. Juveniles who have committed sexual offenses: Patterns and subtypes
E. Bradt, T. Vertommen, K. Uzieblo, and D. van West — 114

25. Intervention in residential care context with children and young victims of violence
A. I. Sani, S. Caridade, and L M. Nunes — 115
26. Identifying risk profiles for antisocial behavior in a Spanish sample of institutionalized youths  
L. López-Romero, L. Maneiro, O. Cutrín, and P. Villar — 115

27. Inventory of European diagnostic and treatment guidelines and practices for children (6-12 years) with severe behaviour problems (SBP’s)  
A. Gătej, A. Lamers, L. van Domburgh, and R. Vermeiren — 116

28. Gxe-based criminal dangerousness in psychopaths: implications for the law  
M. I. G. Tapia, I. Obsuth, & R. Heeds — 116

29. Empathic accuracy in female adolescents with conduct disorder and varying levels of callous-unemotional traits  
G. Allison, G. Fairchild, and N. Martin-Key — 117

30. Risk factor and mental health symptoms in a Chilean sample of persistent young offenders  

31. Using multivariate pattern analysis to distinguish youths with and without conduct disorder based on brain structure  
E. Flemming, N. M. Raschle, L. V. Fehlbaum, W. M. Menks, F. Euler, M. Guggenmos, M. Rothkirch, C. Stadler, and P. Sterzer — 118

32. (Non)aggressive assertiveness: psychosocial characteristics of assertive non-aggressive and aggressive adolescents  
A. Melo, and P. Vagos — 118

33. A shame focused approach to explaining peer victimization in adolescence  
R. Marques, P. Vagos, and D. Rijo — 119

34. Gender-based expressions of aggression and victimization in youth  
A. N. Queirós, and P. Vagos — 120

35. Affective empathy as a predictor and moderator of social skills training (SST) effects on social cognitive skills in juvenile delinquents  

36. Juvenile sex offenders and nonsexual violent offenders: do they share the same risk factors?  
A. M. Catena, and S. R. Illescas — 121

37. Scenes for social information processing in adolescence: developmental and validation procedures  
P. Vagos, D. Rijo, and I. M. Santos — 121

38. Difficulties and obstacles in the assessment of risky sexual behavior of adolescents  
M. Dabkowski — 122

J. M. Mas — 122
40. Mapping the structural organization of the brain in female adolescents with conduct disorder

41. Changes in early maladaptive schemes in Portuguese institutionalized adolescents: results of a psychosocial rehabilitation program for at-risk youth
L. Santos, and M. R. Pinheiro — 123

42. The impact of shame and shame coping strategies in the relationship between early experiences and aggressive behavior in adolescents
C. Oliveira, D. Rijo, and N. Brazão — 124

43. Who will stop when everybody starts offending? Childhood risk and protective factors in childhood onset offenders for adolescent desistance
B. C. M. van Hazebroek, L. van Domburgh, and A. Popma — 124

44. Interviewing children victims of CAN in court proceedings
M. Boshkovska, and M. Raleva — 125

45. Hazing in higher education in Portugal: History and review of facts and studies
M. J. Martins, S. N. Caldeira, M. Mendes, S. P. Botelho, and O. Silva — 125

46. The Growing Pro-Social program: Preliminary results from baseline to follow-up in a sample of Portuguese institutionalized adolescents
L. Santos and M. R. Pinheiro — 126

47. Risk factors for adolescent sex offenses: evaluation of predictive factors in child sex offenders, peers/adults offenders, and non-sex offenders
E. Ramião and R. Barroso — 126

48. Psychopathic traits in juvenile sex offenders with pedophilic interests
R. Barroso and P. Figueiredo — 127

49. An audit of interventions to manage overweight and obese young people in a secure adolescent unit
N. Tarrant and J. O’Brien — 127

50. Recollections of childhood victimization: A study of their impact on young adults’ psychosocial adjustment
A. C. Fonseca, M. Oliveira, S. Coelho, and A. Moreira — 127
New developments in youth forensic mental health care
Chijs van Nieuwenhuizen

For juveniles that commit crimes, and those who get into serious trouble, many factors play a role such as their family background, peers, and mental health problems. If we want to change the risky or offending behaviour of these youngsters, we should pay ample attention to each of these aspects. In the last ten years, the use of eHealth (i.e., internet and related technologies) in youth forensic mental health care has increased significantly. In addition, implementation of positive psychology in youth mental health care is on the rise. New developments that are worth to explore further.

Disentangling emotion dysfunction in girls versus boys with conduct disorder

Converging evidence from research on males with CD suggests that three areas of emotion functioning may contribute to conduct problems, including deficits in emotion recognition, emotion learning, and emotion regulation. Thus, the aim of our multisite study is to identify common and gender-specific profiles of emotion dysfunction in a well-characterized sample of youth with CD compared to healthy controls. Emotion processing data from 257 cases with CD and 375 age- and sex-matched controls (9-18 y) were analyzed. Preliminary analyses showed impaired emotion recognition across all basic facial emotions, impaired emotional control as well as deficient punishment learning (with reward learning being enhanced) in CD, with male and female patients being equally impaired. These data demonstrate the complex nature of emotional dysfunction in boys and girls with CD.
Basal and reactive neuroendocrinological measures in children and adolescents with conduct disorder: First data from the European FemNat-CD consortium
A. Bernhard, A. Martinelli, K. Ackermann, C. M. Freitag, and The FemNat-CD consortium

Endocrinological alterations have been found in Conduct Disorder (CD), e.g. decreased basal and reactive CORT levels compared to healthy controls. To assess group, gender and methodological differences basal and reactive CORT and TEST levels of CD males and females and healthy controls were measured within FemNAT-CD. Preliminary results showed no significant group or gender main or interaction effects on basal CORT, but significant group and gender effects on basal TEST. On contrary, significant group and gender main and interaction effects emerged for reactive CORT, but not for reactive TEST. CD females showed decreased reactive CORT levels same as CD males. Results indicate reactive measures to be more sensible and specific to detect group differences for CORT in CD. Increased sample size is needed to further assess preliminary results.

Psychophysiological measures in the FemNAT-CD study: Autonomic Nervous System Functioning in Girls with Severe Conduct Problems
H. Oldenhof, L. N. Jansen, A. Popma, and The FemNAT-CD Consortium

Although the Autonomic Nervous System (ANS) has been studied extensively in males showing conduct problems, much remains unclear regarding the relation of ANS parameters and behavioural problems in females. Thus, this study aims to investigate both basal and reactivity measures of ANS in female adolescents with CD. A sample of 128 CD-girls was compared with 173 female controls (9-18 years old). ANS activity was measured on heart rate (HR), parasympathetic activity on heart rate variability (RSA), and sympathetic activity on pre-ejection period (PEP). Baseline measures revealed no differences between the CD and control group. As for the ANS response, CD-girls showed a significant larger decrease in HR than controls. These results are not in line with earlier findings. However, these are based on male samples, while scientific evidence regarding female subjects is scarce.

The Impact of Community Violence in Adolescents with Conduct Disorder

In inner-city communities violence has reached epidemic proportions with large numbers of adolescents reporting direct/indirect exposure. Conduct-disordered (CD) adolescents are at a high risk of experiencing community violence exposure (CVE). This study investigates the prevalence of CVE in adolescents (CD vs. controls) in three EU-countries. Further, the probability for substance use/internalizing problems/aggression phenotypes based on given risk factors will be determined in a violence-exposed CD subsample. Adolescents assessed within FemNAT-CD will be analyzed with the Social and Health Assessment scale as key measure for CVE. Latent class analysis will show the probability a given individual will exhibit certain types of internalizing/externalizing problems based on his/her class. Data are yet to be analyzed. We expect to show a differential impact of risk factors affecting mental health of violence-exposed youth with CD.
Compensatory and protective factors against violent delinquency in late adolescence in a sample of at-risk males

N. Fontaine, M. Brendgen, F. Vitaro, and R. Tremblay

We know little about the compensatory and the protective factors at different developmental periods for kindergarten children who are at risk of violent delinquency in adolescence. The goal of this study is to identify compensatory/protective factors in pre-adolescence and in mid-adolescence against late adolescence violent delinquency in a sample of at-risk males. The participants were from the Montreal Longitudinal and Experimental Study, a prospective longitudinal study of 1,037 kindergarten boys from disadvantaged neighborhoods. We used latent profile analysis to identify at-risk and non-at-risk behavioral profiles in kindergarten and regression analyses to test the putative compensatory/protective factors against late adolescence violent delinquency. Each of the selected factors concerned modifiable elements of the boys’ family (parental supervision), school (school engagement), and personal life (perceived legitimacy of legal authorities). Three at-risk behavioral profiles in kindergarten (i.e., Low, Moderate, and High aggressive-disruptive) were associated with violent delinquency in late adolescence. Perceived legitimacy of legal authorities, parental supervision and school engagement were identified as compensatory and/or protective factors in pre-adolescence and mid-adolescence against violent delinquency in late adolescence. The relative influence and the specific role of these factors depended, however, on the developmental period examined (pre-adolescence vs. mid-adolescence). Conclusion. Interventions that strengthen positive social bonds with the community (including legal authorities), family and school should be fostered from early elementary school to the end of high school to prevent violent delinquency during adolescence.

The impact of community violence in adolescents with Conduct Disorder

L. Kersten, L. Fehlbaun, W. Menks, M. Prätzlich, N. Raschle, S. Mannstadt, C. Dietrich, C. Stadler, and FemNAT-CD consortium

In inner-city communities violence has reached epidemic proportions. Findings suggest one-third or more of urban youth have been directly victimized and a vast majority have been exposed. Moreover, there is evidence that conduct-disordered (CD) adolescents are at a high risk of experiencing community violence exposure (CVE). In this study we will investigate the prevalence of CVE in adolescents with CD compared to healthy controls (HC) in three European countries. Further, the probability for substance use, internalizing problems and aggression phenotypes based on given risk factors will be determined in a violence-exposed subsample with CD. The objectives of this study are: (1) Compare the prevalence of CVE in European adolescents (CD vs. HC); (2) elucidate the specific impact of well-known risk factors (SES, family adversity, age of onset) on problem behaviors within a violence-exposed subsample with CD. A multi-national sample of adolescents aged 9-18 will be analyzed (N > 700). Data were assessed as part of the FemNAT-CD-project (www.femnat-cd.eu). Instruments utilized include Social and Health Assessment (SAHA) scale as key measure for CVE, a semi-structured interview (K-SADS), Youth Psychopathic Traits Inventory (YPI), and a study-specific Medical History questionnaire (with information on socioec-
onomic status, family adversity etc.). Latent class analysis will be presented to show the probability that a given individual will exhibit certain types of internalizing/externalizing problems based on his/her class. Data are yet to be analyzed. We expect to show a differential impact of risk factors as latent variables affecting the mental health of violence-exposed youth with CD.

**Attachment, self-control and drug use: The relationship with antisocial behavior in adolescents from Argentine**  
**A. Bobbio and K. Arbach**

Many theories have been proposed to explain causes of criminal behavior in youths. While some theories focus on social nature of crime, others emphasize the relevance of personal variables, such as some personality traits, attachment styles and early deviant behavior. Several empirical studies have provided support to the relationship between low self-control, drugs use and attachment styles with antisocial behavior in adolescents. In spite that Latin-America is the world region with the highest rate of juvenile crime, the majority of studies about their causes and predictors comes from developed countries. The goal of present study is to compare the distribution of personal variables among young offenders and high-school adolescents from Argentina and exploring the influence of self-control, drugs use and attachment on youth crime. It was a cross-sectional study with case-control design. Data were collected from 172 male adolescents by using self-report questionnaires. Young offenders report lower self-control levels, higher scores on ambivalent and avoidant attachment styles and more drugs use compared with high school students. Logistic regression was performed using group as the criterion variable. The predictive model composed by low self-control, secure and ambivalent attachment styles and a drug use history correctly classified 79.7% of cases (79.5% sensibility and 80.0% specificity). This study represents a novel empirical approach to criminal behavior among adolescents in Argentina. Results have important implications at the theoretical and practical level and are expected to stimulate recommendations for preventive actions adjusted to the socio-cultural context.

**“My neighborhood is cool!”: The social learning of violence and delinquency from children’s perspectives**  
**M. L. Carvalho**

This paper is based on a PhD in sociology concerning childhood, violence and delinquency in Portugal. Rooted in social ecology theoretical approaches and childhood studies, the main goal was to achieve a better understanding of children’s socialization processes considering multi-problematic spaces, mainly about their involvement in delinquency. A case study based on ethnographic research and child-centred research methods to explore children’s own accounts of their lives was carried out on six public housing neighbourhoods in the Lisbon Metropolitan Area. Most children complained about living there, describing how social and spatial segregation affected them. Violence and crime were labelled as the most prominent problems and children’s exposure to neighbourhood violence seldom occurs only once or just in one form. The ‘normalization’ of violence perceived by children influences their use of the neighbourhood’s places and reduces their sense of the seriousness and effects of violent acts. Residents’ low level of agency and the dilution of informal social control in these neighbourhoods reinforce the lack of social regulation, facilitating children’s social learning of delinquency. Part of childhood cultures generated here is underpinned by a culture of violence, and some children emerge not only as victims, but also as agents of de-
linquency. Their family and group involvement are key-factors in this process. For many children, delinquency has a instrumental role in their lives; they find in it attractive and rewarding forms of socialization, which vary from what they consider to be just children’s play to the need to obtain recognition in socially stigmatized areas.

**ORAL PRESENTATIONS “RESEARCH ON TREATMENT OUTCOMES I”**

**Chair: Christian Perler**

**Adolescent forensic inpatient treatment: First results of the Basel Catamnisis Study**

C. Perler and E. Lanzi

It has been shown that mental health problems are highly prevalent in juvenile offenders. Up to 60–70% of incarcerated adolescents suffer from a mental disorder. Recidivism is also known to be closely associated with psychopathology. Hence, a multidisciplinary psychiatric treatment is warranted. Such a treatment concept and unit exists in the Forensic Psychiatric Clinic (Forensische Psychiatrische Klinik [FPK]) in Basle, Switzerland since 2011. It is the first, and currently only, juvenile forensic inpatient unit in Switzerland. The Basel Catamnisis Study has been developed to measure the effectiveness of such a treatment approach.

The aim of the Basel Catamnisis Study is to collect data in regards to the inpatient population itself, its development, the rate of recidivism and its psychosocial reintegration. Our long-term goal is the description of this vulnerable group and the definition of effective treatment factors.

We contacted 40 adolescents who had been discharged from the unit. They were questioned in regards to their development, reoffending behavior and current psychosocial standing.

We present the data of these 40 adolescents.

Various clusters of adolescents can be defined in regards to their development. A typology is suggested which will help to highlight important treatment issues.

**Meta-analysis of the influence of CU-traits on treatment-outcome in juveniles with externalizing behavior**


Callous Unemotional (CU) traits are considered to be a core feature in the unfavorable development of antisocial behavior in youth. Moreover, it is argued that CU traits negatively influence the outcome of interventions. Previous research, however, showed equivocal results. So, the effect of CU traits on the change in externalizing behavior during and after intervention is not elucidated yet.

The present meta-analytic study investigates the influence of CU-traits on treatment outcome.

A total of 11 studies, summarizing 178 effect sizes (N=1499 participants) were subjected to a three level meta-analyses. Moderator analyses were performed to test for study, sample, treatment and outcome characteristics.

Overall, the interventions showed a large effect size on the clinical outcome measures (d = -0.851, p< .01). CU traits did not moderate the effect of the intervention directly (d = -0.848, p=.854). Though, in interaction with several characteristics, CU traits significantly influenced effect sizes; sample size of the
The present meta-analytic study reveals that, in general, CU traits do not negatively influence the effect of interventions targeting externalizing behavior. However, the results show several study, intervention and outcome characteristics in which high CU traits lead to a greater decline in externalizing behavior. These findings implicate that the assessment of the level of CU traits may improve the assignment of effective interventions for youth with antisocial behavior.

The effectiveness of treatment with sex offenders of three age categories: Late juveniles, early adults and adults
A. M. Catena and S. Illescas

The transition from adolescence to adulthood, which covers a long period of individuals development (that can fit between the ages of 18 o 30 years), is a relevant issue for the analysis of criminal careers and crime desistance. According to research, offenders of different ages included in this long period are also different in terms of criminal participation, risk factors influencing them and recidivism risk. And probably there are also different concerning the efficacy that can be expected from the rehabilitation programs applied to distinct age subjects. Despite these age differences, criminal justice systems usually treat all offenders aged 18 years or more in a very similar way.

This research evaluates a wide sample of men serving a sentence for sexual crimes in Spanish prisons. Specifically, the aim of this study is to analyze sex offender’s treatment effectiveness according to the age of the treated subjects. To do this, the sample was divided in three groups taking into account the age when sex offenders committed their crimes: late juveniles (corresponding to ages 18 to 25; N=100), early adult (26 to 30; N=50) and adults (31’ and so on; N=150). The participants were assessed, before and after treatment, by means of a scale designed to evaluate different therapeutic variables and needs of sex offenders under treatment: assertiveness, feelings of loneliness, aggressiveness, impulsivity, cognitive distortions, etc. Results show that treatment is therapeutically efficient in the three age groups of sex offenders. However, a specific analysis suggests more significant differences in the group of late juveniles than in the other age groups. Taking into account these results, prevention and treatment implications are discussed.

ORAL PRESENTATIONS “INNOVATE APPROACHES IN MENTAL HEALTH CARE FOR CHILDREN AND ADOLESCENTS”

Chair: Carlos Peixoto

Taking care of children with layered and complex life issues
J. Vanhee and E. Nouwen

The Flemish Government, Agency for Youth Wellbeing takes a new initiative concerning the inter- and transdisciplinary cooperation on behalf of children and youngsters with multidimensional and comorbid problems. This legalistic initiative facilitates the construction of a network of experts in which all involved sectors and disciplines of caretakers participate. It also provides a ‘rucksack’ of € 75.000 pro youngster, who will be taken care of in the network. The model of cooperation may be described as wraparound.
Flanders realized in 2014 a major shift in the organization of the youth care called Integrated Youth care. The six Flemish sectors Child and Family, General Wellbeing, Mental Health Care, Special Youth Care, Department of Education and the Flemish fund for social integration of people with disabilities, were asked to cooperate in a very performing way as to realize integrated youth care for children and youngsters with all kinds of demands. Due to the division of political responsibilities between the Flemish and the Belgian (federal) Government the Youth psychiatrists and Psychiatric centers are not directly involved in this shift. Nevertheless these experts are essential in the elaboration and offering of specialized help to children with complex behavioral and educational problems. Hence the initiative we like to present.

In three regions of Flanders the expert organizations are requested to form an operational network. These organisations are: the Community Institutions, that offer the so called “Closed help” in the framework of judicial youth care, institutions that provide help to youngsters with behavioural and emotional issues both in the sector of the Flemish fund for social integration of people with disabilities as in the sector of Special Youth Care, ambulatory and residential mental Healthcare for children, adolescents and young adults, Educational Sector... These networks will have to develop a program of help that offers: residential (including in the formula of time out) care, daily activities preparing for or supporting the school carrier of the children and of course the necessary therapeutic and personal support of the children and their parents. The model of this youth care network is wraparound based. One person will be the connecting and pivoting partner between the experts and the persons in the family context of the minors.

Because the children and their responsible adults such as their parents, foster parents or other people will be the equal partner of the caretakers such as psychiatrists, therapists, educators and counselors. A kind of inter- and even trans-disciplinary expertise will be developed and will be one of the main goals of this initiative, that also will be discussed at the conference.

Public-private partnership in developing psychosocial interventions
**N. Boonstra and X. Rooderkerk**

De Verre Bergen Foundation is a venture philanthropy organization that focuses exclusively on the city of Rotterdam (The Netherlands). Our aim is to have a long-term, positive impact on the city of Rotterdam by forming partnerships with innovative and scalable social ventures. At the moment we invest a yearly budget of 10 million euros. Our strategy is to provide long-term financial and non-financial support to promising social ventures, in order to support their growth, continuity and eventual self-sufficiency. Research plays an important role in our strategy. By means of scientific, practice-based research we support the initiatives and seek to develop evidence-based interventions. We would like to present two of the programs that we fund that portray public-private partnerships as funded through venture philanthropy. The first case study (n=700) concerns a psychosocial intervention focused on criminal youth, the second case study (n=600) targets young, multi-problem pregnant women. The research in these two programs is characterized by a partnership between researchers and practitioners, a long-term commitment (minimum of 5 years) and an evidence-based research design (RCT and quasi-experimental). In order to assure ownership of the interventions within policy guidelines, the responsible local administration is involved. Our foundation faces two challenges. First: how to facilitate the dissemination of knowledge gained in the two case studies? Second: how can we convey the local government to invest in evidence-based policies? Our presentation aims to evoke a discussion con-
Multidisciplinary approach in assessing juvenile offenders
C. E. Schalk, R. Haveman, M. Hulshof and N. Beuk

The assessment of juvenile delinquents by expert witnesses can profit from a multidisciplinary clinical approach. A number of juvenile institutions in the Netherlands decided to gather their forces and set as goal to refine the assessments and the therapeutic approach of juvenile offenders. Hereby facilitating the gathering of scientific data for research purposes. One of the consequences of this approach has been the creation of an observational unit to assess juveniles by expert witnesses in a residential setting prior to trial.

Following a court order, a juvenile suspect of a criminal offense is observed for seven weeks by a multidisciplinary team in a clinical setting named Teylingereind (juvenile detention centre). This multidisciplinary approach focuses on the gathering of information from different sources in order to get an (as complete as possible) assessment of the functioning of the juvenile suspect. This information is used by the expert-witnesses (psychologist and psychiatrist) and bundled in an observation report. Following this gathering of information, the Court is advised on the defendant’s pathology, the risk of re-offending and any recommendations regarding treatment or appropriate security measures.

For as far we know this assessment with a clinical observation, is one of the few, if not the only one existing department in Europe.

From the obvious hetero-anamnestic and anamnestic interviews to the less obvious non-verbal observation forms and the school observation, integration of information sources is the key.

It is our aim to present this multidisciplinary approach in expert-witness forensic assessment from legal and behavioural perspective.

The use of a structured interview protocol in children’s statements in Portugal: A comparative study

In Portugal, since 2007, a special proceeding of anticipated evidence, call “Declarações para Memória Futura” (DMF), is mandatory for children who are alleged victims of sexual abuse. DMF is an early interview, conducted in the investigation stage, that can be used as evidence in a trial because it’s an interview conducted by a judge. This procedure has a primary objective of preventing children from testifying in court. In a previous study, we describe a current practice en DMF caracterize by an excessive use of recognition prompts, and highlighted the dangers of such practice in terms of risk of contamination and children’s narrative.

The present study has the objective of compare a sample (N=18) of DMF interviews (current practice) with a paired (by children’s age and sex, relate with offender, and abusive practices) sample of DMF interviews performed with the NICHD Investigative Interview Protocol (N=18).

Interviews were coded using the coding scheme developed by Lamb and his colleagues (1996, 2008). Data was analyzed by interviewer question type and child details.

Our data demonstrates that the use of the NICHD Protocol increases the use of open-ended prompts by interviewers, at the same time that they rely less in recognition prompts. Also, the large majority of details provided by children, in NICHD interview, were provided in response to open-ended prompts.
This data seems to demonstrate the relevancy and usefulness of the implementation of a structured interview protocol in the DMF proceeding.

SYMPOSIUM “MALADJUSTMENT AND DEVIANCE: STUDIES ON ADOLESCENTS’ MENTAL HEALTH AND BEHAVIOR PROBLEMS”

Chair: Maria da Luz Vale-Dias

Explaining the antisocial phenomenon in adolescence through a Structural Equation Model
A. M. Morgado, and M. L. Vale-Dias

Adolescence stands out as a stage when deviancy is particularly prevalent in comparison to other moments in the life-span. We tested a Structural Equations Model with a sample of 378 adolescents who filled a sociodemographic questionnaire and the Portuguese versions of several self-report measures. Final results show a good fitting model where predictors are intertwined in a complex net of relations involved in the explanation of adolescent antisocial behaviour.

Conclusions indicate the importance of embracing the differentiated nature of each predictor (personality, family environment and conformity to social rules) and understand its role both directly and in relation to other predictors. We acknowledge differentiated intervention needs according to antisocial trajectories across adolescent.

Gender differences in strain, negative emotions and delinquency: a test for the general strain theory

According to the General Strain Theory strain leads to negative emotions which in turn lead to antisocial behaviour and crime. Does this theory applies equally well to both genders?

The main goal of this paper is to examine the relationship between strain, negative emotions and delinquency, including substance use, in a large sample of Portuguese adolescents and young adults, males and females from the community. For this purpose, we analysed data from a longitudinal study involving several hundred of Portuguese boys and girls followed from late childhood until early adulthood (7-26 years of age) and assessed five times. Participants were administered questionnaires assessing antisocial behaviour, substance use, personality, negative emotions, mental health problems and several sociodemographic characteristics. In the first wave parents and teachers also completed child behaviour checklists.

Results showed that gender differences in antisocial behaviour were already present in middle childhood and remained stable until the late twenties (with boys displaying more antisocial behaviour and substance use). Emotional problems appeared in adolescence, and increased afterwards (girls reporting more negative emotionality than boys). Furthermore, the findings provided support for the claim that accumulated strain (e.g., victimization) produces negative affect that leads to delinquent behaviour. However this link was clearly stronger for males than for females. Possible explanations for such gender differences are discussed.
Interplay between behavioural problems, social isolation and depressive symptoms

The relationships with others play a crucial role in human life. Particularly in adolescence, behavioural problems and social isolation arise, usually associated with the experience of negative feelings. Additionally, during this stage of development depressive symptoms can also develop. Parents can be very important in order to identify several aspects of internalizing/externalizing problems in childhood and adolescence, because they can be privileged observers of the children in diverse situations and during successive phases of their development.

The main purpose of this research is to obtain a deeper understanding of the relationships between behavioural problems, social isolation and depression in adolescence. The study includes two sources for information regarding social and psychological adjustment: parents and adolescents.

The sample consists of 1208 adolescents between 12 and 16 years old and their parents, who filled a sociodemographic questionnaire and the Portuguese versions of CBCL and CDI, assessing respectively externalizing and internalizing problems and depressive symptoms. Results show that social problems, aggression and opposition were related to social isolation and depression. More isolated adolescents were also more depressive. The findings increase our knowledge of the interplay between externalizing and internalizing problems and can optimize interventions to prevent and treat their comorbidity.

The influence of gender and socio-economic status on adolescents’ externalizing/internalizing problems and depressive symptoms

Studies frequently refer that boys present more externalizing problems and antisocial behaviour than girls. Concerning emotional problems, the differences go in the opposite direction. As regards to family socio-economic status, several studies have pointed out that it can be seen as a protective or a risk factor to the development of internalizing/externalizing problems in childhood and adolescence. Although these aspects had long been studied, the evolution of gender stereotypes and the complexity of family resources justify persisting in the analyses of such role in terms of prediction of maladjustment.

This research wants to analyse the influence of gender and family socio-economic status on adolescents’ behavioural problems, social isolation and depressive symptoms in a large sample, which involves more than one thousand Portuguese adolescents and their parents. A sociodemographic questionnaire and a measure addressing depressive symptoms (CDI) were used. Parents filled in the Portuguese version of CBCL for assessing adolescent’s externalizing and internalizing problems.

Girls, in general, showed less favourable results although boys presented higher values in aggressive behaviour. The adolescents of families with lower socio-economic status had also more maladjustment. These results highlight the need to persist in preventive procedures.

Stress and well-being of adolescent offenders and professionals in Brazilian Educational Centres
M. T. Figueiredo and M. L. Vale-Dias

Literature shows that adolescent offenders and professionals who are in-
volved in socio-educational measures often present several problems in terms of health. However, there are only a few studies addressing this issue and there is no Brazilian research involving both populations in the same investigation.

This research aims to study well-being and stress in a sample of adolescent offenders entered into Educational Centres and also in a sample of adults working in this context, seeking for contributions to health and educational policy.

The study involved 123 boys and girls (14-17 years old) and 139 professionals (26-60 years old), including 84 socio-educational instructors. Subjects represent about 25% of both populations in state of Pará (Brazil). Two sociodemographic questionnaires, self-report measures of Stress and a scale of Subjective Well-being were used.

Results show that subjects in general are under stress. Adolescents are mainly located in phase of exhaustion and physical symptoms, while adults are predominantly in phase of resistance and refer cognitive symptoms. Professionals have better well-being, which is inversely related to stress. The age of participants did not influence well-being of both samples. Girls present less stress and more well-being than boys. Socio-educational instructors present worst results on stress and well-being when compared to other workers. In conclusion, preventive and therapeutic measures are needed for subjects involved in the context of socio-educational measures.

SYMPOSIUM “MEASUREMENT ISSUES IN ADOLESCENT FORENSIC PRACTICE”

Chair: César Lengua

Adolescent forensic practice operates in a heterogeneous mixture of service provisions and this symposium explores the variety of available measures in the assessment and treatment of adolescent offenders in different contexts.

Through four separate presentations the authors explore clinical measurements in criminal court settings; secure welfare settings for children and in inpatient adolescent medium secure hospital settings in the United Kingdom.

The authors argue that standard clinical methodologies in adolescent forensic practice are often faced with insufficient normative data that limits service development given the rare low frequency high cost events they deal with.

Psychological & Psychiatric Assessment of violent extremism in radicalized youth

C. Lengua, and T. Diggle

The threat of terrorist activity affects economic, political, social, educational and health domains. This presentation pays attention to the role adolescent forensic clinical psychology and psychiatry have in the assessment of violence extremism in youth and asks the questions as to whether clinical and forensic services require an alternative approach to standard clinical methodologies.

The goal of this study is to evaluate differences and similarities clinical approaches to adolescent violent extremism in adolescent forensic assessments. Reflect on how to approach the diverse current literature on violent extremism to help this type of clinical assessment.

This is a single case study designed in a case referred by the courts for assessment and probable treatment in a ‘radicalised young person’.

Radicalisation is a social phenomenon.

Most young people with violent extremist ideology have no mental disorder. Young people affected with extremist views need to be seen in the context
of an all system approach with a particular focus on welfare issues, youth justice, education and the maintenance of good mental health.

Management of violence extremism requires a multi-agency response.
Mental disorder is an extremely rare occurrence in violent extremists and requires assessment that takes account of its low base rate.
Adolescent forensic services have a minimal but nevertheless important role in a multi-agency response to adolescent violent extremism.

**Evaluation of a child and adolescent forensic mental health service into secure settings in the North East of England**

**C. Lengua, and P. J. Kennedy**

The development of mental health in-reach services into the adolescent secure state in England has been historically subject to variable and ad hoc commissioning arrangements and current national guidelines on provision say little on how to best achieve effective delivery.

This presentation focuses on outcome measures of effective delivery for mental health in secure units in the North East of England.

The goal of this study is to describe various current models of delivery of mental health provision into the secure estate in England.

Describe the historical development of the model of in-reach mental health delivery used in the secure estate in the North East of England.

Present outcome data used to assess the efficacy of the NE model.

Discuss alternative models of delivery.

A questionnaire adapted from Alard, Brewer, McGorry, and Proffitt (2001) was used with secure unit staff to describe the work of the mental health in reach team.

Patient feedback was obtained to describe user satisfaction.

SPSS for Windows (Version 17.0) was used to analyse all quantitative data.

Multi-disciplinary team working and model of care needs to be an organic process.

The legal status of children within the secure state has significant influence on service delivery.

Alternative outcome measures need to be developed to evaluate improvement in secure settings.

An integrated model of mental health service delivery able to provide both treatment and consultation seems essential in adolescent secure settings.

The combination of clinical psychology, forensic psychology and counseling psychology seems to be an advantageous adjunct to multi-professional mental health working.

Neurodisability, speech and language and substance misuse specialists appear also to be essential adjuncts to generic mental health provision.

New measures need to be developed to assess efficacy in adolescent forensic practice.

**Alnwood resource tool: a measure of service intensity in adolescent inpatient services**

**T. Diggle**

The National Forensic Adolescent Medium Secure Network provides care and treatment for some of the most complex cases in the UK. Individual young people present differential levels of impact upon the resources of the service, yet the service is commissioned by beds rather than the resources of the clinical team. The Alnwood Resource Tool provides a way of indicating when individu-
al wards are running at capacity, rather than using the basic indicator of the number of ‘beds filled’.

Objectives: To devise and pilot a tool to measure the relative level of resource used by individuals and a combined inpatient population:
- A tool that can be used regularly and rapidly
- That captures the strain placed on nursing staff and the wider MDT
- That captures the environmental strain that individuals and groups of service users exert

A multidisciplinary group of highly experienced clinicians from adolescent forensic medium security formed a working party to develop the tool.

The Risk Needs Responsivity (RNR) model was used as a basis to consider the various forms of strain that service users may place upon an inpatient service.

A tool was developed comprising eight indexes within three domains:
- Risk: destruction of property; risk to self and risk to others
- Needs: leaves; environmental; MDT input; observations
- Responsivity: including capacity, level of engagement and motivation

Each factor is scored using a likert-scale. The combined scores are compared against the ‘load-line’; the load-line provides an indication of the resources available.

The tool has been piloted in three medium secure adolescent wards – two mixed gender mental health wards comprising 15 beds and one all male ward for young people who have a learning disability.

Using the service intensity algorithm provides an objective means of decision making when considering new referrals. Individual data can be used to help the system provide targeted resources. The tool works to prevent system burn-out, reducing overall levels of: sickness and staff burn out, risk and agency use on the ward.

The approach is highly transferable and could be used in all inpatient settings.

**Acceptability of restrictive interventions to manage Clinical Risk**

**T. Foster**

The National Forensic Adolescent Medium Secure Network provides care and treatment for some of the most complex cases in the UK and restrictive interventions are very high in its practice. The National Institute of clinical Excellence (NICE) guidelines in England are however insufficient to allow decision making on what would constitute best practice on restrictive interventions particularly given the polarisation of views on prone versus supine restraint and the use of mechanical restraint devices.

This paper summarizes a project that aims to investigate the acceptability of restrictive interventions (manual restraint, pharmacological restraint, mechanical restraint and seclusion) in managing behaviours that present a risk to service users, staff and others in children and adolescent inpatient settings including an adolescent medium secure inpatient hospital unit.

A ‘mixed methods approach’ is being used in this two phased study:

- The first phase of the service evaluation formed 7 focus groups to help generate enough relevant qualitative data to develop items for a questionnaire aimed at measuring acceptability of restrictive interventions as a clinical risk management strategy in inpatient settings. The analysis here has therefore been ‘thematic’.

- The second phase of the evaluation is taking place in February and March 2016 and will aim to administer the questionnaire to the participants and obtain
quantitative data on the acceptability of using restrictive interventions to investigate whether acceptability is context dependant in terms of:

- Restraint type: manual, pharmacological, mechanical and seclusion.
- Participant group: previous users of inpatient services; families/carers; health care professionals working in child and adolescent settings; health care professionals working outside child and adolescent settings and non-clinical staff
- Subjects: male patients aged between 13 – 19yrs; female patients aged between 13 – 19yrs; male patients <13yrs and female patients <13yrs.

The analyses in this phase of the project will use a series of 1 way ANOVAs to analyse the data obtained from the questionnaire. This can only be done if the assumptions for parametric testing have not been violated but if the assumptions have been violated, the non-parametric methods will be used to analyse the data.

The focused groups have now taken place, the questionnaire is now been designed and the results will be available for the conference.

The absence of national guidelines on this area of clinical practice has led to a dialogue with service users to agree on what would constitute best evidence for practice on restrictive interventions.

Service user involvement in the search for evidence base is creating new ways of measuring work in adolescent forensic practice.

**17:00-18:10 – PARALLEL SESSION II**

**SYMPOSIUM “UNDERSTANDING SEX DIFFERENCES IN THE RELATIONSHIP BETWEEN CONDUCT DISORDER AND ALTERATIONS IN BRAIN STRUCTURE AND FUNCTION”**

**Chair: Areti Smaragdi**

The aim of this symposium is to report initial findings from a multi-site European study (FemNAT-CD) investigating the neurobiological basis of sex differences in Conduct Disorder. In the largest study of its kind, we are using magnetic resonance imaging (MRI) techniques to investigate whether males and females with Conduct Disorder show common or distinct alterations in brain structure and function. This symposium will consider a range of approaches that have been used to address this issue, from voxel-based morphometry to diffusion tensor imaging, through to task-based functional MRI experiments. Although the main focus of the symposium will be group comparisons between typically-developing children and adolescents and those with Conduct Disorder, we will also discuss related research taking a dimensional approach to investigate neural markers of callous-unemotional traits and aggression in a large sample of typically-developing adolescents. We believe that this symposium will be highly relevant to researchers using neuroimaging and neuropsychological methods to study antisocial behaviour and callous-unemotional traits, as well as clinicians working with young people in the forensic settings or Child and Adolescent Mental Health Services.

**Sex-dependent brain structure alterations in adolescents with Conduct Disorder**

**A. Smaragdi, A. Wells, K. Gonzalez, I. Puzzo, J. Rogers, R. Clanton, R. Baker, S. Brito, and G. Fairchild**

Despite growing evidence that Conduct Disorder (CD) is associated with abnormalities in brain structure, few studies have investigated whether these differences are consistent across the sexes. Furthermore, previous work has used vox-
el-based morphometry, which quantifies grey matter volume but is limited as it conflates cortical thickness (CT), surface area (SA), and folding (expressed as local gyrification index, GI).

Consequently, the present study quantified these three measures to examine whether CD is associated with similar or distinct changes in cortical structure in males and females.

Our sample comprised 82 adolescents, 42 with CD, and 40 gender-, age-, and puberty-matched healthy controls (HCs). Groups were compared using FreeSurfer.

To replicate previous research with mixed-sex samples, we first conducted a combined-sex analysis: this showed reduced CT in orbitofrontal cortex, and reduced SA and GI in inferior frontal gyrus, posterior cingulate, and precuneus in CD subjects compared with HCs. However, when taking sex into account, we found that only CD males showed reduced CT in this area. In contrast, CD females had reduced CT in superior temporal sulcus. There were further sex-by-diagnosis interactions for SA and GI in precuneus, supramarginal, and superior frontal areas. CD females showed reduced SA and GI compared to HC females, while CD males had increased SA and GI compared to HC males.

These results provide evidence for sex differences in the relationship between CD and brain structure, and highlight the importance of investigating the neurobiological basis of CD in males and females separately.

### Investigation of white-matter microstructure differences in male and female youths with conduct disorder in the FemNAT-CD study

**J. Rogers, K. Gonzalez, R. Baker, R. Clanton, A. Smaragdi, I. Puzzo, G. Fairchild, and S. Brito**

Atypical brain structure has been observed in regions central to emotional processing and regulation in youths with conduct disorder (CD). Diffusion tensor imaging (DTI) measures changes in the microstructure of white matter tracts in the brain, with fractional anisotropy (FA) one indirect measure of quantifying these structural changes. To date, evidence for abnormalities in those indices of white matter integrity in youths with CD have been inconsistent.

The goal of this study is to investigate whether these inconsistencies reflect differences in the data analytic strategy adopted as well as in sample characteristics, notably IQ, sample size, age range, potential sex differences, levels of callous-unemotional (CU) traits and/or a failure to account for known risk factors that may affect the structural integrity of white-matter tracts (e.g., co-morbidity with other disorders).

DTI data collected as part of the FemNAT-CD study (www.femnat-cd.eu) and comprised of male and female youths with CD (N=40) and matched typically developing (TD) youths (N=40) was analysed using tract-based spatial statistics (TBSS) (FMRIB Software Library; FSL). FA maps were generated as indicators of white-matter microstructural integrity changes between youths with CD and TD youths.

Preliminary results suggest higher FA in white matter tracts connecting frontal and temporal regions, including the uncinate fasiculus, for adolescents with CD compared to TD youths.

These results help formulate a better understanding of white matter abnormalities in youths with CD. Potential differences between males and females across the age-range will be explored that may have important implications for our understanding of the neural correlates of CD.
**Functional and structural brain alterations in typically-developing youths with callous-unemotional traits**

N. Raschle, W. Menks, L. Fehlbaum, I. E. Qirinawi, M. Prätzlich, L. Kersten, C. Stadler, and The FemNAT-CD consortium

FemNAT-CD is a European multicenter-study investigating the neurobiology and treatment of female conduct disorder (CD). CD is characterized by severe antisocial behaviour in youths. Callous-unemotional (CU) traits delineate a meaningful CD subtype, predictive of heightened aggression, criminal recidivism, and poor treatment outcome. CU traits are mostly studied in clinical samples displaying additional symptoms, hindering a distinct link of neuronal alterations with either CU traits or a combination of CU traits and CD symptoms.

Investigating the influence of CU traits on brain structure and function in typically developing youths by comparing individuals with high (CU+) and low (CU-) CU traits (according to the Youth Psychopathy Inventory (YPI) and Inventory of Callous-Unemotional Traits (ICU)).

Whole brain structural/functional (face processing) neuroimaging data was collected in 223 youths (no CD/ODD), all extensively characterized (including YPI and ICU). Neuroimaging data was analyzed using the VBM8 (structural) and SPM (functional) toolboxes and standard pre-processing was employed.

CU- scored significantly lower than CU+ on aggression and callousness ($p<0.001$). CU+ displayed significantly increased gray matter volume in left insula and right middle cingulate cortex.

Here we find a neuronal correlate of CU traits in typically developing youths, namely gray matter increases in CU+ in left insula and right middle cingulate; both involved in emotion processing and regulation. By investigating typically developing youths, we were able to identify neural markers of callousness, independent of behavioural comorbidities, as seen in patients. Similar functional alterations in key regions of interest are expected and will be presented.

**Neural underpinning of reinforcement learning in children and adolescents with Conduct Disorder**

J. Sidlauskaite, A. Smaragdi, R. Riccelli, K. Gonzalez, I. Puzzo, and G. Fairchild

Conduct disorder (CD) is a disorder of childhood and adolescence, which is characterised by a pervasive pattern of antisocial and aggressive behaviour. It has been previously suggested that CD is related to deficient reinforcement learning and decision-making processes. Neuroimaging experiments suggest CD-related disturbances in brain regions implicated in reinforcement learning, namely, ventromedial prefrontal/orbitofrontal cortex, anterior cingulate cortex, ventral striatum, insula and amygdala.

The goal of this study is to examine neural responses during anticipation and receipt of monetary rewards and punishments in children and adolescents with CD and healthy controls.

We employed functional magnetic resonance imaging (fMRI) methods and an instrumental reinforcement-learning task in a sample of children and adolescents (aged 9-18 years) with CD and age- and sex-matched healthy controls.

Since data collection and analysis are currently ongoing, the results of the study and their potential theoretical and clinical implications will be presented and discussed at the EFCAP conference. We plan to present fMRI data from 120 participants examining group differences in neural activity in response to cues signalling reward and avoidance, relative to neutral cues. We will also investigate neural responses during receipt of rewarding or punishing monetary outcome relative

---

5th EFCAP Congress, Porto, Portugal, 2016
to neutral outcomes. Our prediction is that children and adolescents with CD will show reduced responses to cues predicting reward and punishment, but possibly enhanced responses to rewarding outcomes relative to healthy controls.

**Sex matters: Preliminary findings on grey matter volume in youths with Conduct Disorder from the FemNAT-CD consortium**


The prevalence of conduct disorder (CD) in females has recently increased and there is evidence of pronounced sex differences in the aetiology and neurobiology of CD. However, the majority of neuroimaging studies on CD have focused on male subjects only, reporting reduced grey matter volume (GMV) in the amygdala, insular, orbitofrontal (OFC), ventrolateral prefrontal (vPFC), and anterior cingulate cortices (ACC).

To investigate the similarities and differences in GMV abnormalities in male and female youths with CD.

Data from 195 youths aged 9-18 years were analysed and participants were divided into CD (n= 78; 22 females) and typically developing (TD) groups (n=117, 64 females). Data were pre-processed using voxel-based morphometry. Regions of interest (ROIs) included the amygdala, insula, OFC, vPFC and ACC.

At the whole-brain level, a main effect of sex was observed bilaterally in the caudate (females>males). In ROIs analyses, a reverse pattern (females<males) was observed in the left anterior insula. There was a main effect of diagnosis in the left vPFC (CD<TD). In ROIs analyses, a reverse pattern (CD>TD) was observed in the right amygdala. Sex by diagnosis interactions were detected in the left inferior OFC and the right posterior OFC/anterior insula (CD males< HC males; CD females > HC females).

These preliminary results are in line with previous findings indicating that GMV abnormalities in the vPFC and the amygdala are implicated in CD. We also extend previous work by showing evidence for sex differences in the association between CD and GMV.

**SYMPOSIUM “YOUTH FORENSIC PSYCHIATRY: THE IMPACT OF CHANGES IN SELF-ESTEEM ON BEHAVIOR”**

**Chair: Ilja L. Bongers**

This symposium deals with the relationship between self-esteem on the one hand and coping, internalizing and externalizing problem behavior on the other hand in youth admitted to youth forensic psychiatry. Best practices of improving self-esteem and two studies on longitudinal relations between these three types of behavior and self-esteem are presented. Based on the presentations of the symposium and case histories in the general discussion the audience is challenged to describe their best practices.

**Increasing implicit self-esteem as a underlying concept in the treatment of youth in a forensic hospital**

M.I. Van den Bogerd

Treatments in youth forensic psychiatry are very often based on risk perceptions and behavioral problems. A recent development is that more attention is being paid to rehabilitation and strength-based perceptions.

This presentation will provide an overview of best practices that have a positive impact on self-esteem of youth in a coercive environment.
The literature on stimulating self-esteem in youngsters and best practice for forensic psychiatry was reviewed. The literature suggests that interventions aimed at improving self-esteem should be directed at its cognitive and social determinants. Specific interventions focussing on aspects of self-esteem are more effective than global interventions. In addition, interventions that are theory driven appear to be more effective than practice based interventions.

Relation between self-esteem and internalizing problems in adolescents within a forensic youth psychiatric hospital
I.L. Bongers, and Ch.Van Nieuwenhuizen
Self-esteem has an important role in psychological and interpersonal functioning. There are two well-known theories that shed light on the longitudinal relations between self-esteem and internalizing problems: the vulnerability theory and the scar theory.

The purpose of the present study was to examine the longitudinal relation between self-esteem and internalizing problems in adolescents with antisocial problems admitted to a youth forensic psychiatric hospital.

Participants were 157 males (15-24 years) admitted to a youth forensic psychiatric hospital. Using a three wave cross lagged model the longitudinal relation between self-esteem (measured with the self-perception profile for adolescents (SPPA; Harter, 1988)) and internalizing problems (measured with the Youth Self Report (YSR; Achenbach & Rescorla, 2001) was investigated.

Self-esteem and internalizing problems showed significant reciprocal relations across waves. The results indicated that high self-esteem is related to lower internalizing problems at later waves and high internalizing problems is related to low self-esteem at later waves.

There are clear relations between self-esteem and internalizing problems, although these are not in line with the theoretical models. The role of other factors in relation to self-esteem and internalizing problems within adolescents in forensic psychiatry has to be further investigated.

Adolescents in secure residential care: The role of active and passive coping on general well-being and self-esteem
C.S. Barendregt, A.M Van der Laan, I.L. Bongers., and Ch.Van Nieuwenhuizen
Coping, general well-being and self-esteem play an important role when adolescents with psychiatric problems face new situations, such as being admitted to a secure care institution. This study aimed to investigate the role of coping on general well-being and self-esteem of youngsters who are admitted to secure residential care. Adolescents between the age of 16 and 18 (N = 172) were followed for 1.5 years. Results showed that the use of active coping strategies was associated with a higher self-esteem. The use of passive coping strategies was associated with a lower self-esteem and a lower perceived general well-being. During treatment of adolescents with psychiatric problems in secure residential care, attention should be paid to enhancing skills, such as coping. This might help adolescents to adapt to new situations, fulfill their needs and consequently enhance their well-being. Enhancing the well-being of adolescents might in the long run decrease the chance of reoffending and/or psychiatric relapse.
ORAL PRESENTATIONS
“INTERVENTIONS FOR YOUNG OFFENDERS: MODELS AND PROGRAMS”

Chair: Cornelia Bessler

**Ethnic minority caregivers’ experience of multisystemic therapy: Mechanisms of engagement and change**
S.Fox, F.Bibi, H.Millar, and A. Holland

Evidence has shown that Multisystemic Therapy (MST) has been particularly effective in the treatment of youth with antisocial behaviour from ethnically diverse backgrounds. Although the process of change within MST has been explored, there is a dearth of research in looking at this for families from ethnic minority backgrounds. This qualitative study aimed to explore ethnic minority caregiver experiences of MST and generate a model of the processes of engagement and change. Semi-structured interviews were conducted with seven caregivers who had completed treatment. A constructivist version of grounded theory was used to analyse the data. Specific cultural theoretical codes that emerged were around the consideration of cultural difference in terms of the engagement process and the therapist acting as cultural broker in the process of change. This research makes novel suggestions relating to the culture specific mechanisms that are thought to underlie the existing MST theory of change.

**Forensic Treatment Program for Juvenile Delinquents**
C. Bessler, M.Aebi, and T. Best

Antisocial behavior encompasses a wide range of aggressive and delinquent conduct violating age-appropriate expectations and norms. If this heterogeneous variety of antisocial behavioral modes persist for at least six months during childhood and/or adolescence most psychiatric classification systems describe them as Conduct Disorder (CD). Because of the frequency and the persistence of the conduct disorders during development, as well as the cost imposed on the community, the question of how to react towards antisocial behavior of children or juveniles is often in the limelight of public debate. Interest is focused on the recognition and diagnosis of the conduct disorder as well as possible treatments.

The Forensic Treatment Program for Juvenile Delinquents (german acronym = ForTiS) is a modular and fully manualized intervention program based on behavioural treatment guidelines and targeted to juveniles and young adults having committed violent and/or property offenses and/or serious traffic violations. The strength of the psychotherapeutic tool is its combination of a strictly offense-oriented approach and of its modular structure that can be easily tailored to the individual needs of the juvenile offender. It can be used in group therapy as well as in single psychotherapy. Preliminary findings from a sample of 50 male juvenile offenders showed that the ForTiS Program is probably effective in reducing criminal offenses in male youth.

The ForTiS Program provides a versatile, easily applicable treatment program for juvenile offenders who have committed violent offenses and property violations. Preliminary results suggest that the ForTiS Program is an effective intervention tool reducing criminal recidivism in male adolescents. The treatment manual has been recently published and is therefore easily accessible to anybody. The treatment manual has been recently published (in German) and is therefore easily accessible to anybody speaking German. The English version is planned to be published soon.
Reintegration of violent young men: the case of Rotterdam
C. H. Paalman, L. Harwig, and Th. A. H. Doreleijers

Young men committing violent crimes are a great burden for society. A new intervention aims to reintegrate these men in the workforce, in order to reduce crime and increase self-sufficiency among these young males who often face problems on multiple domains.

Young males who committed high impact crimes without work or current education but with social benefits (unemployment benefits or disability benefits).

Four days a week, on a quiet location outside the city a small group of men performs physical work in the open air, led by former marines. Here they learn employer skills and have the opportunity to obtain certificates for several low skilled jobs. Breaking rules or no-show is immediately followed-up by house visits from one of the mentors and, if necessary, by shorten their social benefits. The intervention study has three components: 1. Methodology development. 2. Trajectory analyses including life-course (mental) health care use. 3. Outcome of the intervention; at the start, at the end, and 6 months after the intervention information on psychosocial functioning, self-sufficiency, daily activities and delinquency is gathered by means of standardized questionnaires and police registrations.

From the start in May 2015 up until now, about 30 young men have been registered to the program. The program has been further developed in close collaboration with our research team. The first results from the trajectory analyses and the first outcomes of the study will be presented and discussed at the conference.

Implementing Multidimensional Family Therapy targeting delinquent behavior and alcohol abuse among high-risk children and youth aged 12-18 in Estonia
A. Kala, T. Meres, and K. Joost

Multidimensional Family Therapy is a family-based intensive outpatient treatment developed for high-risk, delinquent and drug using adolescents. The intervention methods are guided by research based knowledge about dysfunctional and normal adolescent and family development, targeting ecological factors and processes known to produce and/or maintain adolescent problem behaviours.

The main objective of the study is the process and outcomes of the implementation of Multidimensional Family Therapy in Estonia.

71 adolescents with their families were included in the first phase of the study. The subjects’ age ranged from 12 to 18 and the main criterion for referral was juvenile delinquency, in some cases combined with substance abuse and/or some mental health problem. Five teams of therapists were trained and supervised by the MDFT Academy (Netherlands). The outcomes were compared to control groups receiving other treatments (social programmes) used up to present day.

The preliminary results indicate higher efficiency and client satisfaction compared to the social programs used until present.

With the implementation of MDFT in Estonia the qualitative step of replacing programs of none or unproved efficiency with evidence-based methodology for treating high-risk delinquent youth with evidence based family therapy method has been taken and the preliminary results are encouraging to continue this process in a wider and more systematic way.
SYMPOSIUM “PRACTICE AND OUTCOMES FROM FAMILY-CENTERED CARE IN CLOSED INSTITUTIONS: A MODEL FOR THE DAILY LIVING CLIMATE AND A BRIDGE FOR OUTPATIENT TREATMENT”

Chair: Kee Mos

Traditionally, care in juvenile facilities was too often focused on solely the adolescents. A more family-oriented approach is needed in order to successfully target problem behavior. Therefore, a program for family-centered care has been developed, implemented and evaluated through practice-based research.

Within the Academic Workplace Forensic Care for Youth, JJI staff collaborated through a bottom-up process in developing a program for family-based care. During this symposium we will present this program, the qualitative research part and research about family therapy.

Practice of family-centered care

K. Mos

In this presentation the model, core principles and a summary of family-centered working in JJI’s will be presented. Implementation of family-based care involves training and ongoing coaching for all staff members, like psychologists, group workers and teamleaders. During a 15 minute movie some delinquents, parents and staff members will tell about their experiences with family-based care.

Family-centered care in Juvenile Justice Institutions (JJIs): what do parents want?

I. Simons

The new program of family-centered care for JJIs is implemented in groups for short-term stay. During a pilot phase of the new program of family-centered care, we noticed parents to differ in the frequency of visiting their child and of attending family activities in the JJI. The goal of this study is to learn in which ways parents wish to be involved during their child’s detention, aiming to improve the program of family-centered care.

In a qualitative study, we interviewed 20 caregivers about their needs and expectations of family-centered care.

We will discuss in which ways parents wish to be involved by JJI staff during their child’s detention, show how their wishes relate to their experiences with the JJI, and summarize which factors influence parents’ motivation to be involved.

All the caregivers in our study want to be involved during their child’s detention in a JJI. Parents differ in their way they wish to be involved and they differ in their expectations of JJI staff. Therefore, JJI staff members face the challenge of tailoring family activities and motivational strategies to individual parents.

Family based care for young adults in JJI placed under adolescents criminal law

G. van de Waterbeemd

In this presentation we will explain how in Dutch law it is since 2014 possible to judge young adults according to the so-called ‘adolescents criminal law’. One of the criteria is that the young adult is less mature in mental functioning then may be expected based on his age. In JJI Forensic Center Teylingereind these young adults are placed in one living group. 80% of these young adults still lived at home with one or both parents, before their arrest. We will present the data of the first year with the features of these young adults, placed under adolescent criminal law. Also, we will present how we involve parents in practice and how we stimulate parents to keep and/or take the role of the parent(s).
Research about MDF and CBT
T. van der Pol

One of the goals in family based working during the period the adolescents are detained is to motivate parents and adolescents for treatment. During this presentation we will offer some recent data about evidence based methods: one study is about the long-term effects of MDFT and CBT on official crime records in the Netherlands. Another one is about the self-reported criminality in adolescents with a cannabis use disorder in both the Netherlands and Switzerland. Note: this are not data about incarcerated adolescents!

In the Dutch study we found after the start of treatment significant reductions in registered criminal behaviour in both MDFT and CBT groups. Only trends were found for differential effectiveness in subgroups of participants, favouring MDFT in adolescents with high-severity cannabis use. The results of the combined study from self-reported criminality of the combined Swiss and Dutch group will be presented during this congress.

From meta-analysis, and 2 studies about criminality we can conclude that MDFT and CBT are both good methods. For adolescents with more severe problems MDFT seems to be more effective.

SYMPOSIUM “INVOLUNTARY PSYCHIATRIC TREATMENT OF MINORS IN SELECTED EUROPEAN COUNTRIES”

Chair: Riittakerttu Kaltiala-Heino

Coercion is used in the psychiatric care of both adults and minors both to hospitalize the patient (involuntary referral, involuntary inpatient assessment, involuntary detention) and during the inpatient period both in order to help (treat, cure, alleviate the symptoms) and to control harmful behaviors. While children are admitted with the consent of the parents, in the case of adolescents parental consent cannot automatically be taken as sufficient. In health care, a competent person has the right to make decisions and choices harmful to her/himself. Harm to others may be a crime to be dealt with in judiciary processes. Mental illness may, however, impair the competency of an adult who is primarily assumed to be competent and autonomous. When mental illness resulting in impaired competence exacerbates if untreated, an ethical dilemma may exist as to whether defending the right to personal freedom infringes the patient’s right to medical treatment which s/he is unable to demand because of the illness itself. When a person suffering from a competency lowering mental disorder poses a danger to others, coercion may be justifiable to treat the illness. Minors have by definition lower competence and autonomy than adults, and mental disorders are likely to further impair these. The best interest of a minor is not only to have maximal (immediate) autonomy, but to achieve his/her best possible autonomy. Hospital treatment may be more beneficent for a minor than for an adult when comparing the loss of immediate autonomy at present against greater autonomy in the future. In some European countries, involuntary hospitalization is regulated similarly regarding minors and adults, in others, specific criteria are stipulated for minors. The symposium presents legislation and practice of involuntary psychiatric treatment of minors in Germany, Sweden and Finland. We invite colleagues to discuss legislation and practice in their countries and to join our project of collecting a European database on involuntary treatment of minors.
Legislation and practice of involuntary psychiatric treatment of minors in Finland
R. Kaltiala-Heino
In Finland, the criteria for involuntary commitment and detainment are different for minors and adults. While for adults, the basic criterion is mental illness (psychosis), for minors, a severe mental disorder is a sufficient condition that may allow, if subsequent criteria are fulfilled, commitment to and detainment in psychiatric care. The different criteria for minors were introduced in Mental Health Act in 1991, and since then, involuntary treatment figures of minors started to increase. In 2013, the latest year reported in national statistics, there were 572 adolescents (26%) and 34 children (3%) who had involuntary treatment days in inpatient care. Adolescents had involuntary treatment days as commonly as adults. Seclusion and involuntary i.m. medication were used with adolescents less commonly than with adults, mechanical restraint an physical holding more commonly.

Legislation and practice of involuntary psychiatric treatment of minors in Sweden
M. Bruenger
The Swedish Compulsory Psychiatric Care Act (CPCA) sanctions admission to inpatient psychiatric care and treatment against a person’s will if he or she suffers from a serious mental disturbance and has an absolute need of inpatient psychiatric care due to his or her mental state and general circumstances. The same legal regulations apply to children and adolescents as to adults. In 2012, 279 persons < 18 years (14.4/100,000 inhabitants < 18 years) were admitted according to the CPCA. In assessments of need for care and treatment according to the CPCA, professionals in child and adolescent psychiatry have been found to mainly use arguments about the need to protect the young person and to give necessary treatment, while the risk of harm to others was rarely used. The legal regulations, the extent of compulsory care of minors, and value arguments for such care in Sweden will be elaborated in the presentation.

Involuntary psychiatric treatment of minors in Germany – legislation and practice
L. Kjellin
The involuntary treatment of minors in a psychiatric unit in Germany is regulated by federal law. Parents or individuals having the custody of a child need an approval from court for their decision of placing the child in a closed unit. However, recent jurisdiction has sparked a new discussion on involuntary hospitalization: are differing legal regulations for adults and minors justified? Why should parents seek an approval from court in the case of a locked door of a psychiatric unit but can decide freely in the case of physical restraints applied to their child? How can an efficient complaint management be realized to ensure that the best interest of the child is the main focus in involuntary psychiatric treatment of minors?

Aspects of the current debate will be presented; the possible changes in legislation will be discussed according to their effects on psychiatric practice.
ORAL PRESENTATIONS “MENTAL HEALTH SCREENING IN YOUNG OFFENDERS”

Chair: Elena Dozortseva

Diagnostic performance of the MAYSI-2 in a sample of Swiss youths in welfare and juvenile justice institutions
L. Leenarts, C. Dölizsch, K. Schmeck, J. Fegert, T. Grisso, and M. Schmid

There is growing evidence that it is important to have well-standardized procedures for identifying the mental health needs of youths in welfare and juvenile justice institutions. One of the most widely used tools for mental health screening in the juvenile justice system is the Massachusetts Youth Screening Instrument-second version (MAYSI-2). This presentation will elaborate on a) the relationship between the Massachusetts Youth Screening Instrument-second version (MAYSI-2) and the Schedule for Affective Disorders and Schizophrenia for School-Age Children, Present and Lifetime version (K-SADS-PL) in a sample (N = 446) of Swiss youths in welfare and juvenile justice institutions using a cross-sectional design and b) the diagnostic performance and optimal cut-off scores of the MAYSI-2 in this sample. In both studies gender differences were examined. Additionally, the two studies were the first to address possible differences between language regions (French-, German- and Italian-speaking parts of Switzerland) in the relationship between the MAYSI-2 scales and the K-SADS-PL, and the diagnostic performance and optimal cut-off scores of the MAYSI-2.

MAYSI-2: Construct validity in Russian sample
E. Dozortseva and A.Paliy

The MAYSI-2, a screening instrument for the assessment of mental health needs of youths in conflict with law, was translated into Russian in the framework of the International Forensic Screening and Assessment Network for Adolescents (InForSANA) activity. The inventory has 7 scales: Alcohol / Drug (ADU), Angry-Irritable (AI), Depressed – Anxious (DA), Somatic Complaints (SC), Suicide Ideation (SI), Thought Disturbance (TD), Traumatic Experiences (TE). The adaptation of Russian version of the MAYSI-2 supposed its construct validity study. Correlation of the MAYSI-2 scales with correspondent scales of the developed in Russia inventories “Tendencies to Deviant Behaviour” (TDBI) (Orel A.N., 2004) and “Individual Typological Traits” (ITTI) (Youth form) (Sobchik L.N., 1998). The sample consisted of 71 male juvenile offenders from 14 to 18 years old (16±0,8) in a youth reformatory center.

The MAYSI-2 scales (except for TD) have strong positive correlations with all the scales of the TDBI ("Addictive Behaviour", "Aggression / Violence", "Autoaggression", "Delinquent Behaviour", "Low Emotion Control"). Among the individual typological traits (ITTI) only Introversion correlate positively with the scale DA and Spontaneity has negative correlations with AI and SI of the MAYSI-2. Remarkably there are positive correlations of correction scales

The results support the hypothesis of good construct validity of the MAYSI-2 (Russian Version). Some of the data suggest that subject’s motivation can influence the output and should be taken into account by using MAYSI-2.

Massachusetts Youth Screening Instrument – Version 2 (MAYSI-2): Portuguese convergent validity studies in male juvenile offenders

The prevalence of psychological problems among juvenile offenders em-
phasise the need for mental health screening instruments in the juvenile justice system.

The Massachusetts Youth Screening Instrument (MAYSI-2) subscales provide useful information regarding the presence of mental health problems among juvenile delinquents.

In this research we evaluated the MAYSI-2 convergent validity by examining subscale score correlations with conceptually relevant related variables from other (criterion) measures: Youth Self-Report; Barratt Impulsiveness Scale; Posttraumatic Stress Disorder Checklist – Civilian Version; Youth Psychopathic Traits Inventory. The total sample was 183 adolescents admitted into Portuguese juvenile corrections facilities (Educative Centers).

The results show convergent validity for several MAYSI-2 subscales, namely: Angry-Irritable (AI); Depressed-Anxious (DA); Traumatic Experiences (TE).

Self-report juvenile delinquency and victimization in Portugal: Preliminary data from the third international self-report delinquency study (ISRD-3)
P. Martins, S. Mendes, G. Fernández-Pacheco, and I. Tendais

The International Self-Report Delinquency Study (ISRD) is an ongoing school-based study that aims 1) to assess cross-national similarities, differences and trends in juvenile delinquency and victimization and 2) to test theoretical questions related to delinquency in youth. Portugal is one of the 35 participating countries in ISRD-3 (2012-2015).

The goal of this study is to describe preliminary data on lifetime prevalence of self-reported juvenile delinquency and victimization.

A random stratified sample of 7th-12th-grade students was selected in middle and high schools of three Portuguese cities, performing a total of 5400 students (300 x 6 grades x 3 cities). Lifetime prevalence of offences (e.g., vandalism, stealing from a car or from a person, group fight) and victimization experiences (e.g., robbery, assault, cyber bullying, hate crime) was assessed by a questionnaire administered in the classroom. So far, 1182 students completed the questionnaire and 1178 were rated as valid for analysis. Participating students had 11 to 23 years of age (M = 15.44, SD = 2.35), 55.4% were female and most were born in Portugal (94%).

Self-reported lifetime prevalence of victimization ranged from 5.6% (physical parental discipline) to 31.4% (theft). Approximately half reported having suffered one (22.3%) or more victimization experiences (28.8%). Self-reported lifetime prevalence of offending ranged from 0.5% (vehicle theft) to 52.2% (illegal downloading). More than half reported having committed one (28.9%) or more (34.6%) offences.

These preliminary results suggest that significant changes have occurred since ISRD-2 and, therefore, demonstrate the importance of periodic surveys to inform public policies.

Factor structure of the Spanish version of the Child Problematic Trait Inventory in a population sample of 4- to 13-year old children
B. Molinuevo, L. López-Romero, A. Bonillo, and E. Romero

Psychopathy personality has been traditionally highlighted in the study of serious and persistent forms of antisocial and violent behavior. Literature has shown that psychopathy roots lie in childhood and adolescence. The Child Problematic Traits Inventory (CPTI; Colins et al., 2014) has recently emerged as a new promising instrument for assessing psychopathic personality as a whole in school-aged children.
This study responds to the requirement of new validation studies of the CPTI, and the need of an efficient, reliable and useful measure for assessing psychopathic personality in Spanish population. Specifically, the aims of the study were to test the internal structure, the internal consistency, and the differences according to age and gender of the Spanish teacher-rated version of the CPTI. Ratings on the CPTI were obtained in a sample of 842 Spanish children (48.7% boys) aged 4 to 12 (mean age = 7.54).

Confirmatory Factor Analysis confirmed the three-factor structure of the CPTI (Grandiose-Deceitful: GD; Callous-Unemotional: CU; Impulsive-Need of stimulation: INS), being invariant according to gender and age. The CPTI and its factors showed excellent internal consistencies, in the total group, and in both genders and age groups. Boys exhibited higher scores than girls in the CPTI total score and factors. Differences according to age were found in the GD factor; older children scored higher levels.

The Spanish teacher-rated version of the CPTI has shown good psychometric properties and seems to be an efficient tool for further analyzing the three-factor structure of psychopathic personality in children.

The future of forensic youth care in a changing society
Theo Doreleijers

Lots of details in the forensic care of young people are changing in our part of the world. Juvenile crime is decreasing, maybe as a result of those positive movements. The care of these youngsters is getting better and better, among others by the application of family therapies. And by discontinuity of locking young people up in huge prisons. Instead new initiatives are taken to set up small units within city centers in order to maintain contacts with own families, friends and schools. This presentation will shortly look back to what is going on in the EFCAP-countries and look forwards expressing new chances and hope for the disadvantaged.
Children and young people in residential child care: A therapeutical approach
Jorge del Valle

Residential child care is an intervention for children who have suffered from child abuse and neglect. However, in last years, the trend is to devote this resource for adolescents, and particularly to those who present emotional and behavioral problems. Family foster care is the resource for younger children and adolescents have many difficulties to be placed in families. As a consequence residential care needs to be specialized in treating that kind of adolescents and staff have to adopt a therapeutic role.

SYMPOSIUM “PSYCHOPATHIC TRAITS: MEASUREMENT & MECHANISMS”

Chair: Evelien Platje

Psychopathic traits are a controversial topic, particularly in reference to adolescents and children. In adulthood, psychopathy refers to a severe personality disorder combining affective (e.g., callousness, lack of guilt, lack of empathy), interpersonal (e.g., manipulation, grandiosity), and behavioral traits (e.g., impulsivity, irresponsibility). As psychopathic traits are associated with early-onset, stable and severe forms of antisocial behavior and a high risk for criminal recidivism, an increasing amount of research attempts to better understand its etiology.

As it has been suggested that psychopathic personality might be a developmental disorder rooted in early childhood, and since the development of moral reasoning, empathy and guilt starts in this period, examining psychopathic traits in childhood seems particularly significant. Not surprisingly, there is a growing interest in the identification of psychopathic traits in childhood and adolescence. It is however still a matter of debate how these traits are best assessed in children and adolescents. Although most studies refer to psychopathy in adults as a constellation of co-occurring traits, studies regarding psychopathic traits in children and adolescents tend to focus on the affective dimension of psychopathic personality only (e.g., callous-unemotional (CU)-traits). However, some instruments measuring psychopathic traits in children and adolescents also focus on the constellation of co-occurring traits, implying that also in children and adolescents psychopathic traits are represented by two, three or even four factors.

Therefore, the first aim of this symposium will be to discuss the factor structure of some instruments measuring psychopathic traits in children and adolescents. How can these instruments best be used?

Second, the behavioral and mental health problems associated with psychopathic traits will be addressed.

Moreover, in order to better understand the etiology of psychopathic traits, it is highly important to study the underlying mechanisms of these traits. The current symposium will therefore go further into detail about two possible mechanisms; executive functioning and guilt encoding.
The Youth Psychopathic traits Inventory: A bifactor model, dimensionality, measurement invariance and the relation with mental health problems

W. Zwaanswijk, V. Veen, and P. Vedder

Recently, a bifactor model has been suggested for psychopathy, and specifically for the Youth Psychopathic traits Inventory (YPI).

The current study examines a bifactor model for the YPI. The primary goal was to examine the latent structure of the YPI with a bifactor modelling approach. Furthermore, the study examines the dimensionality, measurement invariance, and external validity of the bifactor model.

In a Dutch community sample of adolescents (N = 2,874), self-report questionnaires such as the YPI, Strengths and Difficulties Questionnaire, State-Trait Anxiety Inventory-trait version and Rosenberg Self-Esteem Scale were administered.

Results show that a bifactor model at subscale-level fits the YPI best and the model appears invariant for gender, age and ethnic background. The general psychopathy factor influences the subscales of the YPI strongly, indicating that the YPI seems to be rather unidimensional than multidimensional. Nevertheless, the dimensions still explain nearly one-third of the variance. When relating the bifactor to outcome variables of mental health problems using structural equation modelling, the dimensions of psychopathy appeared to be related to the mental health problems, over and above the general psychopathy factor.

Findings imply that the bifactor model of the YPI should be used when examining relations with outcome variables. Even though the YPI appears to be mostly unidimensional, the dimension scores may add important information when using structural equation modelling. When using summed scores, it is preferable to use the total scores because of its reliability.

Predicting child behavioral maladjustment from the three-factor model of psychopathic personality

L. López-Romero, and E. Romero

Although psychopathic personality is widely recognized as a good predictor of serious and long-lasting behavioral maladjustment, many concerns regards its conceptualization are still under debate. Callous-unemotional (CU) traits, representing the affective dimension of the construct, have been largely considered the most important dimension for identifying a high-risk group of problematic youths. However, most definitions agree in describing psychopathic personality as a constellation of co-occurring affective (e.g., lack of remorse and empathy), interpersonal (e.g., manipulation), and behavioral (e.g., irresponsibility) traits, with variations in the need of including/excluding problematic behavior as part of construct definition.

The present study aims to examine the role of psychopathic personality, defined as a three-factor construct, in predicting child behavioral maladjustment. Data was collected in a sample of 475 children from Galicia (NW Spain; 50.3% boys), aged 3 to 12 (mean age = 6.76). Two alternative approaches represented by two different instruments, the Child Problematic Traits Inventory (CPTI) and the Antisocial Process Screening Device (APSD), were included.

Results showed that a three-factor representation of psychopathic personality, particularly represented by the CPTI, was the best predictor of child behavioral maladjustment. Therefore, the interaction of the three CPTI subscales (Grandiose-Deceitful, Callous-Unemotional, and Impulsive-Need for Stimulation) were predictive of concurrent conduct problems, reactive and proactive aggres-
sion, hyperactivity and low prosocial behavior, beyond the APSD three-factor representation, and any of the three individual dimensions alone, even the affective one.

These results have relevant implications for construct conceptualization, assessment, and application, and they will be further outlined and discussed.

**How do psychopathic traits manifest in early childhood?**

E. Platje, V. Veen, and H. Swaab

As severe and persistent antisocial behavior is often related to callous-unemotional traits, early detection of CU traits is highly important. Besides, it is argued that the broader concept of psychopathic traits is a better predictor than CU traits. To date, however, it remains largely unknown if it is possible to identify children at risk of developing psychopathic traits, and what behavioral and neuropsychological problems characterize these children.

The goal of this study is to identify subgroups of children on psychopathic traits, describe related behavioral problems and explore executive functioning problems as possible underlying mechanisms.

Latent Class Analysis was used to identify subgroups based on parent-reported psychopathic traits in 237 children with a mean age of 5.91 (SD=1.30). We compared the subgroups on behavioral and executive functioning problems.

LCA revealed two subgroups; a small group (18%) of children showing overall elevated levels of psychopathic traits and a large group of children showing low levels. The elevated group differed from the low group by showing more externalizing, but not internalizing, problems, and showed problems with inhibition, emotional and behavioral regulation, but not on flexibility and working memory.

Considering the size of the elevated group and the severity of psychopathic traits, it is difficult to identify a subgroup displaying high levels of psychopathic traits in young community children. Also, it is not CU traits specifically, on which these children show elevated levels. The elevated group does show behavioral problems and executive functioning largely fitting with psychopathic traits in adolescents and adults.

**Psychopathic traits modulate anterior insula encoding of guilt during everyday moral transgressions**

A. S. Cardoso, C. Sebastian, E. McCrory, L. Foulkes, M. Buon, J. Roiser, and E. Viding

Guilt is a moral emotion believed to play a crucial role in adherence to moral and social norms; but the mechanism by which guilt may influence behavior is still unclear. Psychopathy is a personality disorder characterized by atypical moral behavior, likely rooted in affective and motivational components of moral behavior such as a low guilt, as opposed to an inability to judge the morality of a given situation. Thus, studying how guilt processing during moral scenarios varies with psychopathic traits offers a unique opportunity to understand which specific processes may mediate the link between guilt and moral behavior.

The goal of this study is to test the extent to which psychopathic traits varied with neural processing of guilt elicited by everyday moral transgressions.

32 adult males from the community were scanned while performing a novel fMRI task involving guilt-eliciting everyday moral transgressions.

We found that feelings of guilt elicited by moral transgressions were encoded in the anterior insula, and that the strength of this encoding varied negatively with individual differences in interpersonal psychopathic traits. That is, this modulation was weaker for those with higher levels of these traits. Furthermore, data
from a second sample confirmed that this pattern of findings was specific to guilt, and not linked to moral judgement in general.

Our findings suggest a key role for anterior insula in the generation of feelings of guilt in response to moral transgressions and provide new links between the neurocognitive processes that underlie moral cognition and antisocial behavior.

ORAL PRESENTATIONS “DEVELOPMENTAL DISORDERS AND DELINQUENCY”

Chair: Diana Ribeiro da Silva

Type of delinquency in juveniles with autism spectrum disorders
A. Rutten, M. Kempes, R. Vermeiren, and C. van Nieuwenhuizen

The prevalence of identified autism spectrum disorder (ASD) increases. This is also in boys who are suspected of offending behaviour. Different types of offences committed by juveniles with ASD have been described. In the literature, the prevalence of different categories of delinquency in ASD varies.

The aim of the present study is to investigate whether there are differences between the type of delinquency in juveniles with ASD who are suspected of committing a crime, compared to juveniles with attention deficit hyperactivity disorder (ADHD).

The forensic diagnostic juvenile courts files of 182 male juveniles (age < 18 at time of suspected offending), were systematically scored. The sample consisted of 64 juveniles with ASD, 90 juveniles with ADHD, and 28 juveniles with ASD and ADHD.

The rate of sexual offences was significantly higher in suspected juveniles with ASD than in juveniles with ADHD. The rate of property offences without violence was significantly higher in suspected juveniles with ADHD than in juveniles with ASD.

In juveniles diagnosed with ASD, who are suspected of offending behaviour, compared to juveniles with ADHD some categories of delinquency seem to dominate. In treating and counseling people with ASD attention for the increased risk of certain types of delinquency should be considered. Future research should be done to demonstrate whether there is also a tendency to diagnose differently in juveniles with different categories of delinquency, for example of ASD.

The psychological evaluation of the juvenile delinquents affected by mild intellectual disability in judicial context in the French-speaking part of Switzerland
F. Carvajal Sánchez and Y. Gouba

The definition of intellectual disability normally falls under three categories: a cognitive deficit, an insufficient adaptive behavior, both before 18 years old. The psychological-judicial evaluation is the means of detecting adolescents with a mild intellectual disability (MID) who have broken the laws. In some countries, there is a lack of judicial personal with the knowledge of MID, so some cases would not be discovered during criminal procedures. Therefore, with regard to the general population, there would be more young people with this diagnosis in prison. However, from a cognitive point of view, several similarities exist between young people with MID and young delinquents: deficiencies in abstract thinking, attention deficits, school failure.

The previous reports are the beginning of an exploratory research, inspired by a comprehensive method, realized in French-speaking part of Switzerland. In order to investigate the representations and the practices within the judicial system, four psychologists appointed by the justice system to lead these evaluations...
were interviewed within the framework of semi directive interviews.

The results shows the representations around the dangerousness of these young people as well as their penal responsibility and differences of how they are treated compared with the other delinquents. It would seem that for the experts, a learning deficit does not imply a systematically decreased penal responsibility. These experts tried to apply different judicial measures which take into account the disability of the person.

In conclusion, the type of research and the sample used do not allow to generalize the results to all the practices of the Swiss judicial system. These results offer however paths for future research and give interesting information about the misunderstanding and the over-representation of the young with MID among the prison population.

**Foetal Alcohol Spectrum Disorder (FASD), its relevance to forensic adolescent services**

**E. Gralton**

There needs to be an increased recognition of Foetal Alcohol Spectrum Disorder (FASD) in services that deal with young people with disruptive and offending behaviour, not just those services that deal with adolescents with a recognised intellectual disability

This is a review of the current available evidence on FASD and how it is likely to predispose affected young people to have contact with secure mental health services and the Criminal Justice system.

FASD is likely to have become a more common cause of intellectual disability and behavioural disturbance but the history of significant alcohol exposure in utero if often missed. There is evidence that the hyperactivity is less responsive to psychotropic medication and may represent a different condition to conventional ADHD. However the majority of those affected do not have a formal intellectual disability, and are in the low normal IQ range.

There is so far very limited research in what is likely to be a relatively common disorder with significant costs to criminal justice, mental healthcare and social services. Epidemiological information from the UK is lacking and urgently needed.

Professional who work with mentally disordered young people need to be more aware of FASD and its potential contribution to the problems and disabilities in their population.

Social workers, foster carers and adoptive parents need to be more aware of FASD and how it can contribute to the breakdown of social care.

**Presser – the forgotten story**

**J. Kasinathan, J. Le, A. Barker, and G. Sharp**

The Presser case (1) is probably the most seminal case regarding fitness to plead and fitness to be tried for accused persons in Australia and New Zealand. However, it is not widely known that the accused in the Presser case was a 14-year-old boy with probable intellectual disability.

Objectives: To describe a clearer narrative of the case of Edward John Presser.

Methods: A review of relevant, attainable documents including case law and newspaper reports.

The narrative of Edward John Presser will be described in greater detail than is generally widely known by forensic clinicians. Ramifications for the fitness assessment of adolescents will be discussed, including the implications of *doli incapax*.
The Presser criteria are generally widely applied to adult accused persons regarding fitness to plead. However the original case involved a 14-year-old boy with intellectual disability. A greater narrative understanding of Edward John Presser’s history, assists clinicians providing expert evidence regarding fitness to plead for adolescents and adults alike.

**ORAL PRESENTATIONS**

**“AGGRESSIVE BEHAVIOR AND MENTAL HEALTH PROBLEMS I”**

**Chair: Cyril Boonmann**

**Violent and homicidal ideations: Their assessment and relation to mental health and violence in youth**

A. Murray, M. Eisner, D. Ribeaud, and I. Obsuth

Violent and homicidal ideations are often associated with violence risk in the minds of practitioners; however, little is known about their causes, relations to mental health symptoms, and role in violent behaviour. Central to answering these questions is a psychometrically robust measure of violent ideations.

We aimed to develop and validate a ‘Violent Ideations Scale’ for the assessment of violent ideations in youth and to use the scale to provide some preliminary answers to the above-outlined questions.

We evaluated the psychometric performance of the VIS in the 6th and 7th wave of the Zurich project on social development (z-proso) when participants were approximately 15 and 17 years of age respectively. We then used the newly-developed scale to examine associations between violent ideations, aggressive behaviour and mental health.

The VIS showed unidimensionality, minor measurement differences across males and females and convergent validity. Its pattern of correlations with criminal violence and mental health suggested the relevance of violent thoughts for illuminating these domains.

Conclusions: The VIS can provide a useful research tool and as a possible source of information regarding violence and mental health in clinical and forensic settings.

**The experience of using different types of personality assessment to enhance the formulation of adolescent sexually harmful behaviour (SHB) in the Adolescent Resource and Therapy Service (ARTs) - a community based forensic child and adolescent mental health service (fCAMHS) in South London, England**

P. Collins and R. Chandy

Our fCAMHS service has begun to routinely assess personality structure to augment the standard assessment and intervention package, known as Assessment, Intervention and Moving On (AIM) for young people who display sexually harmful behaviour.

Our goal is to present our teams clinical experience of using the Millon Adolescent Clinical Inventory (MACI), the Millon Adolescent Personality Inventory (MAPI) and the Minnesota Multiphasic Personality Inventory- Adolescent (MMPI-A) as an adjunct to AIM assessment and treatment to help deepen our clinical understanding of, and multi-agency planning around SHB in an fCAMHS setting.

Case studies will be presented where different types of personality assessment have been employed, alongside standard SHB assessment and treatment tools, allowing us to compare and contrast the clinical utility of the measures in this specialised population.
We will present standard formulation using AIM model followed by enhanced formulation which includes results from personality assessment. We will comment on the impact of using enhanced SHB assessment on multiagency planning around these young people.

This symposium seeks to highlight the potential added value of routinely assessing adolescent personality as part of SHB assessment and treatment.

**Sexual aggressive behavior of adolescents in institutional care – Data from the German sample SGInst**

M. Allroggen, T. Rau, and M. Kölch

Children and adolescents in institutional care often have a history of sexual abuse and neglect, possible risk factors for sexual aggressive behavior. However, so far no study in Germany has examined the prevalence of sexual aggressive behavior in adolescents who live in boarding schools or residential care. Methods: In a sample of 322 adolescents (mean age 16.69 years) from 20 youth welfare institutions and 12 boarding schools in Germany sexual aggressive behavior and victimization were assessed using a self-report questionnaire, behavioral problems and personality traits with different self-report instruments (e.g. MAYSI-2, YSR, BFI-K). Results: 7.4% of the boys and 0.8% of the girls reported severe sexual aggressive behavior (e.g. rape) in the past, 23.5% of the adolescents of at least one sexual aggressive act (harassment, hands-off offences, hands-on offences). Peer-offending was much more common than child-offending. Sexual aggressive behavior was associated with sexual victimization, drug and alcohol use, and aggressive behavior in general. Victim-perpetrators show less behavioral problems than victims who do not show sexual aggressive behavior. Discussion: The results show high rate of sexual aggressive behavior in adolescents in institutional care and a strong connection with other behavioral problems. Implications for the treatment and care of these adolescents are discussed.

**Investigating limbic white-matter microstructure in adolescents with Conduct Disorder and typically developing control subjects**

K. Gonzalez, J. Rogers, A. Smaragdi, R. Riccelli, I. Puzzo, R. Clanton, R. Baker, S. De Brito, and G. Fairchild

Antisocial behaviour in adolescents has been associated with structural and functional abnormalities in the limbic system. Recent work has suggested that the anatomical connections between limbic and prefrontal cortex regions are altered in conduct disorder (CD), although findings have been inconsistent and the role of limbic white-matter abnormalities remains poorly understood. The uncinate fasciculus (UF) is a white-matter tract connecting limbic and prefrontal cortical structures. Previous studies have revealed abnormalities of the UF in CD. However, to date, no studies have investigated other major limbic white-matter tracts, such as the cingulum and the fornix.

The goal of this study is to examine whether adolescents with CD exhibit differences in the integrity of limbic white-matter tracts compared to healthy controls.

We collected diffusion Magnetic Resonance Imaging (d-MRI) in 55 adolescents with CD and age- and sex-matched healthy controls (all aged 12-18 years). Data were processed for deterministic spherical deconvolution tractography using StarTrack. Four diffusion measures, Fractional Anisotropy, Mean Diffusivity, Perpendicular Diffusivity and Axial Diffusivity, were estimated and exported to TrackVis. Virtual in-vivo dissections of the UF, cingulum, and fornix were performed. A non-limbic control tract (the inferior frontal occipital fasciculus) was
also studied to examine whether differences were specifically related to limbic tracts.

The tractography analysis is currently on-going, therefore the results and their potential implications will be presented and discussed at the EFCAP conference. We predict that adolescents with CD will show white-matter abnormalities in the UF relative to healthy controls. We also predict group differences in the cingulum and fornix tracts.

SYMPOSIUM “BREAKING THE WALLS”: MENTAL HEALTH AND JUVENILE JUSTICE IN PORTUGAL

Chair: Conceição Condeço
Young people who fall between the Justice System and Mental Health Services are a particularly vulnerable group and interventions are difficult to carry out. Mental health problems can interfere with the rehabilitation of youth who come in contact with the Juvenile Justice System and increase their risk of recidivism. Despite high rates of prevalence for mental disorder, adolescents with problems with the Justice System often do not access the mental health services they need. The Directorate General of Rehabilitation and Prison Service with the collaboration of the Psychology Faculty (University of Coimbra) developed Project PAIPA (Psychotherapeutic Evaluation and Intervention in Juvenile Justice) co-funded by the European Union under the Criminal Justice Program. In this symposium we will present the studies and intervention that were developed as well as a proposal for a therapeutic unit for young offenders placed in juvenile facilities and youth receiving community-based programs:

Psychotherapeutic intervention model with young offenders
A. Lavado and A. Vieira
Young offenders with severe behavioral problems within the juvenile Justice System are a particularly vulnerable group from a mental health point of view. The Juvenile System often does not identify the need for mental health intervention and Mental Health Services have difficulty providing appropriate intervention for youth offenders.

Taking into account prevalence rates for mental disorders among young offenders, it was possible to design and carry out an innovative psychotherapeutic intervention with this population. This intervention is mainly based on Paul Gilbert’s Compassion Focused Therapy, with the following main objectives: 1. To promote a pro-social mentality and behavior; 2. To promote emotional and behaviour self-regulation as well as relational adjustment; 3. To promote a compassionate mind.

Giving meaning to the bricks: the co-construction of change with juvenile offenders’ families
D. Santos
The Risk Reduction Integrated Program (RRIP) aims to reduce family risk factors by intervening at the level of the biopsychosocial integration (general health, mental health, substance abuse, education, work, housing and mobility, legal aspects, violence, ethnic/social dissonance, poverty, social net, social security/disability, parenting), that recursively influence the lives of offenders’ families (Pakman, 2007). The RRIP aims to create a family change project with parents, stressing the following goals: validate each one of the areas in difficulty; keep at-
attention focused on these difficulties; understand that the problems found are interrelated and that new complications may arise in each area; activate clients’ skills and involve them creatively in the process of change; avoid the burnout of the professionals. The RRIP takes into account personal resources, relevant social and relational issues in the risk reduction process.

Proposal for a therapeutic unit – bringing mental health care into the juvenile justice
M. Macedo
The mental health problems identified in this population and the difficulty in meeting the specific needs of these young people, urges the search for new solutions for psychotherapeutic intervention. In most cases, disorders are not identified or treated properly due to the difficulties experienced on a daily basis in finding an answer within the National Health System that meets the needs of these young. The therapeutic unit proposed aims to fulfill the needs of high-risk young people who are in custodial programs and have serious and persistent mental health problems and high-risk young people with symptoms of mental health disorders who are in community based-programs as well as creating a family change project with parents of youths in custodial and community based-programs.

SYMPOSIUM “THE USE OF ROUTINE OUTCOME MONITORING (ROM) FOR TREATMENT, RESEARCH AND POLICY IN COMPLEX RESIDENTIAL SAMPLES”

Chairs: Karin Nijhof and Lieke van Domburgh

Serious juvenile offenders: subgroups of offenders and differences in treatment needs
S. Hillege, E. Brand, E. Mulder, R. Vermeiren, and L. van Domburgh
Adolescents in Juvenile Justice Institutions (JJI) display a variety of problems. Besides psychosocial and psychiatric problems, difficulties with peers and family are present. During treatment planning clinicians need to consider, prioritize, and integrate these offender characteristics, combining experience and scientific knowledge. To support clinicians during treatment planning, subgroups of offenders are detected based on risk and protective factors. Hierarchical and iterative cluster-analyses are performed on a data set of 2011 adolescents that stayed in a JJI in the Netherlands, based on the Forensic Profile List for Youth. Recidivism files are used to find distinguishing characteristics for reoffending. Cluster-analyses resulted in seven distinct subgroups of offenders, each with its own identifying characteristics, which were: antisocial behavior in the institution, lack of empathy and conscience, family problems, substance abuse problems, sexual problems, sexual, cognitive and social problems and a rest group with mild problems on all factors. Results of the recidivism study will be presented in May. These seven subgroups with identifying characteristics for reoffending support clinicians to face their daily challenges.

Routine Outcome Monitoring in juvenile justice institutions: successes and pitfalls
E. Mulder, and N. Hornby
Adolescents in Juvenile Justice Institutions (JJI) display problems in all life areas. Although screening and assessment are used to assess risk and decide on treatment, little is known about the development of (the problem behavior of) youth. Recently, ROM has been developed and implemented in JJIs to solve
this problem. ROM has several goals: to evaluate treatment, to learn about your treatment population, to support research and to report about treatment effect. Explorative analyses are used to study the first ROM data. Also, the implementation process will be described. Implementation of ROM started in March 2013 in two institutions. Both pitfalls and successes will be discussed. In 2015 another five institutions joined in. A total of 651 youth were included in ROM of which 136 completed a second ROM-assessment after three months. Explorative results will be presented. To successfully implement ROM, its usability in clinical practice is very important. When interpreting ROM results, the specific characteristics of the population should always be taken into account.

Applicability of data from nationwide monitors for policy making and scientific research
K. Nijhof, L. van Domburgh, E. Strijbosch, A. Labun, M. Delsing, R. Scholte, and I. Vermaes

The National Monitor for Secure Residential Youth Care is used for ROM on the individual level and to benchmark outcomes and generate practice-based evidence for research and policy on the aggregated level. This study examines the external validity of this nationwide dataset, considering the fact that clients can refuse permission to the extraction of their clinical information to aggregate datasets. Data of 949 youths were included. An individual variables and a person oriented approach were applied to examine the extent to which the group giving permission (66%) is representative for the total population in secure residential care. Youths who assented were overrepresented amongst the population of some of the participating institutions, and were more often Caucasian. Three start profiles were distinguished, which will be presented. Youths who assent were overrepresented in the most problematic profile whereas youth who did not assent were overrepresented in the least problematic profile. This study provides initial insights into the external validity of a nationwide dataset, which are valuable for other similar nationwide datasets.

In Congress Workshop "Introduction to the SAPROF-Youth Version: Assessment of protective factors for violence risk in juveniles"
M. Vries Robbé, and A. Kleeven

In this workshop we will focus on protective factors for violence risk in juveniles. The Structured Assessment of Protective Factors for violence risk – Youth Version (SAPROF-YV; De Vries Robbé et al., 2014) is an assessment tool for the evaluation of protective factors in juveniles. It is a structured professional judgment checklist designed to be used in combination with predominantly risk-focused youth assessment tools, such as the SAVRY (Borum et al., 2006). The SAPROF-YV was developed following the international success of the original SAPROF (De Vogel et al., 2009), a tool for the structured assessment of protective factors in adults. Through offering a specific in depth assessment of protective factors for juveniles, in addition to risk factors already assessed in other tools, the SAPROF-YV aims to complement the youth risk assessment process in order to create a more balanced assessment of future violence risk. The dynamic factors of the SAPROF-YV can be helpful in case formulation, establishing positive treatment goals, evaluating treatment progress and stimulating well informed risk communication. In doing so, protective factors enable a more positive approach to violence prevention. This workshop will focus on the value of protective factors for juveniles in treatment practice. Participants will be introduced to the SAPROF-YV and will be trained in using the SAPROF-YV in combination with risk-focused tools.
such as the SAVRY, by means of a case study example. Implications for risk assessment and risk management will be discussed and research results and plans with the SAPROF-YV will be presented.

11:30-12:45 – PARALLEL SESSION III

Callous-unemotional traits and pathways to persistent conduct problems
Essi Viding

Conduct problems (i.e. antisocial behaviour in children) are a substantial societal concern and a considerable amount of resources are targeted into their prevention and treatment. However, the success of the prevention and treatment efforts is, at best, moderate. Decades of developmental psychopathology research highlight that we should be mindful of the phenomenon of ‘equifinality’; namely that individuals may present with similar behaviours for a number of different underlying reasons. In this talk I will review studies that have employed a variety of methodologies and focused on understanding heterogeneity among children with conduct problems.

11:30-12:45 – PARALLEL SESSION IV

SYMPOSIUM
“PSYCHOTRAUMATIC ASPECTS OF THE YOUTH WELFARE SYSTEM”

Chairs: Marc Schmid and Klaus Schmeck

Over 70% of adolescents living in residential care settings have experienced at least one traumatic event, and 50% have experienced more than two. The ramifications of such traumatisations are manifold, and it is essential to consider them in pedagogic support and treatment plans. Traumatic experiences have an effect on many levels. On the one hand, they influence the transference and counter-transference of social workers and their risk for secondary traumatic stress. On the other hand, they affect adolescent behaviour and their capacity for self-governance. Such cases should be addressed with trauma-sensitive concepts while also being appropriately heeded in psychotherapy.

Interpersonal trauma in youths in compulsory residential care:
Assessment and treatment

Numerous studies have demonstrated that youths maltreated in childhood have a higher prevalence of engaging in antisocial and delinquent behavior than youths not exposed to maltreatment. The pathway between childhood maltreatment and antisocial or delinquent behavior has also been found to differ across gender. Girls with histories of childhood maltreatment are less likely to engage in delinquency compared to their male counterparts. However, the steady increase of offending rates by girls cannot be overlooked. This presentation elaborates on the relationship between childhood maltreatment and antisocial and delinquent behavior, the assessment, and treatment of youths in the juvenile justice system.
Multisystemic therapy for Child Abuse and Neglect (MST-CAN) as a possible intervention for parents and children with trauma experience
S.Hefti, T. Pérez, U. Fürstenau, B. Rhiner, and M.Schmid

MST-CAN is an evidence-based program designed to treat children and their families who have come to the attention of Child Protective Services. It is an adaptation of MST to cases with younger children and parents who suffer from severe mental disorders, struggling with their fundamental parenting behavior and the daily care for their children. MST-CAN also focuses on trauma interventions and is an effective method to treat families in which either parents and/or children show signs of traumatization. Here we report our experiences with this program in Switzerland.

What protects child welfare staff from burnout and secondary traumatic stress?
C. Steinlin, C. Dölitsch, S. Fischer, K. Schmeck, J.M. Fegert, and M.Schmid

Working in child welfare institutions bares a variety of health threats. Staff frequently experiences aggression and violations of their personal boundaries. The difficult nature of the work and the high demands may lead to symptoms of burnout and traumatic stress. This study assessed symptoms of burnout, post-traumatic stress disorder and secondary traumatic stress among child welfare professionals in Switzerland and evaluated whether factors such as self-care, expectancy of self-efficacy and sense of coherence have a protective effect. Results and their implications for managing staff of child and adolescent welfare institutions are discussed.

Psychophysiological correlates of personal boundary violations experienced by professional caregivers
N. Kind, C. Dölitzsch, S. Fischer, and M.Schmid

Personal boundary violations are often considered an occupational hazard for professional caregivers, and recurrent exposure to such interactions can be burdensome. Chronic stress is associated with alterations of hypothalamus-pituitary-adrenal (HPA) axis functioning, but despite the high prevalence of personal boundary violations in the youth welfare system, research on psychophysiological correlates is still lacking. HPA axis functioning was investigated in relation to type and frequency of personal boundary violations in Swiss professional caregivers. Concentrations of cortisol and dehydroepiandrosterone were analysed in hair samples. Results highlight the importance of establishing child welfare and juvenile justice institutions as a 'safe place' not only for children and adolescents, but for their caregivers as well.

ORAL PRESENTATIONS “MENTAL HEALTH SERVICES FOR CHILDREN AND ADOLESCENTS: ORGANIZATIONAL AND INTERVENTION MODELS”

Chair: Belinda Plattner

Polyvictimisation, mental health outcomes and service use
K. Mueller-Johnson, I. Obsuth and M. Eisner

While research has demonstrated a link between polyvictimisation and mental health problems, little is known about polyvictimisation and service use. This study examines in a normative sample of Swiss youth the link between polyvictimisation and poor mental health and describes the prevalence of accessing professional support by victimisation status.
The study uses data from four waves (ages 11 to 17) of the Zurich Project on the Social Development of Children, a large (N = 1639) prospective longitudinal study of a culturally mixed sample.

Polyvictimisation by peers (assaults, robbery, sexual victimisation and bullying) was related to higher Anxiety and Depression at ages 11, 13, 15; ODD and ADHD only at ages 13 and 15; and aggression at age 15.

Repeated victimisation by parents through corporal punishment was related to ADHD consistently at ages 11-15; to Aggression at ages 13 and 15; and to Anxiety and Depression at age 15.

The more types of victimisation a young person had experienced over time, the more likely they were to have been in contact with professional support services.

However in most cases the reason for referral was not the victimization itself, but family problems, violence perpetration or ADHD.

Although in this study victims of polyvictimisation had a high rate of mental health problems and the highest uptake of professional support services, they presented to support services for other problems than the victimisation. It is important to bear this in mind, so that their victimisation experiences do not get overlooked.

Current situation of cooperation between Mental health Services and Police in Shiga Prefecture, Japan
T. Inagaki, T. Nakabayashi, and T. Tanaka

Various mental disorders have been recognised as causes of anti-social behaviour in the juvenile population. Despite general awareness regarding cooperation between police and mental health services (MHS), no effective system has been established in Japan.

The goal of this presentation is to contribute to appropriate development and improvement of delinquent juveniles, Shiga Prefectural Police and Shiga University of Medical Science entered into an agreement in 2014. We conducted a longitudinal, cohort follow-up study to examine influence of mental disorders on delinquent juveniles.

We used ongoing anonymized data of arrested juveniles (14–19 years), aggregated between November 2014 and April 2015 in our police department. Two hundred and nine subjects registered. None were arrested for murder during the study period; however, two were arrested for sexual offenses and 135 for theft.

Five subjects had experienced illegal drug abuse, six were gang members and 138 committed the crimes alone. Only four were child abuse survivors.

1: Serious crimes and illegal drug abuse were less in the juvenile population of Shiga compared with that of Tokyo and some parts of Western countries.

2: Information from police suggests occasional suspicion in terms of reliability. Therefore, a system must be developed to acquire appropriate data and incorporate our clinical data to indicate the need for cooperation between MHS and the police.

“I don’t want to live like that!” Delinquent boys seeking help themselves – A voluntary forensic outpatient treatment
B. Plattner, E. Marte, and L. Thun Hohenstein

In 2013, we from the University Clinic of Child and Adolescent Psychiatry from the Paracelsus Medical University in Salzburg offered to start a forensic outpatient clinic with focus on treatment of juveniles with criminal behavior. We were
planning to offer treatment based on court order, to starting with consultations already during incarceration, to use standardized diagnostic instruments and highly sophisticated treatment Manuals like FORTIS (Best, Aebi, Bessler, 2016). The concept was presented to the minister of justice, the children and youth advocacy, the supporting association for probation officers and in the media. Unfortunately our offer was never really adopted by the authorities – random prison consultations and one treatment order by court was the sobering outcome. Interestingly though the persons concerned most, namely adolescents with criminal behavior problems started seeking help themselves and coming to our clinic without court order and on an voluntary basis. In our talk we want to present the experiences of the last three years, we will report on chases we managed and attitudes of the boys towards treatment. Finally we want to discuss our responsibility as forensic child and adolescent psychiatrists to offer our expertise to those in need and how we could cope with political indifference towards our field in many European countries.

**Building a cross-sectoral network organization for adolescent girls with a combination of psychiatric problems and a problematic family situation**

*R. Steens and J. Manssens*

Two years ago we started a pilot project for girls between 14 and 20 years old with a combination of psychiatric problems and a problematic family situation, situated in Antwerp (Belgium). The combination of individual vulnerabilities (e.g., mental disorders, trauma histories, conduct problems, ...) and social/environmental characteristics (e.g., family conflict, poverty, housing problems, ..) causes these young girls to travel across different care sectors and build complex personal histories of fragmentized and often prematurely dropped-out trajectories in youth care, mental health, juvenile court, education, ... . In order to provide solid, qualitative care for this high-risk group we started a long-term cross-sectoral partnership between an organization for child welfare (“Youth Care Emmaüs”) and a facility for child psychiatry; the university centre for child and adolescent psychiatry (“UKJA”). More specifically we formed a cross-sectoral network organization, defined as “an explicit partnership that is characterized by relatively stable relationships between autonomous organizations, with added value for the joint customer base resulting from the use of each other’s core competencies and specific positions” (De Wulf & Daelemans, 2005, pp. 18). During the oral presentation we use a specific case to (i) illustrate the everyday collaboration between the organization for youth care and centre for child and adolescent psychiatry, (ii) critically reflect upon the opportunities, challenges and risks in building, facilitating and sustaining this cross-sectoral network organization.

**The Child Protection Services histories of multiproblem young adults**

*L. van Duin, F. Bevaart, M. Luijks, J. Zijlmans, R. Marhe, A. Popma, and T.A.H. Doreleijers*

In Rotterdam the Academic Workplace at De Nieuwe Kans (translated as: New Opportunities) is conducting a large-scale research project in young adults between 18 and 27 years with multiple problems such as unemployment, psychiatric problems, delinquency, drug addiction and financial problems. As it is unknown how this population is characterized and what interventions are feasible, our study explores care trajectories, criminal and school careers based on Child Protection Service register data.

We aim to investigate histories of the 65% multiproblem young adults who have a Child Protection Service record. Moreover, we will explore to what extent
professional assistance has been provided and/or justice measures have been taken in these histories. Had these

Between January 2014 and August 2016, 700 multiproblem young adults are recruited in the study. We now know already that two out of three youngsters have been seen by the Child Protection Services. We will explore profiles based on the trajectories, for example by means of latent class analysis or cluster analysis.

The descriptives of the sample and preliminary results of the analyses will be presented at EFCAP 2016. We hypothesize that despite of having been part of several care and justice systems, they hold a vulnerable position during adolescence and young adulthood.

**ORAL PRESENTATIONS “YOUTH CARE AND TREATMENT ISSUES”**

**Chair: Wolfgang Weissbeck**

**Relating therapist characteristics to client engagement and the therapeutic alliance in an adolescent custodial substance misuse treatment programme**

R. Daniels and E. Holdsworth

Adolescents’ engagement in substance misuse treatment programmes is directly associated with positive treatment outcomes but research has demonstrated that engagement requires the development of a working alliance. The nature of this client group means there are often difficulties developing an alliance with adolescents in substance misuse treatment. While there is evidence that the alliance and thereby engagement are challenging to develop, yet important to adolescents’ outcomes, little research has been focused on the factors that influence the development of a working alliance and adolescents’ engagement.

This study examined the influence of therapists’ stress and empathy levels on client engagement, and the therapeutic alliance, in a substance misuse treatment programme.

The sample included 84 adolescent clients and 14 therapists from a Secure Training Centre in England. Client engagement in the treatment programme was observed, while self-reporting measures assessed the therapeutic alliance (both client and therapist-rated), and therapist stress and empathy levels.

Multiple regression analysis revealed that therapists’ stress levels negatively influenced the therapeutic alliance and had a curvilinear relationship with client engagement, indicating that stress is not an exclusively negative characteristic on engagement.

Although stress was found to negatively impact both cognitive and affective empathy, neither cognitive nor affective empathy were significantly related to client engagement or the therapeutic alliance.

**Intensified care and supervision in Croatia: Perspective of juvenile offenders and measure leaders**

A. Miroslavjевич, I. Boric, N. Ricijas, and M. Rihotaric

ICS is one of eight educational measures defined by Juvenile Courts Act in Croatia. It is community sanction and a form of juvenile probation. It stands for around 40% of all pronounced juvenile sanctions for criminal offences in Croatia.

The main goal of this paper is to describe and compare perception and experience of ICS from the perspectives of juveniles and their measure leaders. In order to do that we’d conducted six focus groups with measure leaders and four focus groups with juveniles in four biggest cities in Croatia. Data was analysed using thematic analysis (Braun and Clarke, 2013).
Results show that the perception of ICS is positive for both groups of participants and that they perceive it as oriented toward helping, counselling but also control and surveillance. As the most important element, participants mention the relationship between young person and measure leader. Despite this coherence in these two perspectives, there are also some differences evident. Namely, some young people perceive it as carrying a stigma or as something uncomfortable and hard. Certain number of juveniles thinks that it should be more structured, with clearer guidelines and with more intensive frequency of meetings.

**Effect of high security need psychiatric adolescent patients on a medium security care unit**

G. Sofi

The number of juvenile delinquents with mental health problems is increasing in Hungary. A better insight in the impact of background is likely to help improving the psychiatric method. Therefore, this study aimed to examine mental health problems and criminal behavior in adolescence psychiatric patients with criminal history.

There were 27 youngsters who admitted to the MSCU of the hospital by the police because of criminal history in 2014, while this number has emerged by nearly 50% during 2015.

However, it is important to know the effects of presence of them on the other patients, family members and the staff.

A retrospective case study is conducted recently on all cases of the only one MSU child- and adolescent psychiatry ward of Hungary. Detailed information was extracted from the records, including criminal (police) records of the sample in the anamnesis, the development of psychiatric history, length of stay at the ward, medical findings, therapy and critical incidents (CI). CI have been stated as acts of self-harm, physical and/or sexual assault, arson or escape.

A yearly 500-550 patient arrived to our 15 beds MSU child- and adolescent psychiatry ward in a year. 27 of them in 2014 and 39 in 2015 arrived with the help of police. 55,6% (2014) and 43,6% (2015) of these patients were boys with the main age 14,67 years (2014) and 13,74 (2015). Aggressive behavior, substance abuse disorder and self-harm were the main reasons of the hospitalization while self-harm (mainly superficial cuttings on the skin) and aggressive acts against others were the most problematic manifestations of them.

Findings indicated the necessary for a separate psychiatric treatment. There is good evidence that juvenile delinquents should be helped on their special needs by special policy. The professionals need to possess special knowledge about criminal behaviors in order to implement treatments. The final outcomes seem to indicate that the delinquent youths with serious clinical problems need special services with special circumstances.

**Forensic-psychiatric inpatient care for juvenile offenders in Germany**

W. Weissbeck

The German penal system is dividing between imprisonment and hospitalisation in an forensic-psychiatric hospital. In case of juveniles there are several special facilities in 9 out of 16 federal states of Germany. Seven federal states still have no adepted juvenile forensic facility. In 2003 there were only 6 units, 5 of them associated with a child and adolescent hospital. Now most units are part of a forensic hospital for adults.

The speech shows developments in care of forensic child and adolescent psychiatric mental institutions during the last decade.
The specifics on this issue concerning German law has to be explained, particularly that hospitalisation will be overviewed on a yearly base by law, if there is no sufficient improvement, it can last a lifetime until it reaches the principle of proportionality.

The survey is a synopsis of the structures of psychiatric forensic facilities for adolescents in Germany. Also the patients inside these facilities have been studied.

There are more juveniles in specific forensic care then ten years ago which is due to the circumstance, that there are more forensic facilities. The legal base has changed for most of the hospitalised adolescents.

We still need better ways to rehabilitate these patients, otherwise they have to stay for a very long time inside forensic hospitals. To influence German legislation was not successful unto now. There should be a time limitation for juveniles under forensic care. Particularly the efforts in prevention should be increased.

SYMPOSIUM “A SHAME AND COMPASSION BASED APPROACH TO PSYCHOPATHY IN ADOLESCENCE”

Chair: Daniel Rijo

Youth psychopathy has been receiving increased attention by researchers in recent decades. Several proposals have been made to understand the development of psychopathic traits, and recently the role that evolutionary based variables may have in the onset and maintenance of psychopathy has been highlighted. DSM-V pointed out the need to identify conduct disordered individuals presenting psychopathic traits (with limited prosocial emotions) as a subgroup requiring specific interventions. Taking into account available research showing that psychopathic traits are changeable in early phases of development, this symposium presents a new evolutionary based conceptual model, data on the impact of shame and shame related variables in the endorsement of psychopathic traits in adolescence, and proposes a compassion therapy program designed to meet the intervention needs of young offenders with psychopathic traits.

Child and adolescent psychopathy: An evolutionary shame based perspective
D. Ribeiro da Silva, D. Rijo and R. Salekin

Adverse rearing scenarios are associated with shame and several psychopathological outcomes. In turn, shame seems to play an important role in the relationship between early experiences and psychopathology. Though psychopathy has been historically conceptualized as a disorder marked by a lack of emotions, some authors argue that psychopathic traits could be a reflection of a tendency to externalize the experience of unpleasant emotions, which could be adaptive in certain environments.

The impact of shame and shame maladaptive coping strategies in the endorsement of psychopathic traits
P. Vagos, D. Ribeiro da Silva, D. Rijo, and N. Brazão

This study tests an explicative model involving the mediating role of shame and shame coping strategies in the association between early experiences and psychopathic traits, in a community sample. Results showed that early experiences, directly through the lack of warmth and safeness and indirectly through shame and shame coping strategies, predicted psychopathic traits. Externalizing
ways of coping with shame were the most strongly associated with psychopathic traits. Gender differences were also found. This data suggests that psychopathic traits may be conceptualized as resulting from maladaptive strategies to cope with shame, and could be seen as an adaptive strategy in psychosocial environments lacking warmth and safeness.

**Shame and shame related variables: Comparisons between a community and a forensic adolescent sample**

N. Brazão, D. Ribeiro da Silva, P. Vagos, and D. Rijo

Theoretical assumptions have for long posited that forensic adolescents present different characteristics in comparison with non-forensic adolescents. Taking into account a shame and compassion based approach, we found that forensic adolescents, when compared with community based adolescents, presented higher levels of external shame and more intense centrality of a shameful event on their current lives, as well as less experiences of warmth and safeness in childhood. These findings show that, not only adolescents are currently experiencing different shame levels, but they also differ on their perceived early positive and negative rearing experiences.

**Compassion focused therapy with young offenders presenting psychopathic traits: Overview of a new intervention program**

D. Rijo, D. Ribeiro da Silva, P. Castilho, N. Brazão, P. Vagos, and P. Gilbert

Compassion focused therapy (CFT) has been proposed as an effective third wave cognitive-behavioral intervention with diverse mental health problems. CFT aims to improve cognitive, affective, and behavioral regulation of people with shame based psychopathology. In order to test its efficacy in reducing psychopathic traits in young offenders, a twenty session individual therapy program is being developed. This presentation will inform about the aims, contents, and change process of this kind of intervention. Special attention will be paid to therapeutic relationship issues.

**SYMPOSIUM “CRIME AND TRAUMATIC BRAIN INJURY: CAUSAL LINKS AND POTENTIAL INTERVENTIONS”**

Chair: Huw Williams

**The prevalence of traumatic brain injury among young offenders in custody: reflections on systematic review**

Nathan Hughes, Huw Williams, and Prathiba Chitsabesan

In recent years there have been repeated calls for improvements in the recognition of and response to the mental and physical health needs of young people in the criminal justice system. This reflects concern for the apparent high levels of unmet needs and the likely ineffectiveness of responses that do not recognize these underlying needs to prevent future offending. Despite this awareness, it still appears rare for the influence of experiences of childhood traumatic brain injury (TBI) on adolescent offending to be recognized and responded to by criminal justice systems.

Our research therefore sought to understand the prevalence of experiences of TBI among young people in custody by reviewing research across various nation states.
A systematic review of research from various national contexts examined the prevalence of TBI among young people in youth justice custodial institutions, and comparative rates among young people in the general population.

Ten studies were included in the review. Reported prevalence rates of TBI among incarcerated youth range from 16.5% to 72.1%, with variation largely explained by diversity in definition of TBI. There is consistent evidence of a prevalence of TBI among incarcerated youth that is substantially greater than that in the general population. This disparity appears more pronounced as the severity of the injury increases.

Several limitations in the literature are apparent, including a scarcity of evidence regarding: variation in prevalence by sociodemographic characteristics; the prevalence or impact of repeat experiences of TBI; and experiences of comorbidity of TBI and other developmental and mental health difficulties. However, the available evidence also suggests a range of implications for policy and practice, including the need for: more robust screening and assessment; tailored and responsive youth justice interventions; and greater investment in preventative services, such as family and educational support.

A Health economic analysis of TBI in relation to the costs of crime and the promise of neurorehabilitation

H. Williams, D. Ramsbotham, M. Parsonage, T. McMillan, P. Chitsabesan, and S. Fazel

Traumatic brain injury (TBI) is a leading cause of death and disability in children and young adults. TBI poses major global health and social challenges. Of particular concern, there is increased evidence of TBI being associated with later criminal behaviour. Children with TBI are likely to go enter the criminal justice and TBI is very high in offender groups. TBI in offenders is linked to psychiatric disturbance – particularly self-harm - and behavioural problems, such as aggression and violence. Those with social disadvantage who experience a TBI are at increased risk of worst outcomes – a double hazard. We argue that screening for, and managing, the effects of TBI more broadly in society to enable children with TBI to stay in school and for innovative approaches for integrating forensic and neurorehabilitation young offenders in community and secure systems to improve their, and wider society’s outcomes. We provide a health economic analysis of large scale population data to indicate cost savings for such changes.

Traumatic brain injury in young offenders and co-morbid mental health needs; findings from the Comprehensive Health Assessment Tool (CHAT) Study

P. Chitsabesan, C. Lennox, H. Williams, O. Tariq, and J. Shaw

Young people in contact with the youth juvenile justice system have well documented vulnerabilities including high rates of mental health and neurodevelopmental disorders. Studies have suggested they may also be at increased risk of traumatic brain injury (TBI).

The presentation will describe key findings from a study describing a cohort of young offenders with TBI and associated co-morbidity with other neurodevelopmental disorders, mental health needs and offending behaviour.

Ninety-three boys aged 15 to 18 years were consecutively admitted to a
custodial secure facility within England. They were assessed using a range of
different neurocognitive and mental health measures including the Rivermead
Post Concussion Symptoms Questionnaire (RPQ) and the Comprehensive Health
Assessment Tool (CHAT).

Eight-two per cent of those interviewed reported experiencing at least one
TBI and 44% reported ongoing neuropsychological symptoms. Eighteen per cent
of those sustaining a TBI reported moderate-severe post-concussion symptoms.
About a half of young people had needs associated with deliberate self-harm (n =
8; 57%) or suicide risk factors (n = 7; 50%) while alcohol (n = 10; 71%) and can-
nabis misuse (n = 12; 86%) were common. Almost two thirds of young people with
moderate to severe TBI symptoms had a history of being in state care (foster care
placement with another family or placement in a residential children’s home) prior
to their custodial sentence. This is greater than the prevalence (37%) found in a
previous national study of juvenile offenders in the UK (Chitsabesan et al., 2006).

The study supports evidence of the high prevalence rate of TBI in young
offenders in the criminal justice system, with many experiencing ongoing neuro-
cognitive symptoms (Hughes et al., 2015; Williams et al., 2010). Second, there is
evidence of co-morbidity. Of particular concern is the high number of young peo-
ple with moderate to severe TBI symptoms who presented with DSH and suicide
risk factors which has clinical implications. Studies have demonstrated impulsiv-
ity and substance misuse increase the risk of self-harm and suicidal behaviour in
young people who offend (Putnins, 2005; Ruchkin et al., 2003). It is possible that
the increased prevalence of self-harming behaviour may be independent of TBI or
mediated by shared risk factors such as a previous history of being in state care.
There is evidence that young people taken into care are at increased risk of mental
health and substance misuse needs (Meltzer et al., 2002). Additionally, young peo-
ple with a history of abuse or neglect are likely to be at increased risk of experi-
encing a brain injury. The link between crime and TBI may be an epiphenomenon,
whereby TBI is a ‘marker’ for various contextual factors associated with crime, in-
cluding psychosocial adversity. Parental mental illness, family breakdown, par-
enting style and association with other antisocial peers all influence outcomes
(Farrington, 2002). Consequently, the high rate of psychopathology found may
be secondary to shared risk factors, as the lives of these young people are of-
ten characterised by attachment difficulties, trauma, familial psychopathology and
disadvantage (Loeber and Farrington, 2000).

Review of evidence based interventions for young offenders and
suggestions for practice, including a focus on TBI
S. Fox

This paper will briefly review the traditional approaches that are offered
to young people in the criminal justice system. It will cover the various limita-
tions of these. Some of the evidence-based systemic approaches to working with
young people with aggressive and antisocial behaviour will be discussed including
the model of delivery and the research base. Case vignettes will be used to illus-
trate how some of the models work in practice. It will conclude by drawing togeth-
er some of the advantages of working with the systems around the young person
but will also cover some of the limitations of these models. Specific considera-
tions will be given to working with young offenders with traumatic brain injury and the
difficulties that this group might face.
SYMPOSIUM "DEVELOPMENT OF ADOLESCENT DELINQUENCY IN DIFFERENT INTERVENTION SETTINGS"

Chairs: Marc Schmid and Klaus Schmeck
Longitudinal studies present the only option to assess causality between the development of adolescent delinquency, and risk and protective factors. Due to the high expenditure of time and costs, longitudinal approaches remain rare, making findings from such studies all the more important. Of special interest is the comparison of risk and protective factors between different intervention settings. Various aspects of the development of adolescent delinquency will be presented.

Predictive utility of the Youth Psychopathic Traits Inventory
T. Pérez, N. Jenkel, K. Schmeck, and M. Schmid
Numerous studies have demonstrated a close relationship between psychopathic traits and delinquency in adults. However, the association does not seem so clear-cut in adolescents. Some studies show a moderate association between psychopathic traits and delinquency. Other findings suggest a weak association or none at all. Most notably, the association between psychopathic traits and delinquency has been found to differ across gender. Psychopathic traits appear to be of less importance in predicting female juvenile delinquency. This presentation evaluates the utility of the Youth Psychopathic Traits Inventory for predicting convictions in male and female adolescents using a prospective long-term follow-up study based on official records.

Antecedents of delinquency – results of two longitudinal studies
K. Schmeck, N. Jenkel, J.M. Fegert, and M. Schmid
We studied the course of delinquency in two Swiss epidemiological samples: a school sample of 840 adolescents and a sample of 592 adolescents living in residential care facilities sponsored by the Swiss Ministry of Justice. This second sample is characterized by high levels of delinquency, psychopathology and traumatization. In both samples the course of delinquency is assessed via the criminal records of the Swiss Federal Statistical Office. We will present the effect of psychopathic traits, psychopathology, and former convictions assessed from 2007-2011 on the rate of convictions assessed in May 2015 and will compare the effects of these variables in the two samples.

Childhood traumatic experiences and mental health problems in sexually offending and non-offending juveniles
There is clear evidence that childhood abuse is related to both mental health problems and later offending behavior. Although childhood abuse is highly prevalent in juveniles who sexually offended (JSOs), little attention has been devoted to the direct relation between childhood abuse and mental health problems in this specific group of offenders over and above general offending behavior. We found that sexual abuse was related to anger problems, suicide ideation, and thought disturbance in JSOs. These associations were significantly stronger in JSOs than in non-JSOs. Our results suggest that the relationship between childhood abuse and mental health problems is of more urgent matter in sexual offending behavior than in general offending behavior, and should, therefore, be an important point of view in the assessment and treatment of JSOs.

5th EFCAP Congress, Porto, Portugal, 2016
SYMPOSIUM “TREATMENT OF MALE ADOLESCENT SEXUAL OFFENDERS WITH PARAPHILIC DISORDERS: STATE OF THE ART”

Chair: Yesim Taneli

Treating male adolescent sexual offenders with paraphilic disorders is a therapeutic challenge different from adult treatment. Adolescents are in various stages of puberty and development, which limits the use of certain pharmacological agents due to potential side effects. Many psychosocial factors and specific ethical issues need consideration. Most published treatment programs report cognitive behavioural interventions, family therapies and psychoeducational interventions. Psychological treatment is predicated in adolescents if the sexually deviant behaviour can be controlled by the offender, and if more adaptive behaviours can be learned.

Treatment Approach and WFSBP Guideline
F. Thibaut

The World Federation of Societies of Biological Psychiatry (WFSBP) Guidelines for the Treatment of Adolescent Sexual Offenders with Paraphilic Disorders (2015) aim to evaluate the role of pharmacological agents as well as review psychotherapeutic and psychosocial treatments in these adolescents who are also sexual offenders or at-risk of sexual offending. The main purposes are to improve the quality of care and to aid physicians in their clinical decisions. These guidelines merged different expert views on the appropriate treatment. After extensive literature research, treatment recommendation were evaluated according to their strength of evidence for efficacy, safety, tolerability and feasibility. The treatment choice will essentially depend on the following parameters: 1) patient’s previous medical and psychiatric history, 2) patient’s compliance, 3) intensity of deviant sexual fantasies and sexual preoccupations, 4) comorbid hypersexuality, 5) risk of sexual violence, 6) completion of growth and puberty. An algorithm is proposed for the treatment of adolescent sexual offenders or adolescents at-risk of sexual offending with paraphilias.

Evaluation of Juvenile Sexual Offenders
Y. Taneli

Juvenile sexual offenders are a heterogeneous group and comprehensive assessment based on a trusting relationship with the adolescent is needed. Information is drawn from multiple sources, by avoiding stigmatization and obtaining informed consent from adolescent/caregiver specifying which information may be exchanged among therapist, school and workplace.

Baseline evaluation includes diagnosis and severity of paraphilic disorder(s); psychiatric and somatic comorbidities including victimization of offender and suicidality; neuropsychological evaluation including intellectual capacity (IQ); legal responsibility status (regulations differ by country). Specific psychometric assessment scales may be added. Direct measurement of sexual arousal using phallometric assessment is not recommended for adolescent sex offenders. Visual Reaction time is a less intrusive objective measure of sexual preference, but effects on psychosocial development need consideration and country-specific laws prohibiting the presentation of sexual material to minors must be obeyed.
Evaluation further comprises treatment motivation, capacity/need of support for treatment compliance; recidivism risk (school/police/justice records); access to weapons, the youth’s strengths, psychosocial support and barriers to health care providers including lack of social security.

**Ethical Issues in Treating Juvenile Sexual Offenders**

**P. Cosyns**

Treating juvenile sexual offenders opens up issues of medical ethics like supporting a favourable educational or professional training trajectory in addition to treatment; stigmatization, consent to obtain information from peers/school/workplace, legal aspects of presenting sexual material to minors during assessment/therapy, and timing of antiandrogen treatment considering pubertal development.

The judicial coerced treatment of sexual offenders presents another specific challenge. Controversial discussions comprise the influence of coercion on treatment and on the motivation of patient and therapist, confidentiality and hormonal treatment. According to medical ethics any treatment must be beneficial to the individual patient, therefore social control can not be the primary/only concern of therapists and best interests need to be balanced. Coerced treatment of sexual offenders needs cooperation between psychiatric and judicial authorities respecting their respective professional ethics.

Informed consent of juvenile offenders and their caregivers, legal representatives must always be obtained as appropriate, including all cases of antiandrogen treatment prescription, according to the national legal and ethical regulations.

**ORAL PRESENTATIONS “RISK AND PROTECTIVE FACTOR STUDIES II”**

**Chair: Marco Zanoli**

**Youngsters on probation: An approach from protective factors**

**M. Zanoli and E. Peruzzo**

Male offenders under the age of 18 with a poor social-cultural background constitute a high social and personal risk for the community with a high probability to crystallize antisocial behaviours and become a high cost for society.

A group of 12 young males on probation for crimes committed between the age of 15-18 where followed for a 5 years study. They were taken into foster homes for a period of at least 2 years and attended professional schools to increase their skills and give them the possibility to quickly find a job. The control group was formed by 12 youngsters on probation but remaining in family and not addressed to any school.

After 5 years follow up there was a significant difference in the capacity to find and maintain a job between group one and two. The study group was able not to fall in recidivism significantly more than the control group and protective factors where increased by means of new relations (friends, partner).

The increasing working skills, the absence of a family that constitutes a “poor” substrate for creating positive relations the existence of a group of positive peers, leads to a significant increase in life quality of examined cases and focalize attention to the importance of protective factors to avoid risk ones.
The familial basis of changes in brain structure in adolescents with Conduct Disorder and their unaffected first-degree relatives
G. Fairchild, K. Sully, A. Darekar, L. Passamonti, E. Sonuga-Barke, and N. Toschi

Antisocial behaviour clusters within families and is moderately heritable. An important question is how familial risk is expressed at a brain level. To address this question, we tested for neuroanatomical endophenotypes in adolescents with Conduct Disorder (CD) and their unaffected first-degree relatives.

The goal of this study is to examine whether adolescents with CD and their unaffected relatives show common abnormalities in grey matter volume and cortical structure.

We collected structural MRI data (T1-weighted volume acquisitions) from adolescents with CD (n=43), unaffected relatives of CD probands (n=24) and typically-developing controls (n=41; aged 13-18). The structural images were pre-processed using DARTEL and analysed using voxel-based morphometry (SPM8). We also employed FreeSurfer to test for group differences in cortical volume, thickness, folding and surface area.

There were main effects of group on insula, ventromedial prefrontal cortex, and cerebellum grey matter volume. Interestingly, unaffected relatives showed increased bilateral anterior insula volume relative to CD probands, but no other regions differed between these groups, whereas CD probands and unaffected relatives had lower ventromedial prefrontal cortex and cerebellar volume than controls. The surface-based morphometry analyses also revealed reduced insula volume in CD probands compared with the other groups; these changes were driven by reduced insula surface area.

This is the first study to investigate brain structure in CD probands and their unaffected relatives. Ventromedial prefrontal cortex and cerebellum volume may be sensitive to familial risk for CD, whereas normal anterior insula volume may exert a protective influence in individuals who are at risk for developing CD.

Experience of child sexual abuse in two neighboring countries: is there a common pattern?
M. Raleva, G. Qirjako, and M. Boshkovska

The Adverse Childhood Experiences survey marked an important link between early life experience and later risk for physical and mental health and wellbeing.

The survey aimed to describe the magnitude of adverse childhood experiences in the Albanian and Macedonian young population, to identify socioeconomic characteristics, and associations between ACE, health risk behaviors and health outcomes.

The survey was conducted during 2010 and 2012 in representative samples of adolescents and young adults in Republic of Macedonia ([N=1277]; 58.6% females and 41.4% males) and in Albania ([N=1437]; 67.6% females and 32.4% males) from secondary schools and public universities. The data collection consisted of an anonymous and self-administered structured questionnaire with 68 questions examining various types of childhood adversities rooted in household dysfunction, and risk factors.

The prevalence of sexual abuse was higher in boys (11.2% in Macedonia and 8.8% in Albania) compared to girls (3.1% in Macedonia and 4.7% in Albania). In addition, those who were sexually abused, were more likely to smoke and to use alcohol and drugs.

Although in majority of researches females are more prone to sexual abuse than males, our studies have shown different pattern. All forms of sexual abuse
were more experienced by boys than girls. These findings indicate the need for further explorations to identify the reasons of this common pattern in Balkan countries. Appropriate strategies are needed for the prevention of sexual child abuse among young people in both countries.

**The impact of street hawking on the psychosocial well-being of young people in Nigeria**

N. Okeke, T. Alwyn, A. Tatham, and D. Clayton

Children are critical to nation development, consequently protecting them from hazardous work which could hamper their physical, emotional and cognitive development should be the priority for all nations.

The aim of this study was to explore the lived experiences of child street hawkers in Nigeria with the goal of identifying the effect of street hawking has on their psychosocial wellbeing.

Semi structured face-to-face in-depth interview approach was used and the data analysed using interpretative phenomenological analysis. A total of fifteen young people aged between 12 and 16 years, who have been actively engaging in street hawking for the past 2 years were recruited and interviewed about their current perspectives on their experiences.

The findings of the study were collated into five themes. The themes highlighted that young people experienced negative emotions, physical problems, negative self-perception, negative societal treatment and resilience. The participants expressed significant experience of stress, depressive feeling and anxiety which made them feel hopeless and helpless about their condition. However, some of them showed high optimism, strong religious affiliation and high self-efficacy which were helpful as a coping mechanism.

It is suggested that strengthening the available support system for these young people could boost their resilience and enable them come out successful despite all odds. These findings also add weight to the evidence base for the prospective value of psychosocial interventions in building resilience among young people.

**Student-teacher relationship and adolescent delinquency**

I. Obsuth, M. Eisner, D. Ribeaud, A. Murray, and P. Sulger

Evidence suggests that supportive student-teacher relationships are related to positive child outcomes – educational, social and behavioural. Less is known about the effects of student-teacher relationships on adolescent outcomes and in particular on serious antisocial behaviours/delinquency.

In this study our goal was to examine the causal link between the quality of student-teacher relationships measured at age 11 and delinquency measured concurrently as well as at ages 13 and 15.

We utilised data from four waves (ages 11 to 15) of the Zurich Project on the Social Development of Children, a large (N = 1639) prospective longitudinal study of a culturally mixed normative sample and propensity score matching to address our objective.

Young people with positive student-teacher relationships at age 11 reported engaging in fewer delinquent behaviours at ages 11, 13, and 15 than young people with less positive student-teacher relationships, but otherwise matched on 106 characteristics measured prior to age 11.

The quality of student-teacher relationship is causally linked to adolescent delinquency. Relationships with teachers and building a broader positive school context will be discussed as measures of crime prevention.
Mounting evidence indicates that emotional maltreatment is at least as harmful as physical and sexual abuse. Notwithstanding their high prevalence among detained adolescents, the link between emotional maltreatment and mental health problems, reactive and proactive aggression in these youths is not well researched. We conducted two studies. In the first study, data was used from routine mental health screening of 762 Dutch detained male adolescents aged 13-18 years. In the second study, questionnaires were completed by 341 Flemish detained adolescents (156 boys, 185 girls) aged 12 to 18 years. Detained boys with a history of emotional maltreatment were shown to be at an increased risk for reactive aggression and mental health problems, especially when they also report having experienced physical abuse, physical neglect and/or sexual abuse. As expected, girls reported higher levels of maltreatment experiences and internalizing and externalizing mental health problems than boys. Blockwise multiple linear regression analyses indicated that in both genders emotional abuse was uniquely and positively associated with internalizing and externalizing mental health problems, over and above the influence of other types of maltreatment. Furthermore, sexual abuse was uniquely related with internalizing problems in girls only, whereas only in boys this type of abuse was uniquely related with externalizing problems. Detained adolescents who have been the victim of emotional abuse in combination with another type of maltreatment may be the worst subgroup in terms of mental health problems. Therefore, emotional maltreatment should receive more research and clinical attention.

Detained girls bear high levels of criminal behavior and mental health problems that are likely to persist into young adulthood. Research with these girls began primarily from a risk management perspective, while a strength-based empowering perspective may increase knowledge that could improve rehabilitation. This study examined detained girls’ quality of life (QoL) in relation to future mental health problems and offending, thereby testing the strength-based Good Lives Model of Offender Rehabilitation (GLM). At baseline, 95 girls (Mage = 16.25) completed the World Health Organization QoL Instrument to assess their QoL prior to detention in the domains of physical health, psychological health, social relationships, and environment. Six months after discharge, mental health problems and offending were assessed by self-report measures. Structural equation models were conducted to test GLM’s proposed (in)direct pathways from QoL (via mental health problems) towards offending. Although we could not find support for GLM’s direct negative pathway from QoL to offending, our findings did provide support for GLM’s indirect negative pathway via mental health problems to future offending. In addition, we found a direct positive pathway from detained girls’ satisfaction with their social relationships to offending after discharge. The current find-
ings support the potential relevance of addressing detained girls’ QoL, pursuing the development of new skills, and supporting them to build constructive social contacts. Our findings, however, also show that clinicians should not only focus on strengths but that detecting and modifying mental health problems in this vulnerable group is warranted as well.

A snapshot of Adolescent offenders profile in one Kosovo correctional centre
G.Halilaj, F.Drevinja, M. Gjocaj, S. Haxhibeqiri, J. Majkovci, and N. Fanaj
Profile recognition of teenage offenders is an issue of importance to a country’s aimed prevention programs.

The goal of this study is to estimate some of the psychological and social characteristics of adolescent offenders at the only one correctional center in Kosovo.

To 41 male offenders aged between 14 and 23 years old (M = 18.02; SD = 2.20) is applied Rosenberg Self-Esteem Scale (Rosenberg, 1965), Hopelessness Scale for Children (Kazdin et al, 1986), Relationships Questionnaire (Bartholomew & Horowitz, 1991) and a questionnaire constructed from different scale to measure some of the emotional and behavioral characteristics.

According to offenses committed: 41% theft, 15% homicide, 15% robbery, 7% attempted murder, 7% illegal weapons etc. 56.4% are recidivist. With low self-esteem resulted 12.5%, with high hopelessness 9.8%. Based on self-rating of attachment style: secure - 27.3%, fearful - 36.4%, preoccupied - 12. %, dismissed - 24.2%. The most reported characteristics was: not having fun with friends, feeling angry, feeling lonely, headaches, losing temper easily, staying mad for long time etc. No significant differences in self-esteem and hopelessness levels between groups based on offenses committed.

No significant trace can be outlined between some characteristics (type of offenses, self-esteem, hopelessness, attachment style etc.). Complexity of adolescence itself of course is expressed also in adolescent offenders profile.

Public mental health care needs of young adult violent repeat offenders
M. Segeren, T.Fassaert, M.de Wit, and A.Popma
An important part of a current diversion program in Amsterdam is identifying underlying problems related to the criminal behavior of a group of young adult violent repeat offenders. Given their history of juvenile probation, it concerns mostly persistent offenders whose criminal behavior escalated during young adulthood.

The study aimed to 1) describe current public mental health care (PMHC) needs of these offenders and 2) identify precursors of social-psychiatric problems. PMHC needs were estimated from results of a social-psychiatric screening, available for approximately 800 offenders. Screening results were matched with results of a study among 206 offenders into criminogenic risk factors, retrieved from historic juvenile probation files.

Preliminary results indicate presence of any psychiatric disorder in 47% of the population, 79% including differential diagnoses. Substance abuse (47%), personality disorders (12% ) and intellectual disability (15% ) were highly prevalent, differential diagnoses not included. Less common were anxiety and mood disorders (6% ), ADHD/hyperactivity disorders (7% ) and psychotic disorders (4%). Self sufficiency was severely limited in terms of finance (52%), daytime activity
Major criminogenic risk factors were identified. These were mostly of psychosocial nature, such as lack of empathy (89%), conscience (99%), and problem awareness/insight (97%). Psychopathology, except disrupted personality development towards type B (74%), was less common.

PMHC needs are highly present under young adult violent offenders. Social problems offer a means to take up on guidance towards care. Precursors of psychopathology during young adulthood are mostly psychosocial by nature.

“Me and my home”: Residential care quality and adolescents’ psychological adjustment, self-esteem and satisfaction with life
S. Rodrigues, M. Barbosa-Ducharne, J. Del Valle, A. Mota, and J. Iglesias

Residential care (RC) in Portugal accounts for over 90% of out-of-home placements of children. A large number of those are adolescents (56.1%) between 12-17 years. Mental health problems, less psychological adjustment, low self-esteem and satisfaction with life, characterize frequently youngsters in RC.

The lack of studies on RC quality in Portugal underlies the importance of research about how far the available services meet the real characteristics and needs of young people in care, including mental health issues and behavioral and emotional problems displayed.

Five RC centres for children and young people were visited within an exploratory study of a nationwide assessment on the quality of the Portuguese RC system. Sixty-one youngsters living in those settings, aged 12 to 20, participated in this study. Data on RC quality was collected using the ARQUA-P. Youngsters also filled the YSR, SDQ, RSES and the SWLS.

The results showed that youngsters in care evaluated the quality of the RC centres positively. Significant differences in the RC quality assessment associated to individual adolescents’ variables, such as gender, and context variables, like the centre size, were found. Regarding the psychological adjustment of the youngsters, results showed that the youngsters in care presented more signs of maladjustment, low self-esteem and less life satisfaction than their normative counterparts. Finally, significant correlations were found between the dimensions of the RC quality assessment and the measures of youngsters’ psychological adjustment, self-esteem and satisfaction with life. Implications for further research and for RC professional practices improvement are discussed.

SYMPOSIUM “USE OF NEUROBIOLOGICAL INFORMATION IN THE SENTENCING AND TREATMENT OF JUVENILE AND YOUNG ADULT OFFENDERS”

Chair: Maaike Kempes

Age and development appropriate sentencing of juveniles and young adults: Juvenile criminal law in the Netherlands
C. Barendregt, M. Beerthuizen, and A. van der Laan

In the Netherlands, minors (< 18 years) are sentenced according to juvenile criminal law, and (young) adults (≥ 18 years) are sentenced according to adult criminal law. However, depending on conditions such as the personality of the offender, a case can be waived. A juvenile’s case may be waived to an adult court, and a young adult’s case may be waived to a juvenile court. This protocol is referred to as ‘Adolescent Criminal Law’. The aim of this study was to gain insight into the underlying assumptions of this protocol, and to examine developments in the sentencing of 16 to 23 year olds. A literature study and stakeholder inter-
views were used to study the underlying assumptions. Official sentencing registration data of the Public Prosecution Service were gathered. Adjudication of developmentally delayed and/or psychiatrically disturbed young adults under juvenile criminal law offers both tailored sentencing and treatment.

**Delinquent young adults: delayed development or not?**  
Maaike Kempes, and Katy de Kogel

Recent evidence shows that brain maturation, and specifically the prefrontal cortex, involved in executive functions important in adulthood such as planning and impulse control, is not completed before the early twenties. Furthermore, uncompleted development of the prefrontal cortex has in part been linked to an increase of risk-taking and criminal behaviour. In order to reduce risk behaviour and diminish criminal recidivism in adolescents and young adults, it seems, therefore, important to consider their level of development, specifically development of executive functions. We reviewed literature on indications that in the group of delinquent adolescents one can distinguish between specific groups of delinquent individuals in which their delinquent behaviour is linked incomplete maturation of executive functions and groups of individuals in which delinquent behaviour is related to longer persisting dysfunctions in executive functions. Results will be presented.

**Neurobiology in forensic assessment of adolescents and young adults: prevalence and consideration of neurobiological deficits**  
I. Berends, M. Kempes, N. Duits, and W. van den Brink

The increasing body of research regarding neurobiological correlates of crime has led scholars to discuss the ethical and practical implications of these findings for the forensic practice. However, the actual role and consideration of neurobiological factors in the current practice of forensic assessment, is unknown. The aim of this study is to investigate the prevalence and consideration of neurobiological deficits in forensic assessments and to identify any differences between forensic experts (forensic psychiatrists and psychologists) regarding these aspects. For our study we included forensic reports (N=210) concerning examinees (adolescents and young adults) subjected to a forensic assessment who suffer from a neurobiological deficit according to the forensic expert(s). A small increase is found in the number of examinees who diagnosed with neurobiological deficits in the past ten years (2005-2015). Neurobiological factors are considered most frequently in the forensic question regarding criminal responsibility. Lastly, great differences are found between forensic experts.

**Autonomic Nervous System Functioning during Empathic Response to Sadness in relation to Psychopathic Traits in Detained Juveniles**  
E. Ruigh, L. Jansen, R. Vermeiren, T. Doreleijers, and A. Popma

Antisocial individuals are thought to often display psychopathic traits, such as lack of guilt, remorse, or empathy. Deficits in empathy in children and adolescents with Disruptive Behavior Disorders have been previously found on a behavioral and physiological level. The current study aimed to assess whether neurophysiological correlates of empathy deficits are also relevant in a forensic youth sample. A population of detained juveniles and young adults (n = 300, mean age: 18.5) from several juvenile justice institutions in the Netherlands were studied. Psychopathic traits and trait and state empathy were assessed using questionnaires. Autonomous Nervous System activity was monitored while participants watched empathy evocative film clips portraying sadness. Preliminary re-
results show reduced self-reported empathy was correlated with more psychopathic traits, especially for the affective dimension of psychopathic traits. No significant differences emerged with regard to physiology. Final results will be discussed.

**SYMPOSIUM “ADOLESCENTS IN RESIDENTIAL CARE: RELATIONSHIPS AND PSYCHOLOGICAL ADJUSTMENT”**

**Chair: Luíza Nobre Lima**

Adolescents living under the protection measure of institutional care, carry with them a past of maltreatment and negative memories that have a pervasive impact on development, thus compromising several domains such as attachment to others, emotional self-regulation, social competences and a positive self-perception (e.g., self-hate, shame, guilt). As an outcome of their maladaptive trajectories, these adolescents frequently show psychological adjustment problems and tend to involve themselves in conflictual relationships with others, as peers and, probably, romantic partners. To identify causes and pathways to the psychological maladjustment of institutionalized adolescents and also sources of their resilience are the general aims of this symposium.

The predictive role of emotional dysregulation on peer attachment of institutionalized adolescents

A. Lino, and L. N. Lima

Aims: to examine the level of emotional dysregulation presented by institutionalized adolescents and to analyse how it predicts their perception of attachment to their peers. In a sample of 100 adolescents, results showed that dysregulation, in its cognitive, affective and behavioural dimensions, predict approximately 12.6% of the peer attachment perception presented by these adolescents. Of all the dimensions, cognitive dysregulation stood out as the one that better accounts for peer attachment perception.

A comparative study on dating violence between institutionalized and non-institutionalized adolescents

L. N. Lima, and C. Fonseca

Aims: 1) to analyse the expression of the phenomenon of dating violence, in its several facets, among institutionalized adolescents in comparison with non-institutionalized adolescents; 2) to compare attitudes towards dating violence between these two groups of adolescents and associate them with the experienced violence. Sample comprised 258 adolescents equally distributed by number, gender and age into two groups. Results show that there is little difference between the groups, with both reporting to be victims and perpetrators of verbal violence and using positive strategies of conflict resolution. Attitudes are positively associated with victimization and perpetration of dating violence in both groups.

Shame as a mediator of the relationship between negative emotional memories and dating violence of institutionalized adolescents

L. N. Lima, and A. Lino

Aims: 1) to analyse the relationship between memories of threat and subordination of institutionalized adolescents and their dating violence experiences; 2) to explore the mediator role of shame in the previous relationship. Sample will comprise adolescents aged between 14 and 18 years old living under the protection measure of residential care. Data collection is still in progress and will finish by march 2016.
“Falling seven times and getting up eight”: The importance of the relationships established with peers and residential caregivers to the resilience of institutionalized adolescents
S. Inácio, A. Lino, and C. Farate

Aim: to examine the role that attachment perception to peers and residential caregivers plays on the prediction of resilience of institutionalized adolescents. In a sample of 45 adolescents (18 boys, 27 girls) both forms of attachment only predict boys’ resilience. In girls, the only variable that seems to account for resilience is the perception of attachment to residential caregivers.

SYMPOSIUM “IMPROVING SECURE RESIDENTIAL CARE CLIMATE: PRACTICE- AND EMPIRICAL BASED RESULTS”

Chair: Geert-Jan Stams

There is accumulating evidence institutional or living group climate in secure residential youthcare or youth prison matters. Not only for reducing violence but also for developmental task for detained adolescents and recidivism. This session is devoted to empirical based results and different practical methods for improving living group climate.

Improving climate in 9 Dutch juvenile Justice Institutions over a 3 years period, results and challenges
J. Nagtegaal, and A. Dekker

The importance of an open living group climate is increasingly recognized in the past decade. This is underlined by the fact that both the Ministry of Safety and Justice and Dutch Youth prisons invest in the improvement of living group climate. Research is conducted by the research group ‘Residential Youth Care’ of Leiden University of Applied Sciences and Amsterdam university. Feeding back the results (PDCA-cycle) at both institutional level and team level seems to be essential in this process. At team-level, results are discussed with operational staff members and they themselves discuss the results with the juveniles. In this feedback sessions, strong aspects and areas of concern are formulated by staff members and juveniles and together they formulate attainable goals for the forthcoming period (until the next measurement). By doing this, teams are made responsible for their own quality process.

The collaboration between the institutions and the Dutch Ministry of Safety and Justice Dutch government is an example of good practice, and development is encouraged. Jaap Nagtegaal (MSc, Manager Development and Treatment in Governmental Juvenile Justice Institute, location ‘de Hartelborgt’) shares his experiences with this process during this symposium.

Using the Prison Group Climate Instrument (Van der Helm, 2011), and the living group work climate instrument (LGWCI, Dekker & van Miert 2011) both the inmate’s climate and staff climate was assessed in a longitudinal design (n= 2400). All institutions were given feedback by means of a research report and small folders, containing results and advice for improvement for inmates and staff. Results were analysed longitudinally.

Results show an overall steady and significant improvement of living group climate over the time period but not in every institution. Implications for practice are discussed.
Improving institutional climate in 5 Youth Prisons and secure residential Schools for Children at risk in Estonia, results and challenges
J. Salla, and K.Tamms

In Estonia, the Ministry of Justice has recognised a need for improvement in secure residential youthcare and youth prison. A comprehensive scheme was set up to have three consecutive measurements and feedback of results of living group climate in 6 institutions over a one years period.

Using the Prison Group Climate Instrument (Van der Helm, 2011), and performing interviews with staff as well as adolescents both the adolescents climate and staff climate was assessed in a longitudinal design (n=750) in 6 youth prisons and secure institutions or schools. All institutions were given feedback by means of a research report, presentations and small folders, containing results and advice for improvement for inmates and staff. Results were analysed longitudinally.

Results show climate improvements in some institutions but also give an insight into factors resisting organisational change. Implications for practice are discussed.

Improving institutional climate in Belgium residential institutions & youth prisons: Results and future plans
D. Levrouw, E.Strijbosch, R.Roosen, and Bie Tremmery

In a semi-secure Belgium residential youthcare institution major climate improvements were attained by discussing and sharing fresh idea’s with workers and children and discussing results. This is method is now adopted by 8 other Belgian Institutions.

Using the Children’s Group Climate Instrument (CGCI, Strijbosch et al, 2013) institutional climate in a Belgium residential youthcare institution was regularly assessed and staff as well as children made proposals and set goals for improvements. Qualitative and quantitative results (n=120) were shared with all staff in order to get feedback and exchange fresh idea’s. On the base of these results this method was exported to 8 other institutions and one youth prison in Belgium, were first results are presented.

Longitudinal results show significant climate improvement over time and this method is now being exported to 8 other Belgian Institutes.

Improving living group climate in secure residential care for children with a Mild Intellectual Disability
J. van der Linder, and M. Beld

Treating children with a Mild Intellectual Disability is a secure setting can be very challenging. Due to many social problem situations between children and staff en between children there can be a high frequency of severe incidents and violence. Improving social climate and reducing violence is difficult and transactional processes, due to earlier aversive experiences of MID children have a tendency to deteriorate.

Over a period of three year period institutional climate was assessed by a validated and for MID adapted version of the Prison Group Climate Instrument (n= 650; Van der Helm, 2011). All living groups were given feedback by means of a research report, presentations and small folders, containing results and advice for improvement for children and staff. Results were analysed longitudinally (10 measurement waves). Also in a second study in a Dutch youth prison for MID children climate was assessed for 7 consecutive waves at the living group each wave followed by teamcoaching.
Results show significant lasting improvement of climate quality and a significant reduction of incidents.

**16:30-17:40 – PARALLEL SESSION VI**

**SYMPOSIUM “HOW WELL DO CALLOUS-UNEMOTIONAL TRAITS REALLY CAPTURE A CLINICALLY MEANINGFUL SUBGROUP OF ANTISOCIAL YOUTHS AND ARE THERE ALTERNATIVES?”**

**Chair: Henrik Andershed**

Research focusing on the importance of Callous-Unemotional (CU) traits and the corresponding Low Prosocial Emotions specifier to the Conduct Disorder diagnosis in DSM-5 is steadily increasing; however, the support for its utility in designating a clinically meaningful group is not without doubtful results. The aim of this symposium is to present a series of studies dealing with the question of how well CU traits really capture a clinically meaningful subgroup of antisocial youths and if there are concrete alternatives. Data from several countries, collected from childhood to adolescence, using cross-sectional and longitudinal designs, and based on both community and institutionalized samples are utilized in this series of studies. Results from the studies clearly challenge the view that CU traits is the most optimal way to subgroup antisocial youth. Concrete alternatives that are tested and that may perform even better than CU traits alone include the multidimensional psychopathy construct as well as co-morbid internalizing problems.

**The Low Prosocial Emotions specifier to the Conduct Disorder diagnosis in the DSM 5 – How well does it really work?**

**O. Colins**

The new *DSM-5* specifier ‘with Limited Prosocial Emotions’ (LPE) is expected to provide greater information about impairment of children and adolescents with conduct disorder (CD). Detained adolescents constitute an important population of youths in whom to put the specifier to the test. Therefore, this presentation will review the evidence for these expectations in a series of studies among detained girls (study 1: n = 191 self-ratings; Study 2: n = 85 self- and parent ratings) and detained boys (study 3: n = 223; Study 4: n = 380). Of note, one of these four studies scrutinized the clinical usefulness of this LPE specifier outside of a research context, that is, as part of a clinical protocol where no anonymity and confidentiality of the information was guaranteed to the participants. In all studies, the Youth Psychopathic Traits Inventory was used to make the DSM-5 LPE specifier operational, although some studies also used the Antisocial Process Screening Device and the Inventory of Callous-Unemotional traits. Diagnostic interviews were used to assess if the boys and girls met criteria for various psychiatric disorders, including CD, and the participants also completed standardized questionnaires that tap reactive and proactive aggression, violent and non-violent criminal behavior, internalizing problems, rule-breaking behavior, and other constructs of interest. The results of these studies will be presented and discussed as introduction to the other two presentations in this symposium.
Comparing Different Approaches For Subtyping Children With Conduct Problems: Callous-Unemotional Traits Only Versus The Multidimensional Psychopathic Personality Construct
H. Andershed

The construct of adult psychopathy has been extended downwards to childhood to identify a severe subgroup of children with conduct problems (CP). Yet, a large body of research currently only focuses on the affective part of the psychopathy construct, namely callous-unemotional (CU) traits, for subtyping purposes. Here, two studies using two different longitudinal data sets comparing these two approaches (i.e., CU versus the multidimensional psychopathy construct) in their ability to predict future and stable CP. Study 1 consisted of a community sample of 1,867 preschoolers (47% girls) between the ages of 3 and 5 at baseline and were then followed over two years. Teacher ratings were used to measure psychopathic traits and conduct problems. In Study 2, mother and fathers of 321 boys and 369 girls completed questionnaires to measure psychopathic traits and conduct problems at a baseline and at 6- and 12 month follow-ups. Notwithstanding that high levels of CP in combination with CU traits were occasionally at increased risk for future and stable CP, high levels on all psychopathic dimensions in combination with CP at baseline by far showed the most robust and strongest predictive associations with future and stable CP. Conclusions. The findings suggest that the CU-based approach for subtyping children with CP is less sufficient compared to a subtyping approach using the multidimensional psychopathy construct in predicting future CP. This calls for more research re-considering the multidimensional construct of psychopathy for CP subtyping purposes rather than focusing solely on CU traits.

Heterogeneity in antisocial behavior at age 3: Early life antecedents and association with age 15 biological and environmental measures
K. Fanti

Investigating heterogeneity in antisocial behavior early in life is essential for understanding the etiology and development of these problems. Longitudinal data were used to identify heterogeneous groups of antisocial children differentiated on internalizing and externalizing problems and callous-unemotional (CU) traits using Latent Profile Analysis. Furthermore, we examined how behavioral, neurobiological, and environmental outcomes differentiated the identified subgroups. The sample consisted of 1232 children (52% male) followed from age 3 to age 15. Analyses identified three antisocial groups: the first scored high on internalizing and externalizing problems but low on CU traits (Ext/Int), the second scored high on CU traits and externalizing problems, but low on internalizing problems (primary CU variant), and the third scored high on CU traits, internalizing, and externalizing problems (secondary CU variant), and these differences persisted into adolescence. Both Ext/Int and secondary CU variants were characterized by low self-regulation. Compared to other groups, secondary CU variants had higher rates of exposure to environmental adversity across time and exhibited more risk taking and delinquency. Finally, primary and secondary CU variants were differentiated on biological measures (cortisol and resting heart rate), social skills and cognitive abilities. These findings indicate that the CU specifier in DSM-5 might not be enough and additional heterogeneity needs to be considered.
ORAL PRESENTATIONS “ASSESSMENT AND TREATMENT OF CHILD AND ADOLESCENT VICTIMS I”

Chair: Cristina Soeiro

Child and adolescents victims of sexual crimes: From the complexity of the phenomenon to the good practices of intervention by the Portuguese Judiciary Police
C. Soeiro and R. Guerra

This communication aims to present the Portuguese program implemented in the Judiciary Police to improve the quality of the assistance services for the victims of sexual crimes offered by the police officers, at national level. The CSBP program have as main goal promote the development and standardization of the professional working practices of the police criminal investigation dealing directly with child and adolescents victims of sexual crimes. Sexual crimes occur in various social contexts of life of the victims. It is therefore important to prepare the criminal investigation police to intervene in contexts where such crimes can occur: the internet, family, friends, caregivers, colleagues, strangers, and workplace. The project has two different phases: the first was the diagnosis of the problem with a: 1) study of the characteristics of victims, offenders and the contexts where aggression occurs; 2) identification of European legal mechanisms and European and United Nations recommendations; 3) survey of methods of work used in European space in terms of criminal investigation for this kind of crime (models interview, interrogation, types of rooms for interview the victims, ..). The second phase was the implementation of work guidelines: 1) Specialized training: an initial level and an advanced level specific for the sexual crimes departments of the police force. This training is geared to a set of core areas in combating this type of crime: legal aspects, characteristics of victims and perpetrators; contexts of sexual assault; Internet and sexual assault; methodologies to interview victims and perpetrators; 2) Preparation of a manual of procedures to standardize professional practices; 3) Implementation, at national level, of a specific room to give assistance to victims of sexual assault; these rooms also seek to promote integration between the various professionals in the justice system work in the gathering of witness testimony.

Is it crime or peer sexuality? Reexamining the age of consent and perception of young adults on criminality of sexual acts among minors
Celik, M. Sarikaya, A. Faruk Ekinci, H. Ozdemir, and F. Gokcek

The perception on how and when minors are permitted to engage in sexual activity is varied throughout the history by authorities and society. The age of consent and its legal regulations also diverse from country to country. In United States of America, the common age of consent is 16. In Turkish criminal code, age of consent is set as 15. However, there is a need for more detailed law regulations, which is also considering peer sexuality and offenders age since it leads to complicated court cases for peers who had consensual sexual acts. Also, there is no clear data for public attitude towards the juvenile sexual acts.

Main purpose of the current study is to examine attitudes of young adults on how the manipulation of age, gender, consent, and severity of sexual acts will influence their perception on criminality of sexual acts.

The participants were 177 university students and data collected via online survey. The study was within subject design and participants rated the criminality of sexual acts indicated in vignettes in which the condition is varied by age (14-14, 14-16, 16-16), gender (female-male, female-female, male-male), consent
(consensual vs nonconsensual), and severity of sexual acts (kissing, fondling and penetration).

The results showed that there is a significant difference between consensual and non-consensual conditions for the participants’ perception on criminality \( t(145)=16.372, p<.000 \). Although there was no effect of age manipulation on the perception of criminality for consensual conditions, the severity of sexual acts was found to have a significant effect on the perception of criminality for consensual conditions \( F(2)=48.316, p<.000 \).

**Evidence-based assessment of child sexual and physical abuse in custody dispute cases**

Laajasalo Taina

A substantial minority of child sexual and physical abuse assessments includes families with comorbid custody issues and conflict between the parents. Investigating these allegations is highly complex and challenging, yet empirical data on evidence-based assessment of these cases is scarce.

The goal of this study is to describe a hypothesis testing method of assessing allegations of child sexual or physical abuse in cases with custody conflict where the other parent is the accused offender, and to describe the outcomes of the cases.

The data consists of 287 child sexual abuse and physical abuse cases assessed in the Forensic Center for Children and Adolescents in Helsinki between 2006-2013. The cases were assessed using the hypothesis testing framework and the children were interviewed using the NICHD interview protocol.

Cases involving a custody dispute \( n = 67, 24\% \) were compared with the rest of the sample on variables assessing the allegation, the psychosocial background and the outcome.

Custody dispute was associated with the case being non-confirmed. This association was stronger for allegations of sexual abuse than allegations of physical abuse. The majority of the non-confirmed cases showed indications of suggestive conversations between the parent and the child as well as misinterpretations of young children’s benign symptoms or behavior. However, deliberate manipulation was uncommon.

The majority of the allegations in families with custody dispute issues were not confirmed in this sample. Concluded explanations for the allegations were mostly “hybrid”, i.e. they included several factors contributing to the false allegation. Deliberate manipulation and alienation were rare. Support and intervention methods for these families are needed.

**Intervention with children victims of domestic violence in Portugal: Legal and regulatory framework, constraints and challenges**

P. Martins, A. Sani, N. Fernandes, C. Tomás, M. Tavares, and M. J. Gonçalves

In the last years, the phenomenon of domestic violence in Portugal has become more and more visible. Despite its high prevalence and disruptive consequences on families, procedures established for referrals and subsequent investigation and intervention are not unified across all services in the country, nor comply with the needs of families and, especially, of children involved.

The goal of this study is to characterize the procedures of evaluation, intervention and follow-up of these cases, identifying their strengths and weaknesses, as well as assessing their suitability and effectiveness.

19 potential key informants, selected on the basis of their involvement
in relevant services in this domain, were involved in semi-structured interviews across the country.

Despite the study is still ongoing, preliminary results indicate the absence of a concerted strategy focused on children, which fit their needs, allowing for an effective and individualized intervention, with respect for the principles of proportionality and opportunity.

A coordinated and integrated approach should be put in place in order to bringing together all the agencies involved in domestic violence work (e.g. Social Welfare, Health, Education, Employment, Police and Courts). Case management and well as long term counselling can assure opportune intervention and systematic follow-up.

**The impact of intimate partner violence on children**

**M. J. Martins and C. Baptista**

The intimate partner violence consists in behaviours within an intimate relationship that cause physical, sexual or psychological harm and often has severe negative impacts on the emotional well-being of the whole family with adverse effects on parenting skills. Some children exposed to intimate partner violence may exhibit increased rates of behavioural and emotional problems that can result in difficulties with education and employment.

The objectives of this study were: to evaluate the behavioural and emotional consequences of intimate partner violence on children, as perceived by their victimized mothers; to know their mother’s beliefs about the use of physical punishment in parent education; and to assess the impact of it on emotional and behavioural problems on children.

Participants were 68 mothers attending a department in the southeast of Portugal that give support to victims of intimate partner violence. Two questionnaires were administered after informed consent: Achenbach child behaviour checklist, parents’ version; the beliefs’ scale on physical punishment in parent education. The results were compared with data from normative population published by other authors using the same instruments.

Results reveal that: the children of these women have more internalized and externalized behavioural problems when compared with the normative population; these mothers believe more in physical punishment than mothers from normative studies; and there is a low but positive and statistically significant correlation between the beliefs in physical punishment and behavioural problems.

The stress of being a mother victim of intimate partner violence predisposes to be harsher in parenting education than other mothers.

**ORAL PRESENTATIONS “AGGRESSIVE BEHAVIOR AND MENTAL HEALTH PROBLEMS II”**

**Chair: Inês Relva**

**Psychopathologic symptoms among perpetrators and victims of sibling violence**

**I. Relva, O. M. Fernandes, and P. Lopes**

Siblings represent an important role on child development and personality (Toman, 1993; Fernandes, 2002). Several studies reports that violence among siblings may be the most common form of family violence (Steinmetz, 1977; Gelles & Straus, 1988; Relva, 2013) but it is still overlooked. Awareness of sibling abuse
as a serious form of family violence remains low. This study intent to explore (a) which conflict tactic resolution is correlated with psychopathologic symptomatology according to sex; (b) explore psychopathologic symptomatology according to sex and age; and also (c) explore if the use of conflict tactics resolution are a predictor of psychopathologic symptomatology, regarding the role position: victim or perpetrator of sibling aggression. We used Sociodemographic questionnaire: data were collected regarding age, gender, number of siblings, birth order, and level of education; The Revised Conflict Tactics Scale (CTS2–SP) sibling version (Straus et al., 1996) and also the Brief Symptom Inventory (Derogatis, 1982). The preliminary findings from the present study support early reports that violence among sibling may be the most common form of family violence. The results of this study confirm the association between sibling violence and psychopathology symptoms development. Intervention should be directed not only to victims but also to perpetrators of sibling violence.

### Drug Abuse among Peruvian young offenders: an evaluative research from a developmental approach

**H. Córdova**

As has happened in Latin America, the juvenile delinquency in Peru has increased significantly over the past 5 years (MINJUS, 2013). This unprecedented increase has been significantly exacerbated by a high percentage of juveniles who have problematic drinking and drug dependent (DEVIDA, 2012). According to the international literature (Killias & Ribeaud, 1999 and Farabee, et. al, 2001), there is an interdependent and complex relationship between drug use and crime. Using Developmental Criminology and Risk Assessment framework, and quantitative and qualitative methods of research; we analyze the possible relationships between antisocial behavior, drug use, and associated risk-protection factors to these both risk behaviors (Farrington, 2005). Furthermore, the effects of a non-residential program for drug intervention in young offenders were evaluated to identify if psychological variables such as personality characteristics and coping strategies, positively affect to drug abuse, using a quasi-experimental design. The findings were consistent with international evidence, highlighting the predictive ability of alcohol dependence on relapse and recidivism, coping styles as predictors of the risk of drug abuse, and criminal persistence associated with personality characteristics. The meanings, motivations and expectancies associated to use of drugs and to the antisocial behavior were consistent with the initial prevalence and with the intervention effects over the young offenders with and without treatment. It is hoped that the findings of this study contribute to the design of evidence-based interventions for young offenders in Peru.

### The Importance of Studying the adolescence age in offenders in the institute of Kosovo Forensic Psychiatry

**S. Haxhibeqiri, F. Drevinja, G. Halilaj, N. Fanaj, V. Haxhibeqiri, and S. Rexhepi**

Adolescence is considered in many studies as most important period for appearance of first serious the laws violations and also psychopathology related to them.

The goal of this study is to estimate with starting time of the laws violations, type and time of starting psychiatric disorders, presence of abuse and trauma to the offenders in IKFP.

It is a cross-sectional study in which 16 offenders, are set in IKFP aged from
20 to 42 years old ($M = 2.18; SD = 2.20$), gender, were interviewed and also analyzed their files in order to retrospectively analyze their period of adolescence. 50% of cases started laws violations before the age of 18. From them 12 were with psychiatric disorders (schizophrenia, personality disorders, etc.) which have started before age 20 years. 6 cases were present as substance abusers which has started before the age of 18. In two cases were describe the experience of abuse in childhood / adolescence and 4 cases was describe traumatic experiences in adolescence.

The adolescence period appears to be linked with cases comitted by offenders. More detailed studies, especially longitudinal nature are imposed.

**SYMPOSIUM “BREAKING THE WALLS”: BRING OUT IN EDUCATIVE CENTER**

**Chair: Conceição Condeço**

Young people in the Justice System are a particularly vulnerable group with several well identified risk factors.

Juvenile justice intervention in juvenile facilities limits the autonomy of young offenders and imposes rules in order to promote their normative development and social integration. Evidence has shown other risk factors associated with institutional life that merit consideration. Portuguese Juvenile Justice endeavors to take into account the overall adjustment of youths, the quality of their cognitive and emotional life, whilst targeting behaviors associated with crime prevention.

**Making Outcomes (In)**

C. Delgado

Prevention of risks factors associated with institutional life can be achieved by “breaking the walls” and letting in the outside. We assume that juvenile institutionalization is not about erasing the wrong from lives but dealing with it as part of life itself. Improving behavior in young offenders must be about choice and responsibility. In a demanding and structured environment sometimes the sense of the outer reality can be lost. Projects and people from the community within walls could minimize that risk inherent to institutionalization, creating a reality bubble in an artificial but necessary environment, with an ethological approach in mind to do better and minimize the risks of mental illness.

**The circus arts as an instrument to promote social inclusion and the civic empowerment of young offenders**

A. Peças

The NGO (non-governmental organization) CHAPITÔ is a multidisciplinary complex developing a continuous and multidisciplinary activity in three distinct but connected areas - Social Work, Art-Education and Culture.

CHAPITÔ has been working for more than three decades with young offenders, in cooperation with the Ministry of Justice, constructing new approaches to boost congruencies between the “state of the art” of social and political sciences and the re-educational practices carried out with young people under justice guardianship.

Circus and performing arts play a fundamental desideratum in the inclusion process. They are communicational, rigorous and challenging arts, sharing the same kind of margin and risk behaviors but socially validated and recognized. Sustained in Circus Arts as a tool to promote social inclusion, our presentation will focus on intervention with young offenders, and their civic, artistic and communicational empowerment, enhanced by this approach, opening “windows” where once towered “walls”.

5th EFCAP Congress, Porto, Portugal, 2016
Assessing an integration through art project  
L. Rocha, and T. Santos

It all began with five educational centers, an artistic project to be developed with the youngsters from those centers and a need to measure what the project offers these youngsters and the way it promotes their personal development. Why should they be involved in an artistic process? Which features in the project will enhance the youngsters’ personal development? For this project we tried to create an evaluation framework applicable to all the projects.

The participants are youngsters with ages ranging from 14 to 20 who are confined to educational centers as a corrective measure. Young people mainly originating from problematic neighborhoods and communities, where marginality and school dropouts are the reality.

Johnson’s Academy  
J. Semedo

Johnson’s Academy was established by Johnson Semedo, 42 years old, who lives in the Cova da Moura neighborhood. His life path, marked by deviant behaviors, led him to be charged with 10 years of imprisonment.

One of the academy’s main goals is the social reintegration of ex-convicts. The “1 Passo +” project aims to intervene in human development, with a group of young convicts, through informal education, promoting employability, offering legal counselling and involving both families and community, in order to prevent ex-convicts from reengaging in criminal behaviors in the process of returning to the active life.

SYMPOSIUM “RESULTS FROM THE ACADEMIC WORKPLACE FORENSIC CARE FOR YOUTH: COLLABORATION OF RESEARCH, PRACTICE, AND EDUCATION TO IMPROVE CARE”

Chair: Eva Mulder

The Academic Workplace Forensic Care for Youth is a collaboration of research, practice, and education. The aim is to improve forensic care for youth by changing diagnostic and treatment processes. This symposium will discuss three projects with examples of improvements in care and its accompanying research in juvenile justice institutions (JJIs). By means of an imaginary case, we will present research and implementation results.

The reliability of observation and the development of an observation checklist in two JJIs  
K. Lampe

Workdays in JJIs are often hectic. Among groupworkers, much knowledge about the youths is present, but remains little-used. Observation of, and reporting on the juveniles is unstructured nor directed at observing signs of mental disorders.

Objectives: Assessing whether observation of aggression can be reliably executed by developing an observation checklist for groupworkers.

We conducted a systematic literature review on inter-rater reliability (IRR) of the observation of aggression. Next, we developed a daily observation checklist to capture the information from groupworkers, including observable behavior contributing to diagnostic assessment. The checklist was implemented after extensive training. IRR was measured three and six months later.

Our review suggests that observation of aggression can be reliably execut-
ed. Noticeably, most research focused on non-participant observation, research on participant observation—foremost used in clinical practice—was sparse. Results on IRR and comparison of checklist data and self-report data will be presented. Observation can complement daily assessment in JJIs.

**Family-centered care (FC) in JJIs: quantitative and qualitative study**

_I. Simons_

The new program of FC for JJIs is evaluated during its implementation in short stay wards.

**Objectives:** To learn in which ways parents are involved during their child’s detention, if treatment motivation is related to involvement, and about parents’ needs regarding FC.

Youth ($N=164$) and parents ($N=57$) filled out questionnaires about family environment, parenting stress, and treatment motivation. Additionally, we interviewed 20 caregivers about current involvement, needs and expectations in involvement, and motivating strategies.

We will discuss characteristic of parents and their involvement. The majority of parents and adolescents are at least somewhat motivated for family meetings, even though they reported low on family-problems. All caregivers want to be involved, albeit in different intensity and frequency.

Caregivers agree that family-oriented care is important in JJIs. Practitioners face the challenge of tailoring family activities to parent’s needs. Implementing FC was the first step towards successful parental involvement.

**Development of a Decision Support Tool for treatment in JJIs**

_S. Hillege_

During treatment planning clinicians in JJIs consider, prioritize, and integrate offender characteristics, combining experience and scientific knowledge. To face this challenge, a tool is developed to support clinicians in the decision-making process.

**Objectives:** To find important domains in treatment trajectories of the adolescents and to detect profiles based on risk and protective factors.

Using the Delphi technique, consensus was reached on crucial domains in treatment planning among a group of 34 clinical forensic experts. Cluster analyses were used to detect distinctive profiles. Based on recidivism records, characteristics related to offending behavior were found for every subgroup.

Eight independent domains for treatment planning were found: Mental health problems, Personal characteristics, Family, Offense, Motivation, Treatment, School/Work/Housing and Peers/Spare-time. By cluster analyses seven profiles were distinguished, differing in recidivism rates and in risk factors predicting recidivism.

**Conclusions:** In treatment planning, different domains and risk profiles need to be considered.

**SYMPOSIUM “THERAPEUTIC CORNERSTONES OF AN ADOLESCENT FORENSIC UNIT”**

**Chair: Riittakerttu Kaltiala-Heino**

The adolescent forensic unit (EVA) in Tampere University Hospital is a 12 bed national tertiary level psychiatric service for adolescents with severe mental disorders and severe and persistent violent and con-compliant behaviors. The unit
is in operation since 2003. The aim of this symposium is to share our clinical experience and practices in therapeutic aggression management with these severely ill adolescents. Over the years, about 200 adolescents have been treated. The most prominent different patient groups are young people with florid early onset schizophrenia, with autism spectrum disorders, and with severe conduct disorders (emerging personality disorders). A comprehensive aggression management process, covering all aspects of the unit’s functions from safe physical environment to de-escalating social interactions, forms a frame for the assessment and treatment of the young people. In addition to serious impulse control problems, most of the young people have most deficient social skills, age inappropriate daily living skills, very thin social network, and severe academic problems. Cornerstones of therapeutic work are Aggression Replacement Training (ART) and adventure education. ART groups start several times a year, and ART techniques are modeled in every day interactions between the staff and the young people, as a good share of the nursing staff have completed group tutor education in ART. Adventure education approaches are used both in assessing the young people’s functioning and skills, and as part of the treatment to build positive self-esteem, social skills, problem solving skills and trust. ART and adventure education are used intertwined, and they support each other well. These treatments are attractive to the young people, and their feedback is mostly positive.

**Aggression management in an adolescent forensic unit**

R. Kaltiala-Heino

The adolescent forensic unit (EVA) in Tampere University Hospital is a 12 bed national tertiary level psychiatric service for adolescents with severe mental disorders and severe and persistent violent and con-compliant behaviors. The unit is in operation since 2003. Over the years, about 200 adolescents have been treated. The most prominent different patient groups are young people with florid early onset schizophrenia, with autism spectrum disorders, and with severe conduct disorders (emerging personality disorders). A comprehensive aggression management process, covering all aspects of the unit’s functions from safe physical environment to de-escalating social interactions, forms a frame for the assessment and treatment of the young people. In this presentation I shall describe the aggression management process and discuss the requirements set for management and leadership to ensure safety and obtainment of the therapeutic goals of a unit treating violence high risk severely ill adolescents.

**Aggression Replacement Training (ART) in adolescent forensic care**

T. Röning

Aggression Replacement Training (ART) is structured Cognitive Behavioral Therapy (CBT) group intervention that has been used with adolescents since 1990 worldwide. It has some research validity especially in institutional settings that it diminishes aggressive behavior and increases social competence. In Tampere University Hospital it has been an essential part of a structured aggression management process in adolescent forensic unit since 2003. It was chosen because most patients lack pro-social skills or/and have deficits of emotional regulation. ART is multichannel skills training program that contains training in social skills, anger control and moral reasoning. It is concrete and structured enough that even patients with learning disabilities and severe conduct disorders can successfully participate. Whole staff is trained to use ART, and 6-8 patients per year go through 15 weeks ART group. Clinical experiences have been satisfying. ART has given us a concrete tool to teach alternative skills in psychiatric hospital setting to adolescents with great variety of diagnoses who behave aggressively.
Adventure education in adolescent forensic care
V. Turunen

My name is Ville Turunen and I am an occupational therapist. I use adventure educational frame of reference to guide my work with adolescents presenting with violent and noncompliant behaviours in the context of severe mental disorders.

Main goal for this program is to teach and help our patients to take responsibility for their choices and be a master of themselves and their lives. Adolescents often have a thought that they have no control or influence for their own life.

Adventure education program in EVA-unit consist of different kind of projects, such a day excursions, overnight excursions and sometimes even longer excursions. We use activities like sailing, camping, alpine skiing, rock climbing, paddling, bmx-biking etc. regularly to achieve our goals. Every project and every goal is planned with the adolescents from the very beginning. That is the way to bond and motivate person or group to our mutual goals.

17:45-18:30 – PLENARY SESSION IV

Children’s rights perspective on the mental health needs of young offenders and victims
Ton Lieffard
Abstract not available.

17:45-18:55 – SYMPOSIUM

SYMPOSIUM “FROM NATIONAL POLICY IN HARMFUL SEXUAL BEHAVIOUR TO CLINICAL PRACTICE: MIND THE GAPS!”

Chair: Abdullah Kraam

Developing National Guidelines on Harmful Sexual Behaviour in England: a sneak preview
A. Kraam

The author is a topic expert member of the public health advisory committee of the National Institute for Health and Care Excellence (NICE), which is in the process of developing harmful sexual behaviour guidelines for children and young people who display harmful sexual behaviour.

NICE was originally set up in 1999 as the National Institute for Clinical Excellence, a special health authority, to reduce variation in the availability and quality of NHS (National Health Service) treatments and care. In April 2013 it became a Non Departmental Public Body (NDPB) and its remit broadened to developing guidance and quality standards in social care as well as health.

In 2015 the department of health in England asked NICE to develop a public health guideline aimed at helping those working in health, youth justice, education and social care services to identify and support children and young people who display harmful sexual behaviour. The author was appointed as a topic expert member to the committee and would like to share his experience of the process of developing guidelines, which are aimed to improve standards of care in England and beyond.

5th EFCAP Congress, Porto, Portugal, 2016
The guidelines are anticipated to be published in September 2016. A first consultation draft will be in the public domain in February 2016.

**Developing a Service Specification for Harmful Sexual Behaviour Services in the Secure Estate for Young People: commissioner and clinicians working together**

P. Phillips

The first author was a clinical advisor for NHS (National Health Service) England and helped to develop a service specification for harmful sexual behaviour services for a secure children’s home and Youth Offending Institute in North of England. The second author is a commissioner of NHS England.

Secure children’s homes in England provide a range of services within a secure environment that support the individual needs of the children in its care. They provide placements for boys and girls aged between 10 and 17. Young people are accommodated either via the criminal justice route or on a welfare order. Young offenders over the age of 15 will usually be placed in a young offender institution.

The service specification was the first of its kind in England which addressed the needs of those children, who display harmful sexual behaviour and are within a custodial/secure environment. This talk will illustrate the importance and advantages of clinically guided and informed service commissioning.

**From Policy to Practice: Welcome to the real world**

B. Whisker

The Focus Team is a multi-disciplinary Forensic Child and Adolescent Mental Health Service, based in Wakefield, West Yorkshire. The team is responsible for providing community FCAMHS within the Wakefield district and from October 2014, were commissioned by NHS England to provide Harmful Sexual Behaviour Services (later expanding to all Forensic CAMHS) within the Youth Secure Estate across Yorkshire and Humber.

The team operates a consultative model, incorporating consultation, assessment, intervention and joint working. All referrals to the team undergo a consultation, if clinically indicated; assessments also include screening for neurodevelopmental disorders, in-depth assessment for neurodisability and forensic specialist assessment. Evidence based individually tailored Harmful Sexual Behaviour intervention programmes are also provided to young people on an individual basis.

This talk will explore the implementation of Harmful Sexual Behaviour services within youth secure settings (both a secure children’s home and a young offenders institution) and adjustments required for each setting, exploring key considerations for practice including transitions between settings incorporating both custody and the community, implementing and adapting services for a typically hard to reach population, supporting the management of immediate risk issues and involving establishment staff, families and key professionals to support a systemic approach to addressing harmful sexual behavior.
Developmentally appropriate investigative interviewing  
Michael Lamb

Because child sexual abuse usually takes place in private, without witnesses other than the participants, abused children are often the only available sources of information about their experiences. Unfortunately, victims, especially those who are young, often provide very limited information, and this inhibits both legal (criminal) and social service intervention. Our research has focused on describing the factors that affect children’s informativeness, illustrating the ineffective techniques typically employed by interviewers, and developing ways of improving the quality and value of forensic interviews by making maximal use of children’s capacities and tendencies. This programme of research, including field assessments of its utility, will be described in the address.

SYMPOSIUM “EUROPEAN LONGITUDINAL STUDIES OF OFFENDING”

Chair: David Farrington

In this symposium, four papers are presented. First, Antonio Castro Fonseca presents results from a longitudinal study in Coimbra, Portugal. He investigates the later antisocial behaviour, learning difficulties, hyperactivity and other mental health problems of 448 children who were socially rejected in second grade. Second, Britta af Klinteberg presents results from the Stockholm Birth Cohort Study of 14,194 children born in 1953. She investigates relationships between family psychosocial characteristics in childhood and the children’s later development into criminal behaviour and their later mortality. Third, Henrik Elonenimo presents results from the FinnCrime study of 5,405 children born in Finland in 1981. He finds that many psychosocial problems in childhood predict later offending. Fourth, Maria Ttofi presents results from the Cambridge Study in Delinquent Development, which is a longitudinal study of 411 London males and 551 of their adult children. She shows to what extent self-reported offending by the males predict later self-reported offending by their sons.

Adult outcomes of social rejection in childhood  
A. C. Fonseca, M. Oliveira, and J. T. Silva

The belief that early social rejection causes significant impairments in people’s lives is documented in scientific reports and popular media.

Yet several authors have recently pointed out important methodological flaws in previous studies that render their findings sometimes difficult to explain.

This communication aims to present data from a Portuguese study on the prevalence of social rejection in middle childhood, its relative stability, and its outcomes in several domains across adolescence/adulthood, including antisocial behavior, academic achievement and mental health problems.

Participants were 448 boys and girls recruited from primary public schools in Coimbra, and followed until their late twenties.

Based on information from parents and teachers (Achenbach’s CBCL&TRF)
pupils were classified in three groups of social rejection (recurrent, occasional and not rejected) in primary school. To assess their future level of (mal) adjustment, we used an interview, a self-report measure of psychopathology (Achenbach’s YSR & ASR) and a scale of delinquency.

Only a few pupils (5%) experienced recurrent social rejection in second grade but they scored significantly worse than their peers in antisocial behavior, learning difficulties, hyperactivity and other mental health problems. Further longitudinal analyses revealed a more complex picture: the impact of early social rejection decreased with age. Thus, among young adulthood, significant differences were found only for academic achievement... and hey disappeared when we controlled for other concomitant variables (e.g. children’s attention problems).

The negative consequences of peer rejection in antisocial behaviour and other forms of maladjustment seems confined to childhood and mid-adolescence - the time of compulsory schooling. With the transition to adulthood that influence diminishes and seems to be better explained by other pre-existing variables.

Family psychosocial characteristics influencing criminal behaviour and mortality

B. Klinteberg, Y. Almquist, U. Beijer, and P. Rydelius

Objective: To explore possible relationships between family psychosocial characteristics in childhood and the children’s development into criminal behaviour and mortality. Further, alcohol and/or drug use and mental problems were examined as possible mediating factors, highlighting gender-specific patterns.

Methods: Data from Swedish subjects born in 1953 (n = 14,294) from the Stockholm Birth Cohort study were examined. Several indicators of adverse family factors and individual problems were included, and the information was derived from various data sources, covering different periods. Gender-specific associations with incidence of criminality (1966-1980) and mortality (1981-2009) were analysed using logistic regression. Furthermore, the population attributable fraction (PAF) was calculated for all variables in the fully adjusted models which were positively related to the outcome.

Results: All aspects of family psychosocial and individual problems studied were associated with criminality for both genders. Among males, individual problems seemed to partly mediate these relations, but the associations remained statistically significant. Interestingly, the PAF analysis revealed a reduction in criminality of 17.5% when individual problems with alcohol and/or drug use were considered. Among females, a significant impact of alcohol and/or drug use on the association between family psychosocial characteristics and subsequent criminality was obtained. Concerning male mortality, father’s alcohol abuse was significantly related to an increased risk. When individual criminality was accounted for, the association was substantially reduced but remained statistically significant. Among females, when adjusting for family psychosocial factors, only the association between parents’ mental problems and females’ mortality was significant.

Conclusions: Family psychosocial characteristics were associated with both subsequent criminal behaviour and mortality. These connections were partly explained by individual risk factors, especially by alcohol and/or drug use, pointing to the importance of addressing the individual’s alcohol and/or drug use in reducing criminal behaviour, which would also lower the mortality rates. Further underlying mechanisms will be discussed.
What does the FinnCrime Study tell about crime?
H. Elonheimo, D. Gyllenberg, L. Sillanmäki, J. Huttunen, T. Ristikari, and A. Sourander

Background: The context of the FinnCrime Study is developmental, life-course, and epidemiological criminology.

Objectives: To find out facts about the occurrence and psychosocial causes and correlates of crime.

Methods: The population-based longitudinal study includes 5,405 females and males born all over Finland in 1981. Information on psychosocial risk factors was gathered at age 8 by questionnaires to children, parents, and teachers. The instruments relied on CDI and Rutter questionnaires. When the males entered the military call-up at age 18, they filled questionnaires again (Young Adult Self-Report). Information on psychiatric disorders of the males was obtained from the military register for ages 18-23. Data on crime at ages 15-30 were received from the Finnish National Police Register (minor traffic offending excluded from all analyses). Information on mortality up to age 30 was received from Statistics Finland.

Results: Of males, 60% and of females, 25% were registered for offending. Crime concentrates heavily in a small group, as just one per cent committed 42% of all crimes. (Elonheimo et al. 2014) A wide range of psychosocial problems in childhood (Sourander et al. 2006), adolescence (Elonheimo et al. 2009, 2011) and early adulthood (Elonheimo et al. 2007) were related particularly to active offenders. Problems encountered by this group culminated in high mortality (Elonheimo et al. 2015).

Conclusions: The strong associations between crime and various psychosocial problems emphasize the need for rehabilitative efforts in criminal policy. The fact that risk factors could be observed already in childhood supports early prevention.

Intergenerational Transmission of Self-Reported Offending
M. M. Ttofi and D. P. Farrington

In the Cambridge Study in Delinquent Development, 411 London males have been followed up from age 8 to age 48 in interviews and from age 10 to age 56 in criminal records. These males are now termed generation 2 (G2), while their biological parents are termed generation 1 (G1), and their biological children are termed generation 3 (G3). Between 2004 and 2013, 551 out of 653 G3 children aged at least 18 (84%) were interviewed at an average age of 25. In this paper, the self-reports of offending by the G3 males are compared with the self-reports of offending by the G2 males at ages 18 and 32. There was evidence of intergenerational transmission of self-reported burglary, theft from vehicles, assault, marijuana use, and motoring offenses. This paper also investigates possible mediators between G2 and G3 self-reports of offending.

SYMPOSIUM “FORENSIC CAMHS IN THE UK: A DESCRIPTION OF SERVICES”

Chair: Oliver White

This symposium will give a descriptive account of the different Forensic CAMHS services in the UK via three presentations which will each focus on a specific area:
- Community Forensic CAMHS
- Mental health inreach in a Young Offenders’ Institution
- Medium secure hospital inpatient
Each presentation will give details regarding the specific service, the national provision within the UK of the different services, how each service fits into an overall Forensic CAMHS pathway, and service evaluation / outcome measures.

**Community Forensic CAMHS in the UK: a model for the future?**  
**O. White**  
This presentation will describe the role and functioning of the Thames Valley Community Forensic CAMHS Team based in Oxford, UK that covers a population of 2.2 million. The consultation liaison model will be explained and details regarding the interface between generic CAMHS, Social Care Children’s Services, Youth Offending Teams, secure hospitals, and mental health inreach will be outlined. The presentation will include details regarding service evaluation. Opportunities for national provision of this model of Community Forensic CAMHS will be discussed.

**Mental health inreach for young people: working within a prison**  
**H. Hales**  
This presentation will describe the role and functioning of the Health & Wellbeing Team (mental health inreach) based within Cookham Wood Young Offenders’ Institution in Rochester, Kent, UK. The model of care and MDT working within detention settings for young people in England will be outlined. The interface with criminal courts, mental health inpatient care, and community CAMHS in the UK will be discussed. Difficulties arising and the journey of travel to improve these services will be discussed. Input will be invited from the delegates to enable us all to learn from each other.

**Medium secure inpatient treatment for young people: a national provision**  
**J. Preston**  
This presentation will describe the role and functioning of the National Secure Forensic Mental Health Service for Young People in England, UK. The six units within the network of medium secure care will be described, including how the unit’s different roles and functioning result in an overall comprehensive service. One model of care will be described in detail. The interface with other aspects of the Forensic CAMHS pathway will be described. National outcome measures will be presented and discussed.

**SYMPOSIUM “JUVENILES WHO SEXUALLY OFFENDED: SUBTYPES AND OFFENSE CHARACTERISTICS”**

**Chairs: Marcel Aebi and Cornelia Bessler**

**Patterns of Adverse Childhood Experiences in Juvenile Sexual Offenders and their Relations to Offense Characteristics**  
**S. Barra, C. Besser, M. Landolt, and M. Aebi**  
Adverse childhood experiences (ACE) have been linked to an elevated risk of sexual offending in adolescents. Most research has focused on the role of experienced sexual victimization while other types of ACE were not considered in the analyses. Furthermore, previous studies were often limited to selective samples and to self-reports from Juvenile Sexual Offenders (JSO). First, the study of distinct classes of JSO according to their ACE profiles based on the occurrence of 10 different ACE types (e.g., parental emotional and physical abuse/neglect, peer aggression, or sexual abuse). Second, the study of the relations between ACE sub-
types and sexual offense characteristics. The current study is based on an extensive analysis of the juridical and medical files from 322 male JSOs between 8.5 and 18.5 years (M = 14.14, SD = 1.94) living in Switzerland. Latent Class Analysis was performed in Mplus 7 using maximum likelihood estimates. Relations between latent ACE-classes and offense characteristics were tested by the use of logistic regression. Preliminary results identified five classes of JSOs with (1) multiple ACE (9.0%), (2) mainly family-related ACE (17.1%), (3) mainly peer-related ACE (21.7%), (4) mainly experiences of neglect (18.6%), and (5) little or no ACE (33.5%). Distinct associations of these subtypes with offense characteristics are currently being analyzed and will be presented at the congress. JSOs display a heterogeneous group with distinct patterns of ACE. A substantial number of JSO have experienced family and peer related forms of abuse and neglect. Results indicate that a comprehensive assessment of ACE is needed both in research and therapy with JSOs to understand developmental pathways of sexual offending.

Psychopathic disturbances among subgroups of serious and violent youth: specificities of adolescent’s sexual offenders
R. Barroso
Few studies have investigated the presence and prevalence of psychopathic traits among subgroups of serious and violent youth and more specifically between different subtypes of juvenile’s sex offenders (JSO). Some have argued that all delinquents groups are similar regarding this dimension with no significant differences between all. For others, however, psychopathy and psychopathic traits are an integrated part of sexual violence and a specific difference between JSO and non-sex offenders (JN-SO). Evaluate the presence and prevalence of psychopathic disturbances in a sample of incarcerated JSO (child molesters and rapists) and comparing this with other types of serious and violent youth. The present study examined the dimensions and prevalence of psychopathy using the Psychopathy Checklist: Youth Version (PCL: YV) in a Portuguese sample of serious and violent incarcerated youth. Two hundred and seventy participants aged 13 to 19 years (M= 14.6; DP= 1.4) voluntarily participate in the study. Concretely, 140 JN-SO and 130 JSO (64 rapists and 76 child molesters). The findings indicated that, in this sample, JN-SO had a significantly higher prevalence of psychopathy compared to JSO, both for the total score PCL: YV as for the behavioral dimension of it. Regarding the differentiation between child molesters and rapists, the results do not suggest significant differences, although child molesters have a higher prevalence of high psychopathic traits. Psychopathic traits appear to be strong indicators of differentiation between the JN-SO and subgroups of JSO.

Leaders and followers in juvenile multiple perpetrator sexual offending (MPSO)
T. da Silva, and J. Woodhams
It is important to examine roles in MPSO as it has been suggested that leaders could have different criminogenic and treatment needs, and higher risk levels of reoffending than followers. The Scale of Influence (SoI) (Porter & Alison, 2001) was developed to identifying leadership and has previously been applied to MPSO. Using specific criteria it classifies offenders as leaders, followers or neither. Objectives: Identify leaders and followers in a juvenile sample using the SoI. Method: The SoI was applied to a total sample of 41 accounts of juvenile MPSO from Portugal (17) and the Netherlands (24). The results of the scale were compared to classifications made by a practitioner to assess concordance. Since some of the offenders were interviewed and they were asked if they considered
that there was a leader and followers in their offence, the results were also compared to their opinions. Results suggested the SoI was able to identify a leader in the majority of the offences and there was great concordance between it and the practitioner’s opinion. However, there were some differences when compared to the offenders’ opinions. These findings suggest that it is possible to identify leaders and followers in MPSO. However, it could be that there are other ways that leadership can be demonstrated that aren’t taken into account by the SoI. Additionally, offenders may have different opinions of what the characteristics of leaders are which should be further researched and taken into account in treatment interventions.

**Juveniles, Internet & Sexual Offending**  
A. Boonmann, A. Grudzinskas, and M. Aebi

Since the commercialization of the Internet, access to sexually explicit material became simple, anonymous, and largely free. This raised public concern for possible negative effects of Internet pornography, especially in childhood and adolescence. The use of or exposure to pornography is allegedly linked to sexual delinquent behavior in adolescence. Moreover, although adults commit most online sex offenses, it is suggested that adolescents are responsible for a substantial part. However, few studies examined the effect of the Internet on juvenile sexual offending behavior. The aim of the current study was to give an overview of the research on juveniles, Internet and sexual offending. We conducted a computerized search of several relevant databases. It should be taken into account that this is not a systematic review; results are not comprehensive. Research on Internet pornography in sexual offending juveniles is limited. The use of or exposure to Internet pornography is likely to be related to both sexual and general offending behavior. Sexually offending juveniles, however, seem to be exposed to pornography more often than non-sexually offending youths. Subsequently, research on juvenile online sexual offending (e.g., child pornography offenses, sexting, online sexual harassment) is scarce too. Juvenile child pornography offenders appear to have fewer problems than juveniles who committed other sex offenses, but tend to have more internalizing problems. As young people are increasingly engaged in new media (e.g., social media) and Internet content, more research on the effect of the Internet on juvenile sexual offending behavior is warranted.

**ORAL PRESENTATIONS “RESEARCH ON MENTAL HEALTH PROBLEMS AND ASSOCIATED VARIABLES II”**

**Chair: Paula Castilho**

**Oppositional Defiant Disorder (ODD) and Conduct Disorder (CD): Empathy, anxiety and self-regulation**  
J. Pijper, M. de Wied, S. van Rijn, H. Swaab, S. van Goozen, and W. Meeus

Studies have been conducted to investigate empathy problems in ODD/CD children with callous unemotional traits (CU). However, little attention has been giving to ODD/CD children without these traits, who may experience empathy problems because of anxiety and/or poor self-regulation (De Wied et al., 2010). It has been argued that optimally regulated people are prone to sympathy, while poor-regulated people, especially those susceptible for intense negative emotions, are prone to personal distress to others distress cues (e.g., Eisenberg & Eggum, 2009). Studies have suggested poor self-regulation in ODD/CD children
(Beauchaine, 2015). They may therefore be low in sympathy and more prone to personal distress – particularly those with comorbid anxiety disorder. Anxiety may predispose them to become easily over aroused by distressing situations (Alcozei et al., 2015).

This study investigates whether associations between self-regulation and empathy-related responses are different for ODD/CD boys with or without comorbid anxiety disorder.

Clinically referred ODD/CD boys with (n=32) and without (n=19) comorbid anxiety participated. Empathy-inducing film clips portraying sadness were used. Heart rate was assessed during the clips; self-reports were assessed afterwards. Self-regulation was assessed with an attentional flexibility task and resting respiratory sinus arrhythmia.

Findings will be discussed of regression analyses testing effects of group, self-regulation, and interaction between group and self-regulation on empathy-related responses.

This is a first study testing whether anxiety and self-regulation are related to empathy in ODD/CD boys without CU traits.

Characterizing the Process Underlying Emotion Recognition Deficits in Adolescents with Conduct Disorder
N. A. Martin-Key, W. J. Adams, E.W. Graf, and G. F. Fairchild

Conduct disorder (CD) involves a pervasive and persistent pattern of disruptive behaviour. Many individuals with CD also display callous-unemotional (CU) traits. Although research has demonstrated that adolescents with CD or CU traits exhibit impairments in recognising emotional facial expressions, it is unclear whether these deficits would be seen for more ecologically valid stimuli. Furthermore, it is uncertain whether these impairments are related to attentional or appraisal difficulties.

The goal of this study is to characterise emotion recognition in adolescents with CD with varying levels of CU traits.

Forty-five typically-developing (TD) and 43 CD (24 high CU, 19 low CU) adolescents were assessed. Participants’ attention to and ability to recognise emotions from dynamic and static facial expressions with varying intensities was examined using behavioural responses (emotion categorisation) and eye-tracking.

Adolescents with CD showed impaired emotion recognition compared with TD subjects, particularly for negative emotions. Such difficulties were observed using both static and dynamic stimuli. Although not statistically significant, there was some evidence that the CD subjects showed reduced attention to the eye-region of the face. These findings did not appear to be modulated by emotional intensity or CU traits.

Adolescents with CD show deficits in facial expression recognition regardless of whether static or dynamic stimuli are used – particularly for negative emotions. These deficits are observed in adolescents with CD in general, rather than just those with CU traits. The eye-tracking data suggest that attentional problems partly drive recognition deficits, which has implications for emotion-based interventions.

Error related brain activity, cannabis use, and internalizing and externalizing problems in multiproblem young adults

Multiproblem young adults suffer from heterogeneous problems, amongst
which substance abuse, and both internalizing and externalizing problems, but are an understudied population. Error related brain activity as measured in the encephalogram (EEG), has previously been found to be positively related to internalizing problems and negatively related to both externalizing problems and substance abuse.

We intend to investigate the relationship between error related brain activity and problems associated with abnormal brain functioning within a group of multiproblem young adults.

In total, 61 male multiproblem young adults were included of which 48 the data were used. Participants performed an Eriksen Flanker task, designed to elicit both correct and erroneous responses. Addiction was measured with the Measurements in the Addictions for Triage and Evaluation (MATE). Internalizing and externalizing problems were assessed using the Adult Self Report (ASR).

A linear regression model with cannabis use, internalizing problems, and externalizing problems was able to explain 27% of the variance ($F(1,45) = 16.68, p<.001$, with cannabis use being the only significant predictor ($p<.001, \beta = 0.53$). Note that results are preliminary and that 100 participants are expected to be included by April 2016.

The results suggest that there is a large relation between cannabis abuse and error related brain activity, but that general internalizing and externalizing problems are not predictive of the ERN. This may be due to the expected opposite effects of internalizing and externalizing problems, additional analyses may shed light on this issue.

The evolutionary roots of psychopathy: An explicative model of the impact of shame coping strategies

D. Ribeiro da Silva, P. Vagos and D. Rijo

Shame seems to play an important role in the association between highly hostile rearing scenarios and several psychopathological outcomes. Psychopathy, marked by a lack of emotion, seems to be one exception of this assumption. However, some authors claim that psychopathy could be the reflection of a tendency to externalize the experience of unpleasant emotions. This study tests an explicative model involving the mediating role of shame and shame coping strategies in the association between early experiences and psychopathic traits.

Method: A community sample of 320 male youth and a clinical sample of 307 male youth with conduct disorder were collected using self-report measures to assess: early experiences (CES and EMWSS); shame (OAS); shame coping strategies (CoSS); and psychopathic traits (YPI). Data analyses relied on structural equation modelling, where early memories were considered independent variables, psychopathic traits were taken as dependent variables, and shame and shame coping strategies entered as mediators in this association.

Results show that early experiences directly and indirectly (through shame and shame coping styles) predicted psychopathic traits. Differences between groups were also found.

These results suggest that psychopathic traits may result from externalizing strategies to handle shame and could be seen as an adaptive strategy in adverse rearing environments. Results also support the use of compassion approaches to treat youth with psychopathic traits.
Shame memories and paranoia among sexual offenders: The role of external shame
P. Castilho, L. Palmeira, A. Pinto, L. Fonseca, J. Amílcar, E. Mendes, and G. Santos

Literature has consistently pointed out the pathogenic effects of shame memories and shame feelings on psychopathological symptoms. Shame is thought to emerge from early negative experiences (such as: harsh criticism, threat, submission and verbal, physical or sexual abuse) within the family. These experiences can become internalized and encoded as shame traumatic memories. Additionally, some empirical evidence states that paranoia is associated with a social competitive mentality, especially external shame. Several studies showed that early insecure attachment, rejection by parents and sexual abuse during childhood may be associated with inappropriate sexual behaviors in adulthood. Furthermore, it has been suggested that sexual offenders mind’s is suspicious and fearful.

This study aims to explore the relationship between early shame memories during childhood, external shame, psychopathological symptoms and paranoid beliefs, in a Portuguese sample of sexual offenders. Specifically, the goal was to examine the impact of shame memories and external shame on paranoid beliefs, and test if external shame plays a mediator effect on the relationship between early shame memories and paranoid beliefs.

The sample comprises fourteen adult males seeking treatment for sexual abuse behavior in CHUC. Participants completed a battery of self-report questionnaires. Data analyses were carried out using SPSS and PROCESS Macro for SPSS.

Results revealed that paranoid beliefs were associated with early shame experiences, current shame feelings, depressive symptoms and high interpersonal sensitivity. Also, the mediation analysis showed that current feelings of shame mediate the association between shame memories in childhood and current paranoid beliefs. Despite some methodological limitations should be considered, our findings highlight the role of external shame on the relationship between shame memories and paranoid beliefs. Moreover, our results emphasize the importance of addressing external shame when working with sexual offenders.

SYMPOSIUM “CHALLENGES IN SECURE TREATMENT AND YOUTH PRISON FOR ADOLESCENTS”

Chair: Peer van der Helm

Treatment quality and treatment motivation of adolescents in secure residential youthcare and youth prison faces several major challenges which are addressed in this symposium. Using empirical research results from the Netherlands we focus first on repression in secure surroundings (systematic review) and children’s rights. But also, children can influence each other positively and negatively during treatment and incarceration. The session ends with research on these influences on treatment motivation, working alliance, social problem situations and aggression.

Repression in (secure) residential youth care, results of a systematic review and multi-level analysis
S. de Valk, and C. Kuiper

Repression is a much debated phenomenon in secure residential youth care and youth prison, because empirical results show repression to have a negative influence on treatment motivation, empathy and aggression (Heynen et al., 2015).
One of the problems is the fuzzy nature of the construct. To be able to recognize and counter repression in practice a clear definition is needed.

Using a systematic review method more than 189 articles were gathered and analysed. With a multi-level analysis the definition and underlying processes are tested.

Results and conclusions show repression to be the result of a series of transactional processes between youths, staff and the organisation. Implications for practice are discussed.

Children rights in secure residential care
S. Hofte, and C. Forder
In secure residential treatment and youth prisons children’s rights are often overlooked through lack of knowledge by staff (Hofte et al., 2012), resulting often in coercion and having a detrimental effect on treatment motivation (Parjar, 2012). We argue more empirical research is urgently needed on this matter.

Using results of questionnaires (n= 300) and interviews (n=250) coded according to the International Treaty of Children’s Rights an overview of the current situation on children’s rights was assessed.

Results show a lack of children’s rights in secure residential youthcare and youth prison in several area’s but notably on individual freedom, freedom of speech and education. We propose staff should be more conscious of children’s rights.

Peer influences in secure residential care, positive or negative?
J. Sonderman, and F. Bekken
Mandated secure treatment of adolescents in groups is not without debate (Souverein 2011). Some researchers argue efficacy of group treatment is compromised by ‘deviancy training’ (negative group dynamics) others also point to adolescents having a positive influence on each other but little empirical research in mandated secure treatment is available. Further, the quality of the living group climate can be compromised by negative group dynamics like bullying, hitting, gos-sip, destroying others properties, threatening others and social isolation by ignoring others. In order to shed more light on this debate we developed a questionnaire asking adolescents about group dynamics in secure treatment with girls and boys in the Netherlands.

We interviewed 100 boys and girls and performed a literature study. From this we devised a questionnaire containing 3 subscales with 17 items containing positive and negative mutual influence. We collected 600 questionnaires (300 boys and 300 girls) and performed a confirmative factor analysis and checked scales for reliability.

The questionnaire showed a good fit to the data and excellent reliability. From the results it was derived boys and girls rated positive group dynamics significantly higher than negative group dynamics. Also the questionnaire can be used for making improvements to group dynamics in secure treatment and the living group climate.

Treatment motivation, social problem situation and aggression in a Dutch Youth prison, results from a longitudinal study
T. de Jong, and E. Eltink
Quality of services in youth prison and living group climate is related to treatment motivation, aggressive responses to social problem situations and aggression in youth prison.

In two studies, using a longitudinal n=1 multiple repeated measures design
in a Dutch Youth Prison, starting with n=150 and 18 waves of measurement living group climate, treatment motivation social problem situation and aggression were assessed.

Results and conclusions show living group climate, treatment motivation social problem situation and aggression to be related longitudinally. Implications for practice are discussed.

**Therapeutic Alliance, treatment motivation and development in arts therapy with juvenile offenders in Dutch detention**

E. Heynen, and S. van Hooren

In the Netherlands there are about 4,000 residential youth each year, many of them receive some kind of arts therapies (i.e. art-, music-, drama-, dance- or movement therapy) during their residential stay. In previous studies, Arts therapies have shown to be an effective alternative treatment to cognitive behavioral therapies in mental health services. Results of several studies now indicate that the quality of the therapeutic alliance has a significant impact on treatment outcomes, therapy drop-out, recidivism reduction, positive treatment results, and treatment motivation. Besides, this may even be more predictive for positive therapy results than the type of the intervention. However, establishing a positive therapeutic alliance as well as treatment motivation is a difficult task for all professionals and evidence based research to detect what aspects are essential for creating an optimal therapeutic alliance is still sparse.

In the present study, a measurement instrument was developed to investigate the components of a therapeutic alliance within youth and arts therapists working with a shared medium, to gain more insight in the processes of building a therapeutic alliance. Next, using this validated measurement instrument, we investigated the effects of the therapeutic alliance on treatment motivation and treatment outcomes of juveniles in residential care after receiving arts therapies. Results show art therapy to be related to more therapeutic alliance.

**SYMPOSIUM “TOWARDS A TRANSLATIONAL APPROACH OF DISRUPTIVE BEHAVIOR DISORDERS?”**

Chair: Diane Purper-Ouakil

Disruptive behavior disorders (DBD) are the most common reason for referral to child and adolescent mental health services. DBD are heterogenous in both clinical presentation and outcome and involve impairments in brain and autonomic nervous system functions. This symposium aims at a better understanding of clinical relevant dimensions of DBD and their neurobiological underpinnings through a multidisciplinary strategy using animal models, gene-environment interactions and epigenetics. This translational approach is also used in MATRICS, a EU-funded project aiming to deconstruct current diagnostic schemes of DBD by adopting a bottom-up approach, mapping neural functions onto observed clinical signs and symptoms, using different levels of analysis (e.g., genes, proteins, physiological activity, brain imaging, behaviour, and self-reports of symptoms) to define the key constructs. Speakers of this symposium are either involved in the MATRICS (Multidisciplinary Approaches to Translational Research In Conduct Syndromes) consortium or come from related research fields to enhance our understanding of mechanisms involved in DBD in order to develop prevention and therapeutic strategies.
Dimensional aspects of disruptive behavior disorders
U. Schulze

While young children not uncommonly show certain aggressive behaviors, they usually should have learned to inhibit these during later years according to their further socialization. This implies among others the formation of an adequate cognitive impulse control and the development of empathy and a sense of morality. Children who aren’t able to pass this development steps successfully due to several etiological factors, are at risk of appearing pathological aggressive and rule denying in terms of a psychiatric disorder (e.g. conduct disorder). Despite of an apparent outward homogeneity of prominent behaviour, its causes might be rather complex and thus far aren’t literally and satisfactorily understood. Therefore, therapeutic approaches are also still limited. Introducing the following contributions, essential etiological factors of disruptive behaviour disorders are explained and associated from the perspective of dimensional aspects.

Imaging-epigenetics: animal models of aggressions and antisociality

The murine BALB/cJ mouse has been reported to exhibit aggressive behavior when compared to its genetically related substrain; the BALB/cByJ mouse. Using the resident-intruder task, increased pathological aggression (reduced attack latency and atypical pattern of bites), translational to aggression observed in CD, was observed in the BALB/cJ mouse. Phenotyping of anxiety behaviors demonstrate increased freezing behavior in the open field test, increased preference for the closed arms in the elevated plus maze in BALB/cJ versus BALB/cByJ. Furthermore, BALB/cJ mice exhibited lower serum levels of the steroid hormone corticosterone after the resident intruder test, which is similar to decreased levels of cortisol noted in children with CD.

Our data indicates that pathological aggression observed in the BALB/cJ mice may be related to structural, transcriptomic, microRNA and neurochemical changes decreasing attention such that BALB/cJ mice are insensitive to environmental cues resulting in inappropriate behavior such as aggression.

Role of gene-environment interactions in disruptive behavior disorders
P. Hoekstra

Conduct disorders are highly prevalent and involve a complex etiology. We aimed to summarize and expand current knowledge about the role of the maternal lifestyle during pregnancy by conducting meta-analyses on the relationship between cigarette smoking, alcohol consumption, cannabis use, caffeine intake, and psychosocial stress during pregnancy and offspring conduct problems.

Three large databases (MEDLINE, EMBASE, and PsycINFO) were searched systematically and a total of 30 studies were identified. Meta analyses were performed using a fixed or random effects model, based on heterogeneity assessment. Both overall and differential exposure effects were assessed as appropriate. Crude and adjusted effects were calculated.

The current meta-analyses provide evidence for an effect of both maternal cigarette smoking and alcohol use during pregnancy on offspring conduct problems. Two studies suggest a dose-effect of alcohol use. No effects of cannabis or caffeine, and only a subtle effect of psychosocial stress during pregnancy were reported. Future studies should aim for a balanced representation of both sexes, sibling designs, and focus on traits rather than DSM-defined disorders. More studies should specifically investigate the role of alcohol, cannabis, and psychosocial stress during pregnancy.
Do trauma symptoms mediate the relation between neurobiological stress parameters and conduct problems in girls?

L. Babel, T. Jambroes, S. Oostermeijer, P. M. van de Ven, A. Popma, R. Vermeiren, T. Doreleijers, and L. Jansen

Attenuated activity of stress regulating systems has consistently been reported in boys with conduct problems. Results in girls are less consistent, which might be caused by high prevalence rates of comorbid trauma symptoms. Therefore, aim of the present study was to investigate trauma symptoms as a potential mediator in the relation between activity of stress regulation systems and disruptive behavior in female adolescents.

Our findings suggest that neurobiological characteristics of female externalizing behavior may differ from males, in that girls showed heightened instead of decreased ANS activity. Although prevalence rate of trauma symptoms was high in girls with DBD, they did not mediate the relation between stress parameters and externalizing behavior. Clinical implications and future directions are discussed.

11:30-12:45 – PARALLEL SESSION VIII

SYMPOSIUM “MENTAL HEALTH PROBLEMS AND VIOLENT BEHAVIOURS AMONG JUVENILE OFFENDERS”

Chair: Marcel Aebi

Family-based coaching in mental health care: Feasibility and effectiveness

M. Manetsch, R. Mäkeläinen, and C. Stadler

Children with early symptoms of severe externalizing behavioural problems bear a high risk of carrying the symptoms into adolescence and even adulthood, developing Conduct Disorder or persisting Antisocial Personality Disorder (Cohen & Piquero, 2009, Fontaine et al., 2009). Although there is growing evidence that family based interventions in the living environment are effective in reducing externalizing child behavioral problems (Boege et al., 2015), home-based family coaching is not applied routinely in mental health care. We have developed a manualized hometreatment (HT) program (Mäkeläinen & Stadler, 2016) specifically aiming at reducing behavioural and emotional problems of preschool children, promoting functional and positive parenting skills, and enhancing parent-child-interaction. This program also comprises specific modules aiming at empowering parents to use parental emotion and stress regulation skills when confronted with challenging child behaviour. The effectiveness of the manualized family-based coaching within the home setting will be evaluated as add-on intervention to psychiatric day-care for preschool children with emotional and behavioural problems. In a pre-post-follow-up (3 months treatment, 3months follow-up) design child behavioural problems (ECBI, Eyberg, 1990) and positive parenting strategies (FZEV, Strayhorn & Weidmann, 1988) are assessed as primary outcome. In addition, parental stress (PSI; Abidin, 1995) is assessed as well as the quality of the parent-child relation and interaction measured in a standardized manner and rated by blind observers. We hypothesise that the effectiveness of the intervention significantly varies in dependence of the number of home-based family sessions carried out. Preliminary results will be presented. The clients’ satisfaction with the program and feasibility of the intervention program will be discussed.
Posttraumatic stress as a mediator of the relationship between experienced trauma and violent behavior in a community sample of adolescent girls and boys

M. Aebi, M. Mohler-Kuo, S. Barra, U. Schnyder, T. Maier, and M. Landolt

Persistent and repeated adverse experiences have a serious impact on brain functioning and influence a child’s psychological development. In youth, the experience of trauma and abuse was also found to increase the risk of later committed violent behaviours. A small number of clinical studies has examined the mediating role of posttraumatic stress disorder (PTSD) in the association between victimization and juvenile violent perpetration and found rather conflicting results. Additional studies based on community samples are warranted. By using a structural equation modelling (SEM) approach we analysed the role of PTSD symptoms as mediator between the severity of experienced trauma and self-reported violent behaviours in a nationally representative school sample of 1815 girls (mean age = 15.5 years) and 1927 boys (mean age = 15.6 years) who reported at least one traumatic event. Lifetime exposure to traumatic events and current PTSD were assessed by the use of the University of California at Los Angeles Posttraumatic Stress Disorder Reaction Index (UCLA-RI). Severity of PTSD partially mediated the association between trauma severity and violent behaviours in boys but not in girls. Additional analyses in the male sample revealed that symptoms of dysphoric arousal and emotional numbing were positively related to violent behaviours whereas symptoms of anxious arousal were negatively related to violent behaviours. The present findings partially support the mediating role of PTSD as risk factor for violent behaviours in traumatized male youth. However, specific symptom clusters of PTSD seem differently related to violent behaviours and they do not fully explain a trauma-violence link. Besides PTSD, other psychological factors (e.g., hostility bias) may explain the relation of trauma exposure and violent behaviours in youths.

Affective, anxiety, substance related and externalizing disorders and their relation to criminal recidivism in detained male adolescent offenders

D. Stiefel, C. Bessler, B. Plattner, and M. Aebi

Studies from Austria, the Netherlands and the United States of America found high rates of psychiatric disorders in detained adolescent offenders, with 70-90% suffering from at least one psychiatric disorder. This rate is three or more times higher than the rate of psychiatric disorders within the general adolescent population. The few existing studies found externalizing disorders most strongly related to criminal recidivism. We tested the presence of psychiatric disorders and their relation to criminal re-offenses in a sample of male adolescent offenders from the Zurich Juvenile Detention centre (Switzerland). We assessed psychopathology in a consecutive sample of 122 detained boys using a structured standardized interview (Mini International Neuropsychiatric Interview for Children and Adolescents; MINI – KID). Thereafter, criminal recidivism was obtained from official data within 365 days after their release from detention. Out of the sample 90.2% met criteria for at least one psychiatric disorder. In particular, 80.3% had an externalizing disorder (e.g. conduct disorder, ADHD), 64.8% had a substance related disorder, 32.8% had an anxiety disorder, and 28.7% had an affective disorder. Chi²-statistics and Cox regressions found the presence of externalizing disorders and the presence of drug related disorders associated with violent re-offenses but not with general re-offenses. In addition, young age was found as a risk factor for violent re-offenses. Comparable rates of psychopathology were found in
detained adolescents in Switzerland as previously reported from other countries. Furthermore, young offenders with externalizing disorders, such as conduct disorders or ADHD, and drug related disorders respectively were at highest risk for persistent violent offending. Interventions should therefore mainly focus on this subgroup to prevent further harm to society.

**Treatment of a female juvenile offender with serious conduct disorder and psychopathic traits: A case study**

**B. Aeby**

There is a lack of treatment programs and therapy guidelines for female juvenile offenders with serious conduct disorder and psychopathic/callous-unemotional traits. Therefore social, educational and psychiatric institutions and involved authorities are extremely challenged with the demands of this highly specific clientele. Case study of a female adolescent, born in Switzerland, who has been convicted of several offenses, including robbery, bodily harm, property damage, and multiple counts of arson. Regardless the fact of the small number of patients asking for these highly specific demands it appears to be indispensable that new approaches/programs are to be developed in order to meet these challenges. In the meantime we recommend an interdisciplinary approach based on the existing forensic knowledge, courageous creativity, and extraordinary methods to reduce criminal recidivism in serious female juvenile offenders.

**ORAL PRESENTATIONS “PARENTAL PRACTICES AND VIOLENCE”**

**Chair: Vera Sigre-Leirós**

**Parental alienation: Research project and early study**

**G. Camerini, T. Magro, and U. Sabatello**

All the scientific community agrees on the idea that parental alienation (PA) is not, in itself, an individual disorder but an important evolution risk factor concerning psycho-affective development. We can observe school problems, behaviour problems, infantilisation, adultization and enmeshment with alienating family, personality disorders. DSM V describes those problems among the category Relation Problems, as the phenomena originates from a pathology inside relationship that includes son/daughter and both parents, where everyone gives his contribution.

It’s important to analyze and focus on risk and predictive factors that allow to recognize the disorder and planificiate program interventions before it becomes stable and crystallized.

A research group was created among Italy with the goal of analyzing civil expertises by Italian court in case of refusal of a child towards one of the parents. To analyze the data we created a questionnaire with multiple choices following criteria of inclusion/exclusion using DSM V coding for Relation Problems. Inclusion criteria: separation conflict between parents (V61.03, V61.8); partially or totally refused parent (V61.20), presence of specific alienating patterns (denigration, hostility) from the “chosen” parent to the alienated one (V61.29). Exclusion criteria: absence of maltreating or neglecting behaviour from the alienated parent (non abuse and neglect). There were 2 control groups: 1) alienation caused by the refused parent because he was maltreating or neglecting. 2) alienation caused by children and emerged some years after parent separation. Eg. Presence of a new partner for the refused parent. We analyzed 40 cases with 10 of them regarding the cited control groups.
Partial results emerged in the study seem to confirm DSM codification with a prevalence of V61.20 with situation of total refusal correlated to a time of separation variability and time necessary to apply measures that modify the opposition to see the refused parent. The other data include V61.03-V61.8 where we can observe parental conflict having strong effects on parent-child relationship.

It will be very important to take into consideration a larger number of case study with the purpose of evaluating statistics and descriptive analysis with the goal of projecting short time intervention effective models (as the European Court for Human rights suggests) to avoid that a parent is chronically and stably excluded from child’s life.

**Parenting practices and sexual violence**  
**V. Sigre-Leirós, J. Carvalho, and P. Nobre**

Sex offenders tend to report problematic rearing practices from their parents, lacking however more empirical research regarding specific types of offenders. The purpose of the present study was to investigate the relationship between developmental experiences with parents and sexual violence. The study included 113 sex offenders (including rapists, pedophilic and nonpedophilic child molesters), and 51 nonsex offenders. All participants were assessed with the EMBU (My Memories of Upbringing), the Brief Symptom Inventory, and the Socially Desirable Response Set Measure. Results: Results showed that rapists were less likely to perceive their fathers as being emotionally warm compared to nonsex offenders and pedophilic offenders. Moreover, compared to rapists, pedophilic offenders remembered their mothers as being less emotionally warm towards them. Results showed that some developmental experiences with parents were able to distinguish between types of offenders. The findings may have important implications regarding the conceptualization models of sexual violence as well as early intervention and prevention of sexual crimes. Further research on this topic with larger samples of sex offenders is recommended.

**Family Group Conferencing in youth care: Family and problems characteristics that make it happen**  

Although Family Group Conferencing (FGC) has spread around the world rapidly, limited research is provided about the success rate of FGC in youth care. The limited available numbers of completed FGC in research, however, suggest that FGCs often do not take place. The current study focuses on the completion rate of FGC and the affection of family characteristics that may explain whether or not FGC will take place. Data was reported of two studies performed in the Netherlands to examine the effectiveness of FGC in youth care (N = 311 families). To test whether or not family characteristics affect the completion of a FGC, we compared demographic characteristics (i.e. cultural background and parental education level), problem characteristics (child maltreatment and high-conflict divorce) and family functioning characteristics (i.e. social support and family competence) of families who completed a FGC with families who did not complete a FGC. Only 30 percent of the families that were offered a FGC eventually completed the FGC. Analyses revealed that none of the demographic, problem and family functioning characteristics influenced the likelihood of completion of a FGC. Despite all the investments in the model of FGC, the present study showed a relative small number of completed FGCS. However, this small percentage is not induced by family characteristics; specific characteristics of families do not exclud-
ing FGC in advance. Further research is needed to find out which factors have influence on the completion rate and which investments are needed to increase this completion.

**ORAL PRESENTATIONS “SEVERE OFFENSES AND PUBLIC ATTITUDES TOWARD OFFENDING”**

**Chair: Paula Vagos**

**Cyberstalking prevalence and coping strategies on college students**

_C. Soeiro, A. Sani, and J. Carrasquinho_

The development of new communication technologies allow new forms of relationships, but also new opportunities for antisocial behaviours and crimes. The cyberstalking is one example and can be defined as the use of internet, email or other electronic devices to harass another person. Since young people are particularly vulnerable to this type of phenomenon, it is important to examine the prevalence level of cyberstalking among the youths and understand the coping strategies that victims use to handle this type of harassment.

This research aim to know prevalence of cyberstalking, its dynamics and the coping strategies used by the victims, with the objective of gathering knowledge towards an adequate intervention with cyberstalking victims.

Data was collected from 671 college students from several portuguese universities, using an online questionnaire released through email and social networks. For this research we use sociodemographic questionnaire, the Cyber Obsessional Pursuit (Spitzberg & Cupach, 1999 adapted by Carvalho & Matos, 2010) and Stalking Coping Measure (Spitzberg, 2011 adapted by Carrasquinho, Sani & Soeiro, 2014).

The statistical analysis determine that cyberstalking prevalence rate is 69.1%, when 36.3% self-reported victimization. The most frequent cyberstalking behaviors are the hyperintimancy ones. The coping strategies most resorted by cyberstalking victims were the moving away and the moving inwards strategies.

This study allow us to know more about the dynamic of this form of violence. It also allow us to use an adequate intervention with cyberstalking victims towards the use of assertive and effective strategies.

**A model for differentiating school shooters characteristics**

_M. Ioannou, L. Hammond, and O. Simpson_

Whilst school shooting incidents are increasing in prevalence, little empirical research has been conducted into such crimes or the individuals who commit them. A clear understanding of the factors that may lead to someone becoming a school shooter remains lacking.

The current study aimed to explore the potential for developing a model for differentiating school shooters based on their characteristics (or risk factors) before the attack took place.

Data on forty school shootings was compiled from the National School Safety Center’s Report on School Associated Violent Deaths (SAVD) and media accounts. Content analysis of the cases produced a set of 18 variables relating to offenders’ characteristics (or risk factors). Data were subjected to Smallest Space Analysis (SSA), a non-metric multidimensional scaling procedure.

Results revealed three distinct themes: Disturbed School Shooter, Rejected School Shooter, and Criminal School Shooter. Further analysis identified links be-
between these themes with the family background of the offender.

These findings have significant theoretical implications in our understanding of school shooters and the crime in general. They offer potential for practical applications in terms of prevention and intervention strategies.

**Age effects on juvenile homicide perpetration**  
**L. Hammond and M. Ioannou**

Very little research has been conducted into youths who kill. Further; of the limited works exploring this offending subset, few have examined age-related differences in juvenile homicide perpetration.

Objectives:

I. To examine age effects on the nature and characteristics of juvenile homicide offences.

II. To explore differences in the backgrounds and personal attributes of child and adolescent homicide offenders.

Data on 150 juvenile homicide offenders and their offences was derived from material available within the public domain, including media reports, case studies, court reports and previously published studies. Comparisons were then made between those aged 14 and under (N = 63) and those aged 14-17 (N = 87) across a range of offender, victim and offence-related variables.

There were no significant differences between the child (U-14) and adolescent (14-17) offender samples on any of the measured variables. The two groups had similar backgrounds, selected similar types of victims, had comparable breakdowns of different types of victim-offender relationship and had similar patterns of weapon use.

The fact that the two groups did not differ significantly has notable implications in practical and applied domains. By identifying risk factors for juvenile homicide perpetration, findings open up a range of possibilities for identification, investigation and intervention. In addition, findings might inform the development of offender treatment and rehabilitation programmes.

**Content of juvenile crime news and its’ effect on public attitudes toward juvenile offending**  
**D. Celik, B. Celebi, E. Coban, and M. Habuloglu**

Media would create a mismatch between the perception and reality of juvenile criminals so that it leads to misinformation (Hough & Roberts, 2004). Their study showed that when the media reports cases of young offenders, it focuses on the most violent and visible parts of the offences.

In the light of this information, the present study aimed to examine the effects of the different ways of coverage of child offender news on public attitudes toward those child offenders. We expected representing age of the offender with exact number or using general words, using different pictures, using different headlines, expressing the motivation behind the action of the child offender, expressing background of the event, telling penalty of the offender, and taking attention to ethnicity have significant effects on how people gains different attitudes toward juvenile offenders.

The survey designed as between subject design including 7 different variables with 38 conditions. Questions were shown randomly to participants using computer program, Qualtrics.

The results indicated that there was no significant difference among attitudes of participants regarding age and ethnicity manipulations while there are significant differences among participants’ attitude towards other variables which
are picture, headline, motivation, background, penalty. In the photograph manipulation, the photo that reflected children as guilty was selected more as guilty than the photo that reflected children as innocent. \(X^2(259) = 19.827\), \(p<.05\). In the headline manipulation, the news reflected the child performed the action intentionally was found significantly guilty as compared with the child performed the action accidentally \(X^2(215) = 4.957, p<.05\). In the background manipulations, visibility of impoverished past experiences were made children significantly less guilty \(X^2(256) = 5.526, p<.05\); \(X^2(204) = 4.781, p<.05\). In the motivation manipulation, the child who was perceived as encouraged by others was selected more guilty \(X^2(198) = 4.939, p<.05\).

**ORAL PRESENTATIONS “RISK NEED ASSESSMENT”**

Chair: Michiel de Vries Robbé

Risk and Needs Assessment through Children’s Perspective
I. Boric, A. Miroslavjevic, and N. Koller-Trbovic

This paper is based on project „Improvement of assessment standards for children at risk/or with existing behavioural problems” conducted by Ministry of Social Policy of Republic of Croatia and UNICEF Office for Croatia. The main goal of this project is to standardize risk and needs assessment within the social welfare system, specifically in correctional institutions. The intention is to improve current approach according to contemporary international practise. One aspect of contemporary good practise is recognizing and respecting user’s perspective. According to that, aim of this paper is to describe perception of children who experienced assessment process. Basic believe is that children are “experiential experts” and can give important information that can enhance quality of practise. Through interviews and focus groups, over 30 children (both boys and girls) shared their experiences. Preliminary results shows that active participation and involvement are important to children too. Children perceive assessment as a beginning of change- change in their behaviour and in life in general. Participants state numerous positive and negative aspects of assessment process. Good relationship with professionals based on respect and flexibility children perceive as crucial. Negative perception is most often related to poor living conditions (old and inadequate buildings), boredom and rigid structure.

Adding a positive focus to risk assessment and treatment: the value of the SAPROF-YV and SAVRY in juvenile justice institutions
M. Robbé, A. Kleeven, E. Mulder, and A. Popma

Treatment in inpatient and outpatient juvenile justice generally focusses not only on reducing risk, but also on developing personal, relational and situational strengths and promoting safe reintegration into society. Yet most applied risk assessment tools still heavily rely on a risk-focused approach. Recently, the Structured Assessment of Protective Factors for violence risk – Youth Version (SAPROF-YV) was developed as a solely strengths based approach. The tool assesses various domains of protective factors for juvenile violence risk, in order to complement the risk assessment process with a positive and dynamic assessment, offer additional treatment guidance and provide for outcome monitoring of strengths. Dutch juvenile justice institutions eagerly adapted this model, in 2015 the tool was implemented nationally.
The SAPROF-YV will be introduced and research plans will be demonstrated concerning a national risk assessment study involving seven juvenile justice institutions across The Netherlands.

The SAPROF-YV and SAVRY will be validated by means of prospective multiple time-point measurements of risks and strengths. Trajectories of change will be assessed and comparisons made regarding psychopathology, offending history, court order, gender and age (juveniles vs. young adults).

The SAPROF-YV will be explained and a large scale research plan will be presented. The aim of this study will be validation of the SAVRY and SAPROF-YV, while at the same time improving risk assessment and treatment practice, providing opportunity for treatment evaluation and promoting safe community reintegration.

The SAPROF-YV is a newly developed tool for assessing protective factors intended to complement risk-focused assessment.

Does agreement between informants on externalizing problem behavior of adolescents in forensic predict a lower risk of recidivism?

M. J. Noom, I.L. Bongers, Ch. Van Nieuwenhuizen

Agreement among multiple informants on adolescent externalizing problem behavior in youth forensic psychiatry is moderate. It can be argued that the level of agreement is an indicator of the accuracy of the reported behavior.

The purpose of the present study was to test the hypothesis that in youth forensic psychiatry agreement among informants on the externalizing problem behavior of the adolescents is

Participants were 117 boys (15-23 yrs old). Externalizing problem behavior was measured at the start of treatment with the Child Behavior Checklist (CBCL, filled out by ward staff), the Teacher’s Report Form (TRF) and the Youth Self Report (YSR). The risk of recidivism was defined as the total score of risk and protective factors for which the endpoint measurement of the Structured Assessment of Violence Risk in Youth (SAVRY) was used.

Results showed that disagreement on externalizing problem behavior between the adolescent and the ward staff or the teacher was not related to the risk of recidivism at the end of treatment. However, disagreement between ward staff and the teacher was related to a higher estimate of risk of recidivism at the end of treatment.

It might be that a lower level of agreement between professionals indicates less consistency in the (reported) problem behavior. Less consistency in the observed problem behavior might hamper the efficiency of treatment.

SYMPOSIUM “DEVELOPMENTS IN JUVENILE DELINQUENCY: FROM PREVENTION, TO EVALUATION AND INTERVENTION”

Chair: Miguel Basto-Pereira

In the last two decades a set of research projects has been conducted in different Portuguese universities in the context of Juvenile Delinquency. In this field, several research projects have been presented in the most important journals and other research projects are now in progress. The aim of this symposia is to bring together young and senior Portuguese researchers and present some of these most important and recent insights in terms of prevention, evaluation and interventions in young offenders.
Growing up with adversity: From juvenile justice involvement to criminal persistence and psychosocial problems in young adulthood

M. Basto-Pereira, A. Miranda, S. Ribeiro, and A. Maia

Little is known about the impact of other forms of early adversity, beyond abuse and neglect, on juvenile delinquency and criminal persistence. The aim of this research is to explore the role of adversity on juvenile justice involvement, criminal behavior and psychosocial adjustment. Seventy-five young adults with official records of juvenile delinquency in 2010/2011, and 240 young adults from community, filled out the Adverse Childhood Experiences questionnaire and measures of psychosocial adjustment in 2014/2015. The analysis indicates that adversity is related with criminal and psychosocial problems. There is an urgent need to screen, prevent and stop serious adversity.

Assessment of Juvenile Offenders within the Portuguese Context

P. Pechorro and R. Barroso

Forensic assessment instruments are tools that juvenile justice practitioners use to identify individuals who pose some sort of risk (e.g., recidivism) or to assist in the screening/diagnosis of conditions (e.g., psychopathy). These instruments facilitate the collection of information critical to security and/or treatment decisions. The use of valid and reliable instruments can improve forensic and clinical decision making. The EFCAP Congress will allow us to briefly introduce a set of instruments (e.g., PCL:YV, ICU, J-SOAP-II) that were recently adapted and validated in Portugal. Additionally, we will present the next set of instruments that will be the focus of psychometric research in the coming years.

Continuities and discontinuities from transgression to delinquency

A. Morgado, and M. Vale-Dias

This paper discusses results from two studies with samples collected from youth offenders (N=121) and the general population (N=489), assuming that there is a general antisocial tendency in adolescence, from transgression to delinquency. Self-report measures assessed living conditions, behaviour, personality, self-concept, social skills, and family environment.

Conclusions indicate that some variables (psychoticism, social sensitivity, family environment) are significant in both samples, suggesting a common antisocial tendency: from harmless transgression to delinquency. Still, significant differences also suggest distinct trajectories that require specific interventions.

Reliable clinical change after a 25 session cognitive behavioral program with male young offenders

D. Rijo and N. Brazão

Growing Pro-Social (Rijo et al., 2007) is a structured cognitive relational group program for individuals with antisocial behavior. This presentation describes outcomes of the Growing Pro-Social (GPS) program with a sample of 63 young offenders placed in juvenile facilities, having done a condensed 25-session version of GPS. Participants were assessed in two different moments (prior and after program completion), on different emotional and behavioral measures, self-representation and dysfunctional cognitions. Results were calculated using the Reliable Change Index (RCI) to assess whether significant change occurred after GPS completion. Participants improved significantly in a great number of the assessed variables: behavior, disruptive emotional activation and biased information processing measures.
SYMPOSIUM “MULTIDISCIPLINARY THERAPEUTIC AND INSTITUTIONAL APPROACHES FOR ADOLESCENTS WITH DISRUPTIVE BEHAVIOR DISORDERS”

Chair: Diane Purper-Ouakil

Severe and enduring disruptive behavior disorders in children and adolescents (DBD) are a challenge to families, teachers, educators and therapists. DBD are characterized by multiple environmental and individual risk factors and involve complex developmental trajectories.

This symposium is proposed by the MATRICS (Multidisciplinary Approaches to Translational Research In Conduct Syndromes) consortium, a EU-funded project aiming to use translational approaches to identify targets for prevention and treatment programs. This symposium proposes an update about treatment initiatives from different backgrounds. Psychosocial interventions such as parent management training and therapeutic programmes to develop self-control and socialization are central aspects of therapeutic plans for children and adolescents. However some situations require complementary approaches such as medications, therefore the speakers of this symposium will address the current evidence base of these treatments. Adolescents with severe DBD often need help from different professionals and institutions. The different backgrounds and cultures of these institutions, the threats that professionals experience in their interactions with very challenging adolescents and the complex familial backgrounds may impair the effectiveness of educational and therapeutic initiatives. These difficulties may lead to multiple discontinuities in affective, educational and social interactions, with negative consequences on the adolescent’s outcome. We will report the experience of Philado, a professional network dedicated to multi-institutional assessments and collaboration for adolescents with DBD and complex social needs.

Psychosocial and institutional interventions for adolescents with DBD
S. Tremmery

Although aggression is part of daily life in psychiatric units for adolescents, empirical data are sparse. Only a few studies describe prevalence data of aggressive incidents in adolescent psychiatric wards, data in forensic psychiatric care are even more limited. In this presentation we will focus on the aggressive incidents on a forensic adolescent ward.

First we review the prevalence of incidents of aggression on (forensic) child and adolescent psychiatric units. Secondly, we will present the data of a 5-year period on a forensic ward and go deeper into the daily life and the distribution of aggression during the day. Our data support that the aggression management policy of the unit is effective and necessary. Based on the social competence model, it encourages intervening early in the cascade of aggression, in order to prevent further escalation and reduces the need for intrusive interventions.

Evidence has been found for the fact that aggression can be seen as a contextual event, as external factors clearly influence the incidence of aggression.

Clinical Pharmacology of Disruptive Behaviour Disorders
Zuddas, C. Balia, and S. Carucci

In Conduct and other Disruptive behaviour disorders, pharmacotherapy is an integral part of a comprehensive treatment program, however in Europe no drug has received formal indication for conduct disorder (CD), with the exception for risperidone, although only for short-term treatment of children and adolescents with intellectual disabilities.
Several drugs, frequently used off-label, appear effective in the treatment of aggression (psychostimulants, antipsychotics, mood stabilizers, less frequently agonists of the α2-receptors and beta-blockers). The evidence to support their use is limited by inadequate tools for measuring effectiveness, limited samples size and heterogeneity of clinical samples. No systematic studies on direct comparison between different treatments of the nuclear symptoms of CD are currently available, as well as on aggression subtypes or callous-unemotional traits.

A better understanding of the neurobiology and neuropsychology underpinning different CD phenotypes and the autonomic and pharmacological response profile for medication known to be effective in reducing aggression could lead to identification of novel, more specific drugs.

Philado: a professional network for adolescents with DBD
D. Purper-Ouakil, and M. Paradis

Adolescents with disruptive behavior disorders and complex social and familial background are often cared for by different institutions such as child protection services, child psychiatry, specialized or standard school systems. Their disruptive behavior is often highly challenging for professionals and may lead to repeated failures of foster care and schooling which in turn worsens their adaptive functioning. In some situations, differences in professional culture and lack of communication can be source of misunderstandings and conflicts.

Philado is a professional network created in 2005 with different aims: bring together professionals involved in the field work of highly disruptive adolescents in order to take common decisions, follow-up on action points, organize multiprofessional seminars, keep track of the adolescents projects and outcome. This presentation aims to give an overview of the structure of Philado and will illustrate its functioning with a clinical vignette.

14:00-14:45 - PLENARY SESSION

Risk factors for psychopathy in two generations
David Farrington

This lecture investigates to what extent the relationships between risk factors and psychopathy of males are similar from one generation to the next. The analyses are based on the Cambridge Study in Delinquent Development, which is a prospective longitudinal survey of 411 London males who were originally studied at age 8. This lecture compares these males (generation 2 or G2) with their biological parents (generation 1 or G1) and biological children (generation 3 or G3). Risk factors in G1 parents and in the childhood of G2 males are compared with adult psychopathy in G2 males (measured by the PCL:SV), and risk factors in G2 parents and the childhood of G3 males are compared with adult psychopathy in G3 males (measured by the PCL:SV).
SPECIAL SESSION “THE O” AND PARALLEL SESSION IX

SPECIAL SESSION “THE O”

Chair: Arne Popma

Prevalence of mental health problems including suicidality and learning disabilities among young offenders in detention: A meta-analysis
M. Livanou, V. Furtado, A. Silvester, and S. Singh

Prevalence studies show that nearly 80% of young offenders present psychiatric comorbidity. Juvenile offenders, 18 years and younger, are at 3 times higher risk of being diagnosed with a psychiatric disorder. Recent systematic reviews have mainly focused on youth in detention neglecting youth in the community. Females and ethnic minorities have been overlooked in the literature in spite of the increasing rates of psychiatric disorders striking these groups.

Objectives: (1) To perform a meta-analysis on the prevalence rates of various mental disorders including depression, psychosis, PTSD, conduct disorder, ADHD, learning disabilities and personality disorders among young offenders. Self-harm and suicidal behaviour are examined too. (2) To compare the prevalence of psychiatric disorders among young offenders across custody and community and to emphasise on gender, age, and ethnic variations.

Relevant studies have been identified with computer-assisted searching and scanning of reference lists. Prevalence of mental disorders based on gender, age and ethnicity along with potential moderating factors are extracted from the included studies. Meta-regression is performed to test covariates that might have contributed to differences in prevalence rates across studies.

After searching the relevant literature, 93 studies were determined to be eligible for data extraction from which 32 were finally included in the meta-analysis. Young offenders with ongoing mental health problems comprise a vulnerable group within forensic psychiatric services that needs special attention. More prevalence studies should be conducted to improve mental health provision. Ethnic, gender, and age variations across young offenders should be addressed and turn interventions into a tailored process that responds to the young person’s particular treatment needs.

Risky decision making in ADHD: A meta-regression analysis
T. Dekkers, A. Popma, J. v. Rentergem, A. Bexkens, and H. Huizenga

Risky decision making in daily life is increased in individuals with Attention-Deficit/ Hyperactivity Disorder (ADHD) compared to typically developing individuals. For example, ADHD is associated with elevated levels of antisocial behavior and substance abuse. However, contrary to studies on daily life risk taking, results from controlled laboratory studies on decision making deficits in ADHD are inconsistent, probably because of between study differences in co-morbid disorders, studied age groups and task characteristics.

The goal of this study is to provide a quantitative overview of literature comparing participants with and without ADHD on laboratory risk taking tasks.

We performed a meta-regression analysis that investigated the influence of several potential moderators. In total, 36 studies (N-ADHD = 1175; N-control = 1222) were included, delivering 51 effect sizes.
Overall analyses without moderators indicated a small to medium effect size (g = .36, p < .0001), indicating that groups with ADHD showed more risky decision making than controls. There was trend for a moderating influence of co-morbid Disruptive Behavior Disorders (DBD): studies with more co-morbid DBD had larger effect sizes (p = .07). There was no moderating influence of co-morbid internalizing disorders. Effect sizes were similar for all age groups, for both implicit and explicit gambling tasks, and for rewarding and non rewarding task conditions.

These results confirm results from studies on real life decision making. Groups of individuals with ADHD robustly show more risky decision making than control groups in laboratory settings, especially if the ADHD group has more participants with co-morbid DBD.

Boys with ODD/CD show impaired adaptation during stress: An executive functioning study
J. Schoorl, S. van Rijn, M. de Wied, S. van Goozen, and H. Swaab

Evidence for problems in executive functioning (EF) in children with oppositional defiant disorder/conduct disorder (ODD/CD) is mixed. It has been hypothesized that it is important to distinguish cold from hot EF in the understanding of EF deficits. Cold EF can turn into hot EF when situations become complex or emotionally charged, as often is the case in daily life.

Specific EFs were measured in typical (‘cold’) and under stressful (‘hot’) test conditions in boys with ODD/CD (n=65) and non-clinical controls (n=32). EFs of interest were working memory, sustained attention, inhibition and cognitive flexibility.

Boys with ODD/CD showed impaired working memory under typical testing conditions, and impairments in working memory and sustained attention under stressful condition. In contrast to the control group, performance on sustained attention, cognitive flexibility and inhibition was less influenced by stress in boys with ODD/CD.

These results suggest that EF impairments become more prominent under stress in boys with ODD/CD, whereas typically developing boys show adaptive changes in EF. As emotions are important in guiding behavior adaptively to the environment, failure to do so might contribute to aggressive and antisocial behavior in boys with ODD/CD.

Linking heart rate variability to psychological health and brain structure in female youths with conduct disorder
M. Prätzlich, N. Raschle, L. Fehlbaun, W. Menks, L. Kersten, S. Mannstadt, C. Dietrich, and C. Stadler

Heart rate variability (HRV) is a biomarker for mental/physical health and is predictive of emotion regulation skills. A lower HRV is indicative for a decreased adaptability and is characteristic of conduct disorder (CD). CD-Individuals with reactive aggression (RA) are more likely to display lower HRV, whereas proactive aggression (PA) is linked to higher HRV. Neuronally, the central autonomic network (CAN: associated areas include the insula, amygdala, hypothalamus, and prefrontal brain regions) has been suggested to regulate HRV. Functional neuroimaging studies have found a link between HRV and areas of the CAN. However, no study has yet directly linked brain structure and HRV. Objectives: (i) assessing HRV in relation to RA/PA (ii) investigating brain areas critical for HRV.

We assessed specific aspects of aggressive behavior (reactive-proactive, emotion regulation questionnaire, inventory of callous-unemotional traits) in relation to HRV (respiratory sinus arrhythmia). We performed whole brain regres-
sion analysis using HRV as a covariate to investigate a link between brain structure and HRV in girls (15 CD/18 controls). Preliminary evidence indicates (I) a negative correlation between RA and HRV and (II) a negative correlation between HRV and gray matter volume in CAN areas (including prefrontal, cingulate cortex, insula and amygdala; p < 0.001). Follow-up region of interest analyses were conducted for areas significantly associated with HRV in order to characterize both groups in more detail. We provide evidence that higher RA is linked to lower HRV, indicative of poor emotion regulation skills, and suggest a connection between HRV and brain structure.

ORAL PRESENTATIONS “ASSESSMENT AND TREATMENT OF CHILD AND ADOLESCENT VICTIMS II”

Chair: Paula Vagos

Clinical and psychological consequences of child sexual abuse: A multi-faceted phenomenon
E. Dozortseva, E. Noutskova, and V. Badmaeva

In Russia the number of officially registered and investigated sexual crimes against children was about 10,000 yearly in 2009 – 2014, whereas the latency in the field is high.

Description of specifics of clinical and psychological consequences of CSA considering different aspects concerning the child (gender, age) and the abuse (contextual setting, duration of the CSA).

Descriptive analysis of the forensic psychiatric-psychological assessment data of 183 child victims (up to 17 years of age) of sexual crimes. Girls were 72.68% of the sample. Adolescents made up 62.84%. 62.84% cases of abuse took place in extra-familial, 27.32% - in intra-familial setting, 9.84% - within pseudo-therapeutic groups. 56.59% of the victims experienced multiple long-term sexual abuse.

As expected, female child victims tend to internalizing behaviour, whereas male – to the externalizing. Victims of preschool age displayed mostly emotional and behaviour control problems, whereas in adolescents both emotional problems and specific changes of attitudes, personal meanings and personality features were common. Children in pre-adolescent age had an intermediate position between the two poles. The most expressed clinical and psychological consequences of the CSA were found in cases of long-term abuse, especially in pseudo-therapeutic sects and in intra-familial setting. 59.15% of the long-term abuse victims had psychiatric diagnoses including 36.62% related to the crime consequences.

Multi-disciplinary system of social, psychological and medical support for CSA victims should take into account all the aspects of typical peculiarities of the CSA consequences.

Care project and care network: Support to children and youngsters victims of sexual violence
B. Brito and C. Ferreira

Sexual violence against children and youngsters is a phenomenon which causes social alarm due to its nature and victims’ vulnerability. In Portugal, more than 50% of all sexual crimes registered are performed against minors, and most of them perpetrated against victims between the ages of 8 to 13. Most of these crimes occur within the family bounds or are perpetrated by those who have a
close relationship to the victim. In fact, this proximity between victims and perpetrators might be an obstacle either to report the crime or to seek for help and get the adequate support. Portuguese Association for Victim Support (APAV), in its diary mission of supporting victims of crime, their families and friends, by providing free and confidential quality services and contributing to the improvement of public, social and private policies centred in the statute of the victim, enhances the delivery of support to children and youngsters victims of crime. “CARE project – support to children and youngsters victims of sexual violence” has been recently developed by APAV and is financed by “Fundação Calouste Gulbenkian”. The project partners are Judiciary Police, National Institute of Legal Medicine and Forensic Sciences, Legal Medicine Department of University of Porto – Faculty of Medicine, “Casa Pia”, “Casa da Ameixoeira”, “Associação Chão dos Meninos”, and Spin Project. APAV has also created and implemented the “CARE network”, an interdisciplinary team, which is now developing knowledge and best procedures to minimize the consequences amongst the victims and to present strategies for further prevention of these crimes.

Adolescent male sexual offenders and online sexual behaviour:
Consequences for assessment and therapy
Z. Lkasbi, E. Bradt, and D. Neves Ramos

Sexting among adolescents isn’t a rare phenomenon. Recent research shows that on average 11% of adolescents aged between 11 and 16 years admit ever having received sexual suggestive or nude images and 4% sending explicit images themselves. Sexting can be perceived as ‘normal’ behaviour within a healthy relationship, but this can also cause legal problems to the parties involved. Recent research shows that 2.6% of adolescents has engaged in problematic sexual online activities but little is known about the online behavior of sexual offenders.

Within our forensic service for male adolescent sexual offenders we observed that parents, caregivers and legal authorities hardly pay attention to the online sexual behaviour of adolescents. However, throughout the assessment we ascertain that a substantial part of our clients also committed online sexual offenses beside the known hands-on sexual offenses. We wonder if online sexual offenses are precursors of hands-on sexual offenses and if so, which factors are influential. Studies only discuss research with adults and there is no consensus about the relation. Even less is known about the influential factors.

Based on our own clinical experiences we will discuss the online sexual behaviour of our clients. We will give recommendations for assessment and treatment and discuss ethical issues concerning the control of social media profiles of our clients.

The Looking-Glass Self Hypothesis in maltreated children and adolescents: Parents’ influence in the construction of their self-representations
Silva and M. Calheiros

Research on the construction process of children/adolescents’ self-representations (SR) in the context of maltreatment has been sparse. According to the Looking Glass Self Hypothesis (LGSH; Cooley, 1902; Nurra & Pansu, 2009), individuals’ SR stem from interactions with significant others, reflecting associations between: what others think of them (i.e., significant others’ actual appraisals; SAA); individuals’ perception of others’ appraisals of them (i.e., significant others’ reflected appraisals; SRA); and SR.
This study intends to test the mediating role of SRA in associations between SAA and SR (i.e., LGSH), controlling for child/adolescent maltreatment experiences.

Participants were 214 children and adolescents (51.6% boys), 6-16 year old ($M=11.86$), referred to the children and youth protection committees, and their parents. Maltreatment was evaluated by the committees’ professionals responsible for the participants’ files, through a questionnaire evaluating maltreatment experiences. The LGSH elements - SAA, SRA and SR - were measured through self-report measures.

Controlling for maltreatment effects, significant mediation effects of SRA between SAA and youths’ SR were found for all the SR dimensions evaluated.

Findings emphasize the importance of SRA on youths’ SR construction process and provide useful clues to incorporate in prevention and intervention with vulnerable youth and their parents.

**ORAL PRESENTATIONS “RESEARCH ON TREATMENT OUTCOMES II”**

**Chair: Oliver White**

**Lessons learned? Iatrogenic effects of psychosocial interventions for juvenile offenders**

M. Aebi

A number of studies found psychosocial interventions and treatment programs effective for juvenile offender rehabilitation. Nevertheless, about 29% of the studies also reported harmful effects on juvenile offenders (e.g., increase of criminal behaviours, drug use, and mental disorders). Many of the clinical studies were performed by those authors who also developed the interventions. Because these studies focus primarily on positive treatment outcomes, negative effects were probably underreported. However, findings of ineffective interventions and findings of iatrogenic effects for delinquent youth may inform clinical decision making and policy making for juvenile offenders.

Forensic and clinical studies that reported iatrogenic effects of psychosocial interventions for aggressive and delinquent youth were reviewed and critically discussed.

Since 1939 (Cambridge-Somerville Youth Study) a small but significant number of methodologically sound studies reported iatrogenic effects of juvenile justice interventions. Interventions that place adolescents within a deviant peer group and to a lesser extent group treatment programs for juvenile offenders are at risk of exacerbating and consolidating antisocial behaviors.

In many countries considerable financial resources are allocated to programs and institutions that group deviant youths together and separate them from the rest of the society. Given the harmful effects of deviant peer contagion, the reintegration into society of delinquent youths may be improved by assigning them to individual and family based interventions.

**Specialized Foster Home: Youngsters and families’ perspectives regarding the intervention model**

L. Barbas and M. E. Mendes

Today there is clearly a need to develop new intervention strategies regarding the institutionalization of youngsters at risk, since the existing problems are becoming more difficult to approach and specialized fostered homes are hav
ing difficulties to address the needs of fostered youngsters, including delinquency, mental health problems and drug abuse.

The study aims to understand the impact on young people and their families of institutionalization on specialized fostered homes and to realize how they experience this new reality, as well as to know if there is any behavioral, cognitive and social change in the youngsters.

The participants are 17 boys aged between 12 and 15 years, all of them with behavioral and mental health problems, which are institutionalized for at least one year, and their families. It is a qualitative approach, an interview based on a questionnaire applied to the youngsters and other one structured to be applied to their parents.

The results revealed that the intervention model and therapeutic strategies implemented, are promoting some changes in youngsters behavior and it also has some impact in some development areas.

Youngsters and their families consider this type of intervention appropriate, considering that it is responding to the existing problems and they believe in a better future for all of them.

**Clozapine use in the treatment of emerging Personality Disorders in adolescents**

*E. Delmage, S. Hill, and O. White*

Clozapine has been used to treat adults with emotionally unstable personality disorder for some years. Case series in adults have demonstrated a reduction in the incidents of aggression and subsequent restraints following the use of clozapine. Personality is clearly evolving in adolescence and the diagnosis of a personality disorder is not recommended using the ICD-10 criteria until a young person is 16 or 17 years old, with several years’ evidence of abnormal personality traits (World Health Organization, 1992). The concept of personality disorder in young people is in itself controversial (Adshead, Brodrick, Preston, & Deshpande, 2012) as some clinicians consider personality as not being fully formed until adulthood, with neuroimaging evidence to support this – the frontal lobes are not thought to be fully developed until the age of 25 (Sowell et al).

There are previous reports of Clozapine use in adolescents in a secure hospital with post-traumatic stress disorder and psychotic symptoms (Wheatley, Plant, Reader, Brown, & Cahill, 2004). In one mixed gender study comprised of 6 patients, there was a substantial reduction in the incident of self-harm and aggression following the commencement of clozapine.

The presenters have conducted a two-centre study done in two secure adolescent hospitals, examining the use of Clozapine in the management of a combined total of 15 adolescent females with emerging emotionally unstable personality disorder. There was an overall decrease in the incident rates, restraint rates and seclusion rates following the administration of clozapine in tandem with a positive change in terms of behaviour as measured by the routinely collected behavioural monitoring processes. This change is not statistically significant but provides further anecdotal evidence of the impact of Clozapine for these young people.

The presentation aims to reflect the current state of the research literature and suggest ways to increase the evidence base. The treatment results in adults have been encouraging and there is scope to extend this into adolescent populations, though it is important to be aware of the risk of side effects which may have greater impact in adolescents (for example weight gain). The authors would also like to take the opportunity to get views from clinicians internationally about use
of Clozapine in this group so the presentation will allow time at the end for questions and answers.

**ORAL PRESENTATIONS “PREVALENCE OF MENTAL HEALTH PROBLEMS AMONG YOUNG OFFENDERS”**

**Chair: Lucre Nauta-Jansen**

**Evaluation of mental health needs of adolescent offenders in one Kosovo Correctional Centre**  
**N. Fanaj, E. Melonachi, S. Mustafa, and B. Fanaj**

Mental health prevalence data underscore a need for accurate identification of mental health problems among adolescents entering the juvenile justice system. The goal of this study is to identify mental health needs of adolescents offenders at the only one correctional center in Kosovo.

To 41 male offenders aged between 14 and 23 years old (M = 18.02; SD = 2.20) is applied Massachusetts Youth Screening Instrument–2 (MAYSI–2) (Grisso & Barnum, 2001) Albanian version; while placed in a Lipjan Correctional Centre (Kosovo). Internal consistency alpha coefficients ranged from .59 to .73 for subscales.

According to offenses committed by adolescent offenders: 41% theft, 15% homicide, 15% robbery, 7% attempted murder, 7% illegal weapons etc. 56.4% are recidivist. Caution (clinically significant) cases resulted more in somatic subscale 25 (61 %), Depressed-Anxious 19 (41.5 %) and Angry-Irritable 17 (41.5 %), while Warning (top 10%) cases resulted more in Thought Disturbance 22 (53.7 %) Suicide Ideation 13 (31.7 %) Depressed-Anxious 12 (29.3 %).

Mental health needs of adolescent offenders in Kosovo are higher compared to many countries. Authorities must be sensitive to prepare proper intervention strategies to adress efficiently these needs.

**Mental health problems, self-esteem, hopelessness and attachment style: Exploring possible links with adolescent offending in Kosovo**  
**N. Fanaj, F. Shkëmbi, B. Kabashaj, E. Zogaj, and I. Poniku**

Mental health problems, self-esteem, hopelessness and attachment style in literature not rarely are linked with adolescent offending.

The goal of this study is to measure and compare some mental health problems (anger, anxiety/depression and suicidality), self-esteem, hopelessness and attachment style between three group of adolescents: offenders in correctional centre, adolescents with conduct problems and university students.

The sample consisted of 41 male offenders placed in one Correctional Centre (Mage = 18.02; SD = 2.20); 41 male students of secondary school with conduct problems (Mage = 16.97; SD = .61) and 42 male university students randomly selected (Mage = 19.7; SD = 1.77). They filled questionaires: MAYSI–2 (Grisso & Barnum, 2001); Rosenberg Self-Esteem Scale (Rosenberg, 1965), Hopelessness Scale for Children (Kazdin et al, 1986) and Relationships Questionnaire (Bartholomew & Horowitz, 1991).

Despite differences between samples ANOVA test didnt found significant differences for mental health problems (anger, anxiety/depression and suicidality), self-esteem, hopelessness and attachment style between three group of adolescents. Only significant difference resulted in terms of secure attachment style between samples F(2,103) = 3.612; p < .031. Post-hoc comparisons indicated that
the mean score for university students (M= 2.71, SD= 0.80) was significantly different from adolescents with conduct problems (M= 2.13, SD = 1.04).

Mental health difficulties seems no to be linked with adolescent offending in Kosovo. Further researches are needed to explain the other possible factors relevant to this population.

**Psychopathology in juvenile sex offenders: A follow-up after 12 years**

M. Versloost, C. Paalman, R. Overmars, and L. Jansen

A previous study by our group, (’t Hart-Kerkhoffs et al. 2015) has demonstrated that JSOs show a wide array of both internalizing and externalizing mental health problems. Three quarters of JSOs met criteria for at least one mental health disorder, with 39% internalizing and 57% externalizing disorders. Comorbidity was found in more than half of the subjects and almost two thirds of JSOs were functionally impaired. It is currently unknown, however, whether these mental health problems persist over time. Therefore, in the current study, mental health problems in this group of JSOs were reassessed in early adulthood.

A group of 42 male JSOs (mean age 15.0 ± 1.5 years), examined by our department between 2003 and 2006 (T0), were revisited approximately 12 years later (T1) At T0, psychopathology was assessed by using a standardized diagnostic interview for children: the K-SADS-PL. At T1, psychopathology of these young adults was assessed by means of the Mini and SCID; standardized interviews for resp. axis I and Axis II psychopathology in adults.

The first diagnostic interviews are currently being performed. Results of this study will be presented and discussed at the conference.
POSTER PRESENTATIONS

1. Needs and achievements of juvenile justice system: Insights from two matched control-studies
   M. Basto-Pereira, S. Ribeiro, and A. Maia

Several studies have evaluated the effectiveness of interventions for juvenile offenders, nonetheless, these studies were more focused in recidivism and less in the mechanisms behind the criminal and psychosocial problems.

The aim of this research is to explore the needs and achievements of the Portuguese Juvenile Justice System regarding the reduction of mental health symptoms and cognitive distortions related to anti-social behavior.

Seventy-five young adults with official records of juvenile delinquency (ORJD) in 2010/2011 and 240 young adults from community filled out the How I Think questionnaire, the D-CRIM questionnaire and the Brief Symptom Inventory in 2014/2015. In the first study, 69 participants from ORJD sample were matched with the community group with the same sex, age bracket and race/ethnicity characteristics. In the second study, 27 males caught by the justice system were matched with 27 males non-caught with the same previous characteristics and the same levels of self-reported delinquency.

Young adults with ORJD have significantly higher levels of cognitive distortions four years after the juvenile justice involvement, than the matched control-group. Significant differences were not found in psychological distress. Significant differences between caught and non-caught participants were not found.

Juvenile justice intervention appears to have no effect in terms of reduced criminal distortions or mental health problems. This study stressed the need to promote/improve interventions focused on cognitive distortions related to criminal behavior.

2. Authenticity and contagion in response to real and posed laughter stimuli in adolescents with conduct problems and callous unemotional traits

Adolescents with conduct problems and high levels of callous-unemotional (CP/HCU) traits show reduced empathy to others’ distress and commit acts of instrumental aggression. This group is also characterised by lack of social affiliation/desire to please. One potential explanation for such behaviour is that how adolescents with CP/HCU respond to socially rewarding stimuli is also disrupted. However, this has been scarcely investigated to date.

The goal of this study was to examine whether adolescents with CP/HCU (as compared with typically developing (TD) and CP with low CU (CP?LCU) adolescents) find positive vocalisations less contagious, and are less able to determine their authenticity, vs. typically developing control participants (TD), and adolescents with conduct problem without CU traits (CP/LCU).

Participants (TD (N=32), CP/LCU (N=31), CP/HCU (N=32)) listened to real and posed laughter sounds and made ratings of perceived authenticity and contagion.

Authenticity and contagion ratings were significantly higher for real vs. posed laughter ($F(1,92) = 156.20$, $p<.001$; $F(1,92) = 7.85$, $p=.006$, respective-
ly). There were significant effects of group for authenticity and contagion ratings across all stimuli ($F(1,92) = 5.42, p = .006; F(1,92) = 4.12, p = .019$), but no group x condition interactions. Post-hoc analysis indicated reduced authenticity ratings in participants with conduct problems vs. TD participants, and reduced contagion ratings in the CP/HCU group vs. TD participants.

This finding suggests that individuals with CP/HCU find others’ positive emotions less contagious, and suggests that positive emotions are perceived as less genuine across adolescents with conduct problems compared to TD adolescents.

3. Extreme/’Pathological’ Demand Avoidance: An Examination of the Behavioural Features Using a Semi-Structured Interview

E. O’Nions, C. Floyd, E. Quinlan, A. San José Cáceres, C. Pigeon, E. Viding, and F. Happé

Extreme/’pathological’ demand avoidance is a term that is increasingly well known in the UK, describing individuals on the autism spectrum who obsessively resist complying with everyday demands, and use strategic avoidance tactics (e.g. distraction, socially shocking acts) to subvert these. Other features include an obsessive need for control and domineering behaviour towards peers and adults. Children with these features score similarly on measures of autistic traits to those with ASD, and anti-social behaviour to those with conduct problems (O’Nions et al., 2013).

To date, there has been little systematic examination of the characteristics associated with extreme/’pathological’ demand avoidance. The objective of this study was to identify descriptive features from semi-structured interviews conducted with parents of 25 children aged 8-16 years.

Qualitative analysis using a general inductive approach was used to analyse the data. Preliminary codes based on four interviews formed the coding structure, and additional themes or sub-themes were added over the course of a full review. Subsequently, the presence of each identified sub-theme was coded for each interview.

Traits including a perceived lack of awareness of social hierarchy (e.g., of own/others’ age or status), and lack of concern for own reputation emerged from parents’ descriptions of behaviour. Obsessive controlling behaviour towards others was common, in addition to extreme changes in mood. Descriptions highlight the range of manifestations of avoidance behaviour and perceived triggers.

These findings represent a step towards deepening our understanding of the behavioural profile in individuals with extreme/’pathological’ demand avoidance.

4. Cross-sectoral collaboration in care for adolescent girls with multiple and complex problems—population characteristics and care trajectories

H. Van den Steene, I. Glazemakers, and D. van West

Multiple and complex problems among adolescent girls, defined as difficulties encompassing the (mental) health, educational, and judicial domains, have far-reaching consequences for themselves and yield a high societal cost. These girls often go through very extensive care trajectories that fail to meet their complex needs.

Based on intensive collaboration between child psychiatry and child welfare services, Child Welfare Center Van Celst (Jeugdzorg Emmaüs, Belgium) offers an innovative care delivery pilot project for adolescent girls with multiple and complex problems.

The objective of this research project is to further document this unique care delivery concept and to make recommendations to optimise care delivery.
Quantitative (file analysis, questionnaires) and qualitative (focus groups, interviews) methods are used for characterisation of the population, description of the care trajectories and evaluation of the perceived added value of cross-sectoral collaboration, from the perspectives of clients (youths and their key relatives) and professionals involved.

This poster outlines the framework of the current research project and focuses on the preliminary quantitative data. It illustrates an interplay of vulnerabilities and problems in biological, psychological and socio-contextual domains and shows the complexity of care trajectories.

These results provide insight into the characteristics of this population and the cross-sectoral networks of care delivery set in place to help these adolescent girls with multiple and complex problems.

5. Cornelia de Lange Syndrome and Gilles de la Tourette Syndrome in the same individual - forensic aspects

K. Karher, I. Banda, J. Karher and B. Malbasa

Cornelia De Lange (CdLS) is a rare genetic syndrome (1:30.000-60.000) characterized by short height, intellectual disability, skeletal abnormalities and distinctive facial features.

Gilles de la Tourette syndrome (TS) is a quite frequent neurological disorder (1:1000-10.000) characterized by tics, both vocal and motor, frequently associated with obsessive-compulsive disorder or attention-deficit hyperactivity disorder.

A 10 year old boy who has been under the assistance of a child psychiatrist for the last two years, intellectually dissabled, with the degree of moderate intellectual deficit, manifesting in hyperactivity, attention deficit, both vocal and motor, with short height, synofris, long curly eyelashes, clinodactyly of fifth fingers, skeletal and limb deformities, congenital aortal valvular defect. EEG is irregular, without specific electrocortical disfunction, with slowing focal or of significant assymetry.

His father had physically abused him, beat him, because he was upset by FK’s behavior (vocal tics, ADHD). Father considered that this behaviour was consequence of misbehavior, and he used physical punishment as educational tool. As a result of his father’s violence FK was hospitalized and survived operativ intervention of pancreas- rupture caused by beating.

During psycho-diagnostics, the client is chatty, warm, but often distracted by other non-essential things, cannot sit in one place for a long time. Occasionally, he gives up and refuses to cooperate, but on the other hand, he easily gives in. According to the intellectual abilities, he is in the category of a mild intellectual disability. The difference between manipulative and verbal scales is in favour of verbal scale, but the difference is not statistically significant. Lowest score is obtained on the subsets that are burdened by distractibility factor, which confirms the hypothesis of the existence of ADHD. The result in the personal inventory tells us that FK is an unstable introvert. He has fixation - eg. he is obsessed with washing machines.

Actual therapy: Metilfenidate 18 mg/day, Risperidone 2x0.5 mg, Clonazepam 2 x0.5 mg.

The probability of coexistence of Gilles de la Tourette syndrome and Cornelia de Lange syndrome in the same individual is 1 : 247 500 000 (1: 30 000 000-600 000 000). This is a matematical aproximation, the clinical probability must be much higher. We found a case description of coexistence of CdLS and Turner syndrome but we couldn’t find any with CdLS and Tourette syndrome in the same individual. We try to discuss the forensic aspects of this rare case.
6. The Finncrime study
H. Elonheimo, D. Gyllenberg, L. Sillanmäki, J. Huttunen, T. Ristikari, and A. Sourander

The context of the Finncrime Study is developmental, life-course, and epidemiological criminology.

Objectives: To find out facts about the occurrence and psychosocial causes and correlates of crime.

The population-based longitudinal study includes 5,405 females and males born in Finland in 1981. Information on psychosocial risk factors was gathered at age 8 by questionnaires to children, parents, and teachers. The instruments relied on CDI and Rutter questionnaires. When the males entered the military call-up at age 18, they filled questionnaires again (Young Adult Self-Report). Information on psychiatric disorders of the males was obtained from the military register for ages 18-23. Data on crime at ages 15-30 were received from the Finnish National Police Register (minor traffic offending was excluded from all analyses). Information on mortality up to age 30 was received from Statistics Finland.

Of males, 60% and of females, 25% were registered for offending. Crime concentrates heavily in a small group, as just one per cent committed 42% of all crimes. (Elonheimo et al. 2014) A wide range of psychosocial problems in childhood (Sourander et al. 2006), adolescence (Elonheimo et al. 2009, 2011) and early adulthood (Elonheimo et al. 2007) were related particularly to active offenders. Problems encountered by this group culminated in high mortality (Elonheimo et al. 2015).

The strong associations between crime and various psychosocial problems emphasize the need for rehabilitative efforts in criminal policy. The fact that risk factors could be observed already in childhood supports early prevention.

7. Juvenile offenders: Risk factors for violent behavior
J. Martinez Mas, M. R. Siñol, N. D. P. Sanchez, C. Mendoza, Jaume, R. S. M. P. Conill, M. C. Ramirez, and O. C. P.

The Parc Sanitari Sant Joan de Deu Hospital, Barcelona (Spain), has a therapeutic unit specializing in prevention, assessment, treatment and rehabilitation of young offenders who have mental health problems and addictions. Several studies show that there are risk factors associated with delinquent behavior, the most important variables are related to biological factors (perinatal exposure to environmental toxins, brain development...), psychological factors (insecure attachment, temperament, intelligence...) and social factors (education, violence and family abuse...)

The goal of this study is to identify risk factors for development of violent behavior in young offenders

251 patients treated in our Unit are followed from January 2006 to December 2014 in a retrospective study by interview: family history, personal and biographical history, diagnosis and violent behavior.

32.4% of the sample has a mental disability, 8.8% had been exposed to toxins by the consume perinatal maternal drugs, 20.7 % presented diagnosis of psychotic spectrum, personality disorder in 60.6% and substance disorders in 44%. The 20.7 % of parents has an addictions to substances. The psychological abuses suffered by 52 %, 27% physical and sexual abuse by 7.6 %. 37.1% of the sample are immigrants. Separated parents in 57% of cases. Criminal antecedent’s relatives in a 17.2%. Death of a parent in 19.2%.

The abuse suffered in childhood, family and social factors play an important role in the development of future problems in these youngsters. Prevention programs should be implemented.
8. Antisocial behaviours in adolescence: What is behind deviancy?
A. M. Morgado and M. L. Vale-Dias

The antisocial phenomenon in adolescence is a growing matter of concern in our society due to the increase in frequency and severity of deviant conducts during a developmental stage when individuals face multiple social, emotional and physical changes.

The aim of our research was to study and understand what behaviours are displayed by adolescents from the general population and what significant variables may be involved in their behavioural manifestations (namely, social skills, self concept, personality, family relations, socioeconomic status, age and gender).

A sample of 489 Portuguese youths were asked to fill, in classroom, a sociodemographic questionnaire and Youth Self-Report; Social Skills Questionnaire – Student Form; Family Environment Scale; Piers-Harris Children’s Self-Concept Scale-2; and Eysenck Personality Questionnaire-J. Their parents were also asked to fill the Child Behavior Checklist and a sociodemographic questionnaire.

Results point out to the existence of significant differences between individuals with higher and lower antisocial tendencies in several dimensions of personality, self-concept, social skills, and family environment and some of those dimensions predicted the score obtained in some factors from YSR and CBCL.

We believe that this study presents great value for understanding such a challenging phenomenon, providing significant results and explaining important amounts of variance while addressing multiple sets of variables. Therefore, by considering multiple sets of variables, our work provides an important contribute in deepening our knowledge of the variables in play in adolescent antisocial behaviour and offers interesting cues for designing and implementing intervention programs.

9. Preventing aggression in schools: Qualitative analysis on a community-based and universal intervention with adolescents
P. Vagos, D. Rijo, and I. M. Santos

Aggression and victimization are becoming routine experiences for adolescents. The adolescent version of the preventing aggression in schools initiative aims to diminish aggressive interaction patterns, by adopting a social information processing framework and using a universal (i.e., considering aggressors, victims and bystanders) and school-based format.

Based on a participatory action research approach, we intended to present qualitative data on the evaluation of this intervention, as reported by group leaders and adolescent participants, and to propose alterations to the program.

The perceptions of four group leaders were analyzed based on their written account on the fulfillment of the goals and tasks assigned to each session. The perception of two classes of adolescent participants was analyzed based on their oral comments (via focus groups) concerning the duration and impact of the intervention and the perceived suitability of the tasks and materials.

The program was altogether considered pertinent, as having an impact on behavioral change, and as being recommended for future use. In order to improve the suitability of the tasks, three out of twenty-four tasks were altered and eight were adapted to be presented in a more interactive manner.

Universal intervention programs for aggression can be negatively affected by extensive contents and intervention goals, and by being applied to groups where, sometimes, inside conflicts exist. Still, this preliminary evaluation is encouraging regarding the suitability of an intervention in such contexts, as long as an eminently practical approach is adopted throughout.
10. Preventing aggression in schools: preliminary evaluation of a psycho-educational intervention with teachers
P. Vagos, D. Rijo, and I. M. Santos

Teachers are frequently called upon to manage conflict situations in their classrooms, while also teaching. The teacher version of the Program for Preventing Aggression in Schools aims to prepare teachers to do so, by providing them with extended knowledge on, firstly, features of diverse interaction patterns and, secondly, specific behavior management tools.

This work intended to present preliminary quantitative and qualitative data on the evaluation of that program as well as alterations that followed from these evaluations.

The perceptions of seven participating teachers were assessed via written self-reports. Quantitative data involved ratings of the goals, contents and timing of the intervention based on a four-point scale ranging from insufficient to very good. Qualitative data considered the professional usefulness of the intervention, as well as its strong points and limitations.

Participating teachers praised the pertinence of the objectives and contents of the intervention, and how they were easily transposed to the teachers’ professional daily practice. However, participants requested some contents to be considered in greater detail. In line with this, all contents of the intervention were kept but reorganized so that every session included theoretical exposition of contents and participatory examples of their practical application.

Conclusion: Teachers are not prepared to manage interpersonal behaviors, nor are they trained to do so. This preliminary evaluation concurs both with the need of making such training available and with the possibility of delivering it in a way that will promote perceived positive professional repercussions.

11. What do others feel? Association between callous unemotional traits and conduct problems among preschools and cognitive empathy deficits
G. Georgiou, K. A. Fanti, and E. R. Kimonis

Callous unemotional traits (CU) are a risk factor for antisocial and aggressive behavior, with theory suggesting that poor empathy can explain this link. However, little is known about whether deficits in affective or cognitive empathy differentially predict antisocial behavior among those high on CU traits. The current study sought to investigate whether CU traits predict conduct problems (CP) and overt and relational aggression, and if impairments in cognitive and affective empathy mediate these relations among preschool children. We followed a multimethod approach, collecting data from parents and teachers of preschool children (N = 214, Mage = 4.7 years) on empathy subcomponents, CP and aggressive behavior. Results revealed that cognitive empathy was associated with antisocial behavior, and also mediated the relationship between CU traits and CP. However, results were non-significant for empathy total scores and the emotional empathy scale. Additionally, CU traits only significantly predicted overt aggression. Cognitive empathy is an underestimated component of CU traits. Our findings suggest that cognitive empathy may be more important than affective empathy in explaining antisocial behavior in preschool children, providing a new perspective in the understanding of these traits. Thus, interventions may need to take in account deficits in the ability of high-risk antisocial children to understand what others think or feel.
12. Monitoring and evaluation of adolescent criminal law in the Netherlands
J. C. Lise, A. M. van der Laan, C. S. Barendregt, and C. van Nieuwenhuizen

On the first of April 2014, a change in the Dutch justice system was made with regard to the sentencing of juvenile and young adult offenders. This change in protocol is referred to as ‘Adolescent criminal law’. The Netherlands has a juvenile court for sentencing juveniles between the ages of 12 and 18 and an adult court for sentencing individuals above the age of 18 years. Depending on conditions such as the personality of the offender, the seriousness of the offense and the circumstances in which an offense is committed, exceptions in sentencing of juvenile and young adult offenders (age 16 to 23) are possible. On the one hand it is possible to use a waiver of sentencing juvenile offenders (16-17) according to adult court; on the other hand it is possible to sentence young adults (18 to 23) according to juvenile court. This PhD research consists of three studies. In the first study, characteristics of young adults (age 18 to 23) who have been sentenced in juvenile court will be determined and compared to young adults who have been sentenced according to adult law. In the second study, the sentencing of young adults in juvenile court will be compared with (juvenile) criminal justice systems of different (Northern) European countries. In the third study, the effectiveness of waiving young adults’ cases to a juvenile court will be examined in terms of resocialisation outcomes and recidivism. It is expected that young adults who have been sentenced in juvenile court differ from young adults who have been sentenced in adult court, in for instance personality development. A multi-method design is used. Data collection includes a literature study, interviews with stakeholders and registration data of several partners in the criminal justice chain. The study design of the three studies will be presented. Also, preliminary results will be showed. It will be studied if and how taking individual development of young adults into account in sentencing according to juvenile law, will eventually result in a reduction in recidivism and a better rehabilitation.

13. Investigating sex differences in risk-taking behaviour in adolescents with conduct disorder in the FemNAT-CD study

Risk-taking is a key feature of conduct disorder (CD); previous research has shown that males with CD make more risky choices on decision-making tasks in comparison to healthy control (HC) males. However, no research has investigated whether greater risk-taking is also seen in females with CD.

The goal of this study is to investigate sex differences in the relationship between CD and risk-taking behaviour in adolescents. Our sample included 38 CD adolescents (24 males) and 44 HCs (22 males). Risk-taking was measured using the Risky Choice Task, where participants tried to win points by choosing between two ‘roulette wheels’. In 8/10 of the trial types, one wheel was the riskier choice, although the probability and the magnitude of risk varied. The remaining two trials measured framing effects; whilst neither wheel was statistically a riskier choice, one was framed to appear riskier.

In the eight trial types where one wheel was riskier than the other, the CD group made more risky choices compared to HCs (p<0.001). Additionally, a significant sex-by-diagnosis interaction was found on the framing trials, whereby CD males made significantly more risky choices than male HCs, whilst CD females made fewer risky choices compared to female HCs. It appeared that group differ-
ences in the other eight trial types were driven by heightened risk-taking in the CD males.

Our findings demonstrate that although risk-taking is associated with CD in males, this is not necessarily the case for females with CD, strengthening the notion of sex differences in the disorder.

14. The family influence through the deviant peer group on substance use in adolescence
O. Cutrín, L. Maneiro, and A. Gómez-Fraguela
The family context and the peer group have been related to a wide variety of antisocial behaviours in adolescence, among others, the substance use. Thus, the level of parental monitoring, the quality of family relationships or the affiliation with a group of deviant peers are indispensable factors to assess the risk of being involved in behaviours of drug initiation, use or abuse, in adolescence. The aim of this study was to assess the indirect effects of family context (i.e., monitoring, support and conflict) through the mediation of antisocial peer group on juvenile substance use and abuse. The sample was composed of 584 young people aged 14 to 20, 46.9 % males, from High Schools of Galicia (Spain). The variables were measured using self-reported scales from the protocol Valoración del Riesgo en Adolescentes Infractores (VRAI) [Juvenile Offender's Risk Assessment]. Results showed significant mediation effects. Thus, low parental monitoring, high family support and high conflictive familiar relationships were positively related to the substance use and abuse through the adolescent's affiliation with a deviant peer group. The presence of significant mediation effects suggests that an early intervention focused on negative or ineffective parenting skills might mitigate the affiliation with an antisocial peer group in the adolescence, and directly and indirectly would prevent the development of substance use and other antisocial behaviours in youths.

15. Children and adolescent multiple victimization: Guidelines for intervention
S. Caridade, A. Sani, and L. Nunes
The research related to child and adolescent victimization has been increasing exponentially. However, the majority of international studies and policy interventions focus on particular forms of individual victimization, such as sexual assault, physical abuse, bullying and exposure to domestic violence. Thus, an approach of these phenomena throughout life has been neglected, as well as the fact that children and adolescents can experience different traumatic events throughout their lives and in different contexts (home, school, community). We try to analyze and discuss the main intervention strategies to adopt with such victims. This work was developed from a review of the literature. In the international and national literature there are numerous initiatives for intervention with young victims. However, these neglect certain specific aspects of the reality of child and adolescent multiple victimization throughout life, such as the differential victimization experiences. In fact, the victimization situations can occur in different contexts of life, and the impact of those situations may vary, and these facts must be considering in an intervention process. Our proposal is that the intervention in this area should be as soon as possible, and must follow a multi-level and systemic approach, producing multiple preventive efforts, in the primary, secondary or tertiary levels. This approach must also attend to the different contexts of life. In order to assess to the multiple victimization and their negative consequences, it is crucial to develop a comprehensive and integrated model that leads us to the most suitable therapeutic strategies.
16. Psychological assessment in young people with deviant behaviours
S. Caridade, L. Nunes, and A. Sani
Psychological assessment is always a complex process that must attend to
the specificities of the individual, the group and the community. Thus, there are
no exceptions with regard to populations with deviant behaviours and, within this
very large group, we should consider the specificities underlying those behaviours
and the context of its manifestation. We propose a plan directed to young people
with deviant behaviours. This work was developed from a review of the literature
The plan proposed must have some flexibility, following the procedures recom-
mended, but regarding the specificities of the evaluation target. This is a propos-
al that aims to integrate a more idiographic field, which analyzes of the subjective
aspects (e.g., family functioning, social and occupational), using techniques such
as observation and interview, and also attending to the objective elements (e.g.,
personality), through the use of structured instruments. This assessment plan in-
corporates the young people with problematic behaviours, their family context,
and other social settings (like school, peer group), that has a crucial role in the
individual’s socialization, and may determine its normative or deviant behaviour.
Depending on the particular circumstances of the case, this proposal for evalua-
tion plan may suffer adjustments, and may be complemented with other evalua-
tion procedures suggested by other protocols

17. School diagnostic: perceptions of educational professionals
S. Caridade, L. Nunes, and A. Sani
The school is a privileged context to prevent certain problems (e.g., lack of
discipline, school failure, truancy, and dropouts), including violence (more specifi-
cally, bullying), that may begin during the development of the young students, and
may enhance the adoption of violent behaviour or even victimization. The main
objective is to access the perceptions of educational professionals. We developed
an exploratory study using a questionnaire, applied to a sample of 81 educators
agents, teachers and non-teachers, aged between 25 and 62 years (mean = 45.8
and a standard deviation = 10.6). Despite the positive perception of the partici-
pants about the physical environment, it is necessary to create spaces for leisure
and sport, logistic conditions and multidisciplinary teams, in order to maximize the
overall good functioning of schools. Adding to this, the individuals described the
participation of parents in the school life as negative; they also identified several
disruptive behaviours among students, and also pointed to a general lack of active
participation in life school. It is important to create action plans in schools, which
should be multimodal and multi-agent, in order to have intervention perspectives,
with connected actions developed by different educational agents.

18 Attention in individuals with conduct problems and callous
unemotional traits: eye tracking data
M. N. Kyranides and K. A. Fanti
The present study examines whether heterogeneous groups of young
adults identified based on their longitudinal scores on Conduct Problems (CPs)
and Callous Unemotional (CU) traits, collected during adolescence, differ on eye
gaze behavior during an affective dot probe task. Seventy-six participants (53.8% females,
M age =19.96) were selected from a large sample (n=1893; 50.2% fe-
male, M age =16.99) of adolescents. Identified participants were administered
two affective dot probe tasks, one including words and the other including pic-
tures. Attention allocation to emotional stimuli (distressing, threatening, and posi-
tive), was recorded using the Tobii X120 eye-tracking unit (e.g. proportion of gaze
duration). To control for location effects a facilitation index was calculated by subtracting the total eye gaze duration for affective stimuli from the mean eye gaze duration for neutral stimuli, but compared emotional to neutral stimuli in the same location. Individuals with CPs, exhibited selective impairment in attending to distressing words and pictures. This pattern of results indicates that individuals with high CPs display more scattered eye movements and attended to affective stimuli less compared to individuals with low CPs. The current findings built upon prior research pointing to impairments in executive functioning in individuals with CPs, possibly inhibition control difficulties. The results of the current study have scientific interest as well as considerable practical applications, as findings contribute to the understanding of the attentional deficits that are implicated in individuals with CPs, and the importance of addressing them when developing prevention and intervention programs.

19. Self-rated psychopathic traits in a sample of Finnish treatment-seeking girls with internalizing and externalizing disorders

There is a need to get a clearer picture of the relationship between psychopathic traits and other forms of psychopathology in non-criminal samples of adolescent girls. The aims of the present study were to compare self-rated psychopathic traits between female psychiatric out-patients suffering from internalizing and externalizing disorders and girls in community, and to investigate how psychopathic traits relate to psychiatric disorders. The out-patient sample comprised 163 girls aged 15- to 17-years with a mean age of 16.0 years (SD 0.86). Psychiatric diagnoses based on the ICD-10 were collected from patient files. The community sample consisted of 200 9th graders from secondary schools. The Youth Psychopathic trait Inventory (YPI) was used as a self-assessment tool. Girls with internalizing disorders exhibited significantly lower total and dimensional psychopathy scores than those with externalizing disorders. In comparison with community girls, girls with internalizing disorders scored significantly higher on the Behavioral dimension of the YPI, but girls with externalizing disorders showed also significantly higher total as well as Interpersonal and Affective dimension scores. Psychopathic traits associated significantly with having a psychiatric disorder, depressive disorders, ADHD and conduct disorders. Female psychiatric out-patients differ from community girls in psychopathic traits. Screening psychopathic traits as part of a psychiatric examination of treatment-seeking girls seems to be relevant, especially among those with externalizing disorders.

20. The assessment of Psychopathic Personality (PP) in Greek Cypriot children from the age of 3: the child and problematic traits inventory
C. A. Demetriou and K. A. Fanti

Research that investigates the development of PP from early childhood, into adulthood becomes even more crucial in order to understand the developmental trajectories of psychopathic traits and the stability of severe and long-lasting conduct problems and criminal behavior. An important mission of the research is to effectively assess these traits early in life in order to prevent the development of antisocial behavior, although a critical question is how far down in ages this construct can be and should be measured. The aim of the current study is to gain a deeper insight into the development of PP during early childhood by investigating the potential association of these traits with external constructs of interest based theories, namely: conduct problems, affective and cognitive empathy, ADHD, and
contextual variables such as parenting. Participants in the present study were 850 Greek-Cypriot children, between the ages of 3 and 8 from 80 nursery and primary schools in Cyprus. Correlations and Linear Regression analyses suggested that the affective dimensions of the PP are shown to predict significantly decreased levels of affective empathy, when all the other dimensions of psychopathy predicted negatively the cognitive dimensions of empathy. Additionally, the behavioral dimensions are shown to predict all those children showing high rates on impulsivity, need for stimulation, sensation seeking, proneness to boredom, parasitic lifestyle, lack of realistic long term goals, and irresponsibility. The other findings and the implications will be discussed.

21. Neuronal basis of facial expression processing in youths with conduct disorder
W. M. Menks, L. V. Fehlbaum, L. El Qirinawi, F. Euler, N. M. Raschle, and C. Stadler

Behavioral and neuroimaging research has associated CD with deficits in facial expression recognition. However, evidence for the neuronal basis of face processing is limited in CD, especially in relation to eye gaze/attention. There is first evidence of impaired eye contact in CD (Dadds et al., 2014), which could explain the observed dysfunctional face recognition and altered neuronal pattern. So far, no fMRI study has investigated face processing and eye-tracking simultaneously.

Objectives: (I) Examine our eye-tracking neuroimaging paradigm (II) Investigate brain activation patterns and eye gaze during emotional face processing in youths with CD.

We collected whole-brain functional neuroimaging data of 64 adolescents (37 CD/27 controls; 15.5y) during an emotional face processing task including online eye tracking. The group was characterized using standardized clinical interviews/questionnaires (KSADS/RPQ/YPI/ICU). During fMRI, participants had to determine the gender of face stimuli (angry/neutral/fearful) presented in a mixed event-related block design. Data were analyzed for all/girls/boys with a region of interest follow-up analysis.

Adolescents with CD displayed significantly higher CU traits (YPI (110.8/94.8), ICU (27.0/19.2)). Eye-tracking data will be presented and discussed. Preliminary fMRI evidence indicated altered activation in temporal and occipital cortices for angry facial expressions. Girls, but not boys, with CD showed hyperactivation in emotional network. Similarly, youths with CD displayed hypoactivation in right lingual gyrus and occipital regions for fearful faces; this finding was replicated in girls only.

Our results indicate altered neuronal activations during facial expression processing compared to controls and suggest possible gender differences.

22. Individual risk factors for antisocial behaviour in institutionalized youths
L. Maneiro, O. Cutrín, and J. Sobral

According to the principles of effective correctional treatment, the intervention programs for offenders should focus on dynamic risk factors which are modifiable and are associated with changes in the probability of recidivism. Thus, individual risk factors that contribute to the antisocial behaviour should be assessed in order to improve the young offender’s treatment programs. The aim of this study was to assess the individual risk factors which influence the development of antisocial behaviour (aggressive behaviours, rule breaking behaviours, theft, and vandalism), both in juvenile centres and foster care centres. The sample was com-
posed of 440 youths (72.4% males) aged 12 to 22, coming from different juvenile centres in both the autonomous community of Galicia and Andalucía (Spain), as well as different foster care centres in Galicia. Data collection was carried out by means of the protocol of Valoración del Riesgo en Adolescentes Infractores (VRAI) [Juvenile Offender’s Risk Assessment]. The only factor that was significantly associated with all antisocial behaviours, both juvenile centres and foster care centres, was the substance use. Furthermore, in juvenile centres, the risk factors which significantly contribute to antisocial behaviour were violent attitudes, sensation seeking, and school/working engagement. On the other hand, in foster care centres, narcissism was the most leading factor in addiction to substance use. The determination of the most influential individual risk factors for antisocial behaviour contributes to the development of specific and effective interventions with youths in juvenile centres and foster care centres.

23. The design of an effect study on multiproblem young adults: What works for whom?
M. Luijks, F. Bevaart, J. Zijlmans, L. van Duin, R. Marhe, T. Doreleijers, and A. Popma

The Academic Workplace at De Nieuwe Kans (translated as: New Opportunities) is conducting a large-scale research project on young adults between 18 and 27 with multiple problems such as unemployment, psychological problems, delinquency, drug addiction, financial problems, a poor social network, and homelessness. In order to investigate which interventions are effective for (sub)groups of multiproblem young adults, we are performing a Randomized Controlled Trial (RCT). The main objectives of the study are: 1) Determining the (cost-)effectiveness of the multimodal day treatment program De Nieuwe Kans (DNK) in comparison with treatment as usual; 2) Determining the predictors of treatment success and failure and using these to create profiles within the group of multiproblem young adults; 3) Determining the program integrity of DNK. With the results of this study, we hope to aid the development of evidence-based and cost-effective treatment programs for multiproblem young adults. Between August 2014 and August 2016, 500 multiproblem young adults are being recruited at a municipal facility, the Jongerenloket, from which they are randomly assigned to DNK or treatment as usual. After the baseline measurement (T0) three follow-ups are conducted: 2 months after the start of the intervention (T1), 8 months after T0 (T2), and 14 months after T0 (T3). All the data are collected via questionnaires, or consist of record and registration data. The primary outcome measures of the effect study are recidivism and self-sufficiency. Results are expected in April, 2018.

24. Juveniles who have committed sexual offenses: Patterns and subtypes
E. Bradt, T. Vertommen, K. Uzieblo, and D. van West

Sexual offenses are usually defined as behaviour that includes any interaction with person(s) of any age that is perpetrated against the victim’s will, without consent, or in an aggressive, exploitive, manipulative, or threatening manner (Ryan, 2010). While research has been mainly focusing on adult sex offenders, there is increasing attention for minors who commit sexual offenses that would be considered as a crime if they were adults, i.e. the juvenile sex offenders. Nevertheless, knowledge on the nature of and the predictive factors for different forms of sexual offences in juveniles remains limited. The current study aims to explore the characteristics of juvenile sexual offending in a Belgian sample. In collaboration with the Flemish Intersectoral Collaboration and Support Platform
for Sexual Offending in Juveniles an extensive case-file study was conducted in which the characteristics of the juvenile offenders, their victims and a wide range of psychosocial risk and protective factors were explored. Preliminary results indicate an overrepresentation of male offenders who committed a hands-on offence on extrafamilial victims and who did not exhibit clear criminal precursors. Developmental disorders were the most prevalent diagnosed psychiatric disorders among these juveniles. Due to practical considerations, data collection and analysis are still in progress and will be completed in time for the conference.

25. Intervention in residential care context with children and young victims of violence
A. I. Sani, S. Caridade, and L M. Nunes

Violence against children and young people is a reality to much present than we can see throughout the official statistics. So, the residential care is one of the solutions for those cases. This social response must be ensured with quality, and should allow children and youth to an integral development in order to achieve a promising future. However, social discourses about residential care are often negative, and very critical. Sometimes those speeches appeal to other familiar alternatives, even if there no more familiar solutions. But the true is that this social responses are insufficient.

We aim to characterize and provide some guidelines for intervention in residential care context, with children and young people victims of violence, considering their best interests.

This work was developed from a literature review.

In this regard, we discuss the residential care as a response that sometimes is necessary in order to break the cycle of violence. In some cases this is the solution to provide a life opportunity to those young people. So we will report some key points about intervention plans in structures that provide residential care. Some of these suggestions are: i) the preparation for reception/way out; ii) the priority of security; iii) the biopsychosocial support to children and young; iv) the strengthening of the attachment relationships; v) the cooperation between community and protection services; vi) the relevance of personal social networks.

In this different stages of residential care process, it is important that all professionals intent to answer to the real needs of children and young people, looking at their best interests, in order to minimize the constraints of residential care, and promote their biopsychosocial development.

26. Identifying risk profiles for antisocial behavior in a Spanish sample of institutionalized youths
L. López-Romero, L. Maneiro, O. Cutrín, and P. Villar

One of the main purposes of juvenile risk assessment is the possibility of guiding intervention planning by indicating what areas may be best targets for intervention and, thus, reducing the likelihood of reoffending for a youth. Therefore, risk assessment tools should serve for identifying distinctive risk profiles in order to divert young offenders into specific intervention programs based on their specific needs.
This study is devoted to identify main typologies of risk in a Spanish sample of institutionalized young offenders by classifying them into distinctive risk profiles through a person centered analytic approach, and based on the results obtained from the protocol Valoración del Riesgo en Adolescentes Infractores (VRAI) [Juvenile Offender's Risk Assessment].

Data was collected in a sample of 340 youths, aged 14 to 22 (mean age = 17.36), from the Juvenile Justice System, and housed in correctional institutions in Galicia (55.6%; NW Spain) and Andalucía (44.4%; S Spain).

Participants were classified into different typologies, representing different levels of risk in terms of individual (e.g., impulsivity, hostility) and psychosocial (e.g., parenting skills, antisocial friends) dynamic variables. These profiles showed their distinctiveness and meaningfulness in a set of comparisons on a wide range of historical, behavioral, individual and psychosocial external criteria.

A preliminary representation of risk typologies has been delineated. Although further research is needed, the profiles that emerged suggest that a limited number of specialized interventions may respond to the main needs of most of institutionalized youths. Theoretical and practical implications will be further discussed.

27. Inventory of European diagnostic and treatment guidelines and practices for children (6-12 years) with severe behaviour problems (SBP’s)

A. Gătej, A. Lamers, L. van Domburgh, and R. Vermeiren

Severe behaviour problems (SBP’s) in early childhood (including oppositional and aggressive behaviours) are often stable and predict negative mental health outcomes later in life. Many children with SBP’s are unresponsive to treatment (Lahey & Waldman, 2012), and numerous concerns are raised about the suitability of current treatments for this group (Kutcher et al., 2004). Moreover, it is unknown how many countries in Europe have official guidelines for SBP diagnosis and treatment, and what occurs within clinical practices. The present study tackles these questions, by exploring the status of guidelines and treatments targeting childhood SBP’s employed and preferred by clinicians. Two online semi-structured interviews were used to create an inventory of a) nationwide guidelines (1 expert/country in behaviour disorders in children) AND b) clinicians’ practices and opinions/preferences (10 clinicians/country with expertise in behaviour disorders in children) on diagnosing and treating children aged 6-12 with SBP’s across Europe. Additionally, an inventory of the use across clinical practices of the common treatment elements of evidence-based practice described in the literature was included (Garland et al., 2008). Results are currently pending and are expected to be obtained within the next three months. The study gives insight not only into how SBP is diagnosed and what is preferred and considered effective for treating SBP in children, but also into which elements are essential for making a treatment successful, and into how guidelines aid to and are applied within clinical practices across Europe, building on the literature of aggression management in children.

28. Gxe-based criminal dangerousness in psychopaths: implications for the law

M. I. G. Tapia, I. Obsuth, & R. Heeds

Currently, criminal law does not excuse or mitigate ‘psychopaths’. In fact, it is, or can be, an aggravating factor, according with their supposed higher criminal dangerousness. However, recently, some experts are suggesting that the current legal treatment of psychopathy should be reconsiderated, in light of new findings
from behavioural neuroscience and genetics. Particularly, they call for a different approach to criminal responsibility, one based on biological impairments. Of course, such eventual exoneration would lead to a biosocial-based criminal dangerousness and, necessarily, to broader consequences for psychopaths. This paper addresses exactly this challenge. Initially, the key questions from the legal system to science could be: What is a psychopath? Is psychopathy a mental disorder or, at least, a pathological mental alteration? And if so: do psychopaths have rational capacity? Are they able to “understand”, “appreciate” right from wrong (cognitive test) and control their impulses (control test)? Are psychopaths more criminally dangerous than other criminals? None of these key questions seem to have a consistent answer in the literature yet. For this reason, also because of the existence of “successful psychopaths”, we conclude that the current legal treatment for, at least, “primary psychopathy” should not be modified. Criminal law requires “respect” for statued rules, not “emotional commitment” to them. We suggest, however, that, beyond categorical definitions, “secondary psychopathy”, as well as coincident ASPD individuals with non-psychopathic traits, might have, in the singular case, a different legal treatment, based on a supposed pathological behavioral low-self-control (impulsivity) impairments.

29. Empathic accuracy in female adolescents with conduct disorder and varying levels of callous-unemotional traits
G. Allison, G. Fairchild, and N. Martin-Key

Conduct Disorder (CD) is associated with deficits in empathy and emotion recognition abilities. However, most research has focused primarily on males, and has used self-report empathy measures or tasks measuring recognition of static expressions. Previous research with females has found negative associations between CD and empathy. However, it remains unclear if these impairments will still hold if objective measures and ecologically valid stimuli are used. The goal of this study is to measure empathy in female adolescents with CD using an ecologically-valid empathic accuracy (EA) paradigm. We used an EA paradigm to assess EA, emotion recognition, and affective empathy in 42 female adolescents (19 CD, 23 controls). The CD sample was sub-divided based on callous-unemotional (CU) traits into high (CD/CU+) and low (CD/CU-) subgroups. Participants watched films of actors recalling experiences in which they felt happiness, sadness, surprise, anger, disgust, or fear and continuously rated the target’s emotional intensity (EA), identified the actor’s emotion, and reported their own emotions (affective empathy). Females with CD displayed reduced EA for disgusted clips, as well as reduced affective empathy for happiness, sadness, fear, and disgust relative to controls. There were no group differences in emotion recognition. There were also no differences between CD/CU+ and CD/CU- subgroups in EA, emotion recognition, and affective empathy. Our results extend previous work by demonstrating impairments in EA and affective empathy in females with CD. Both CD/CU+ and CD/CU- females exhibited empathy impairments, suggesting that such difficulties are not mediated by CU traits.

30. Risk factor and mental health symptoms in a Chilean sample of persistent young offenders

Adolescents with persistent delinquency shows significant differences, being a heterogeneous group in behavior and risks factors related to the origin and maintenance of criminal behavior (Moffitt, 1993; Frechette & Le Blanc, 1998). In
Chile, the Multidimensional Model of Differentiated Intervention for Adolescents (MMIDA) has differentiated this group into five trajectories that express this heterogeneity based in psychological, conduct and risk characteristics (Alarcón et al., 2014).

Objectives: characterized the differences in risk factor and mental health issues in a Chilean sample of persistent young offenders.

Mean differences and size effects for risk factor evaluated with the FER-R (Alarcón, Wenger, Chesta, y Salvo, 2012) and mental health symptoms, assessed with CESMA (Berrios, et al., 2014) in a sample of 330 persistent male adolescents offenders (14 to 18 years 11 months at evaluation).

Significant differences between the five persistent trajectories in total risk factor, in some areas evaluated -like attitudes and drugs- and also in mental health symptoms.

The adolescents with persistent offending behavior group has heterogeneous characteristics. Therefore it is necessary to assess them, not only for make the distinction between transitory and persistent delinquency, but also to highlight the diversity inside the persistent group, and consider the results in court decision (pre-sentences) and planning interventions.

31. Using multivariate pattern analysis to distinguish youths with and without conduct disorder based on brain structure
E. Flemming, N. M. Raschle, L. V. Fehlbaum, W. M. Menks, F. Euler, M. Guggenmos, M. Rothkirch, C. Stadler, and P. Sterzer
Conduct Disorder (CD) is characterized by antisocial and aggressive behavior and impacts not only patients' social functioning, but may also harm others. Early detection of individuals at risk is crucial for an optimal treatment response. Multivariate pattern analysis (MVPA) applied to neuroimaging data is a promising tool with the potential to identify patient groups, potentially even on an individual level. MVPA has successfully identified adults with high psychopathic traits using gray matter (GM) quantitative data. However, no study yet has used MVPA in youths with antisocial and aggressive behavior. The main goal of the study is the development of a classification algorithm based on GM to discriminate CD youths from healthy controls. Additionally, the study aims at predicting the level of callous-unemotional traits in individual adolescents from GM data. 39 youths with a diagnosis of CD and 16 controls have been tested across two sites (Berlin/Basel) using clinical interviews and structural neuroimaging. After standard voxel-based morphometry analysis a classification algorithm will be trained on the smoothed, DARTEL-normalized GM images using multivariate pattern analysis aiming at differentiating CD and controls. We will provide first evidence whether CD can successfully be classified based on GM data and the influence of callous-unemotional traits will be assessed. Automated classification methods such as MVPA are promising tools to discriminate CD youths and controls at an early stage of development. Identification of high-risk patients with elevated callous-unemotional traits may further inform about subgroups within CD and influence diagnosis and treatment.

32. (Non)aggressive assertiveness: psychosocial characteristics of assertive non-aggressive and aggressive adolescents
A. Melo, and P. Vagos
Assertiveness and aggression are commonly seem as incompatible interpersonal behaviors. While assertiveness relies on an honest and empathetic self-expression, aggression intends to dominate others and imposing ones' will.
Still, they may co-occur, referring to an aggressive assertiveness. This study intended to evaluate the divergent or concurrent practice of assertive and aggressive behaviors in adolescents, and to associate these behavior combinations with several psychosocial variables.

A sample of 318 adolescent students, male and female, aged 12 to 18 years old was assessed by self-report questionnaires, concerning socio-demographic characteristics, assertive and aggressive behavior, perception of social support, and mental health.

Cluster analysis returned two groups presenting different levels of aggressive behavior, but similar levels of assertive behavior. The more aggressive group included mainly boys, and reactive aggression was the most commonly reported behavior. The less aggressive group included mainly girls. All in all, less aggressive participants reported significantly more positive perceptions of social support, though boys from both groups had equal perceptions of reassurance of worth and attachment, and girls from both groups had equal opportunities for nurturance and reassurance of worth.

The practice of aggression doesn’t imply the non-practice of assertiveness. When trying to diminish aggressive behaviors, cognitive reappraisal of social cues may be more important, in helping to select the most appropriate social behavior, rather than training skills that aggressive adolescents already seem to possess, namely assertiveness. Gender-specific intervention guidelines should also be considered.

33. A shame focused approach to explaining peer victimization in adolescence
R. Marques, P. Vagos, and D. Rijo

Negative early experiences (e.g., abuse or rejection) on the one hand and shame on the other have been related to various types of psychopathology. Their role on peer victimization in adolescence has, alternatively, seldom been addressed.

This study aimed to explore the role of current feelings of shame and coping with shame strategies as mediators in the relationship between early experiences and peer victimization.

A school-based sample of 178 participants male and female, aged 15 to 19 years was assessed via self-report questionnaires. A structural equation modeling approach was used for data analysis.

The centrality of early experiences of shame and the lack of experiences of warmth and safeness in childhood predicted current levels of shame, which in turn predicted three types of peer victimization (Overt, Relational and Reputational). Different coping with shame strategies (Withdrawal, Attack Self and Attack Other) mediated the relationships between shame and overt victimization. Relational or reputational victimization were not predicted by any coping with shame strategies.

Early memories, both shaming and of warmth and safeness, had a relevant role in predisposing to current experience of shame. In turn, shame and coping with shame strategies had an important role in precipitating the experience of peer victimization (i.e., the more adolescents feel ashamed and manage it by retreating or attacking, the more peer victims they may become). These findings may contribute to the development of new preventive and remedial psychotherapeutic approaches with young victims of peer aggression.
34. Gender-based expressions of aggression and victimization in youth
A. N. Queirós, and P. Vagos

Victimization and aggression among adolescents in schools is a growing problem. Findings concerning the gender-based expressions of these occurrences have been inconsistent, tough boys are suggested to experience higher levels of overt aggression and victimization whereas girls are expected to experience higher levels of relational aggression and victimization.

This study proposed to explore gender differences in youth aggression and victimization, considering their overt, relational and reputational forms. Between-gender and within-gender comparisons were considered.

A sample of 941 adolescents (mean age of 12.9 years old; 50.9% females), was assessed for the various forms aggression and victimization, via self-report.

Boys, when compared to girls, presented higher levels of all forms of aggression and higher levels of overt victimization. Boys considered separately reported significantly higher levels of relational and overt aggression, in comparison with reputational aggression. They also reported being significantly more victims of relational aggression, when compared to overt and reputational aggression. Alternatively, girls considered separately reported significantly higher levels of relational aggression followed by overt and reputational aggression. They also stated being significantly more victims of relational and reputational victimization, in comparison with overt aggression.

Unlike common findings, boys were consistently more aggressive than girls; they were also more victims of relational aggression. As for within-gender results, similar patterns for practicing aggression were found, but not for being the victims of aggression. Tough the female and male experience of aggression seem to be reaching equality, their experiences of victimization are not, calling for gender-based intervention guidelines.

35. Affective empathy as a predictor and moderator of social skills training (SST) effects on social cognitive skills in juvenile delinquents

The present study is part of a larger research project in which the implementation and effectiveness of a social skills training (SST) for juvenile delinquents in the Netherlands was assessed.

The goal of the study is to examine the influence of empathy on post-treatment effects on social cognitive skills of an outpatient individual SST for juvenile delinquents.

The sample consisted of juveniles who received Tools4U, a SST with a parental component, as a penal sanction (N = 115). Propensity score matching was used to select a control group (n = 108) of juveniles receiving treatment as usual (TAU; of a total N = 354). Affective empathy was examined as a moderator and predictor of treatment effects on social cognitive skills: hostile intent attribution and cognitive distortions.

Empathy only influenced treatment effects on hostile intent attribution, and not on any of the other social cognitive skills (i.e., cognitive distortions). Tools4U was only effective in improving hostile intent attribution for juveniles with moderate or high affective empathy and not for juveniles with low empathy. No moderating or predictive effects were found for cognitive distortions.

A minimum level of empathy may be required to decrease hostile intent attribution in treatment. The intervention proved to be effective in decreasing cog-
nitive distortions (i.e., self-centering, assuming the worst), regardless of affective empathy level. Future studies should investigate and refine the complex interaction of affective empathy with other factors and treatment changes, particularly for long-term effects on delinquency.

36. Juvenile sex offenders and nonsexual violent offenders: do they share the same risk factors?
A. M. Catena, and S. R. Illescas

The prevalence of sexual crimes committed by minors in Spain is relatively low (near to 200 sentences in 2013). Nonetheless, these sexual offenses may seriously harm their victims (physically and psychologically), and in some cases may be repeated. Despite the seriousness of these crimes, in Spain is very limited the available scientific knowledge on juvenile sexual crimes and offenders (Aragonés de la Cruz, 1998; Sanchez & Syria, 2011). Among other things, it is unknown, for example, whether juvenile sex offenders share or not similar characteristics than other juvenile nonsexual offenders. This research problem is precisely the main purpose of this study: analyzing whether juveniles who have committed sex crimes show on not specific risk factors that differentiate them from other violent juvenile delinquents.

This research describes the major risk factors observed in 50 juveniles convicted in the Community of Madrid (Spain) for sexual offenses, compared to 50 juvenile sentenced for other violent crimes (robbery, violence against parents, murder, etc.). In addition, the main features of their criminal careers and the severity and intensity of their crimes will be detailed. Information on the subjects risk factors have been obtained through an exhaustive review of the Juvenile Justice System records and from other documentation relating to the cases: judicial reports, individual records about their performance during treatment, risk assessments (by means of the use of IGI-J, which evaluates juvenile family factors, schooling, friendship, leisure; the Youth Self Report (YSL), and other instruments).

Our results will present the similarities and differences observed between juvenile sexual and nonsexual offenders, and this information is put in relation to the international research in this field. Implications of these results for intervention and for future research are discussed.

37. Scenes for social information processing in adolescence: developmental and validation procedures
P. Vagos, D. Rijo, and I. M. Santos

The assumption underlying the social information processing theory (SIP), proposing several stages between any social event and the social behavior that is enacted in it, has been extensively corroborated. Still, instruments evaluating these constructs and adjusted to the social experiences of adolescents are scarce. The Scenes for Social Information Processing in Adolescence (SSIPA) is one of a few.

This work presents the three steps undertaken to develop the SSIPA as an ecologically valid instrument, and the subsequent psychometric analyses concerning its internal structure.

Focus groups were conducted with adolescents to access their verbalizations on usual interpretations, emotions and behaviors associated with ambiguous social situations. Resulting items were then subjected to expert evaluation and thinking aloud. A total sample of 802 adolescents was then used to explore the internal structure of the resulting instrument.

Adolescents verbalizations were organized into two interpretation styles
(neutral and hostile), three emotions (shame, sadness, and anger) and four social behaviors (assertiveness, passiveness, overt aggression, and relational aggression). Items portraying these constructs were considered accurate and understandable. Psychometric analyses confirmed the instrument as validly and reliably measuring the attribution of intention, emotional arousal, response evaluation, and response decision stages of SIP.

Focus group and item evaluation were optimal tools in phrasing items that surpass the initial acceptability threshold and accurately grasp the SIP of adolescents. Further psychometric evaluation has shown the SSIPA to be an innovative and robust assessment instrument, for use in clinical assessment and research.

38. Difficulties and obstacles in the assessment of risky sexual behavior of adolescents
M. Dabkowski

In the already existing resources of original, Polish studies concerning the sexuality of children and adolescents as well as in planning similar studies there are important methodological shortcomings and ethical controversies. Beginning with the “sensitivity” of the topic, having diversified social assessment, through the difficulties in comparative studies (most of the literature comes from English-speaking cultural area), as well as the specifics of the selection of the studied populations (narrowed almost entirely to victims of sexual abuse) ending with the difficulties in formulating research objectives and ways of their implementation without compromising the subjects with possible damage.

Significant limitations, strictly connected with the above ethical issues are the methodological aspects of sexual behavior studies among children and adolescents - both the healthy and the ones from clinical groups. This article discusses the advantages and shortcomings of the ways of collecting data and research methodology - case studies; interviews with children and adolescents concerning their sexual behavior; retrospective descriptions made by young adults, their sexual behavior from childhood and adolescence time; observations of sexual behaviors of younger children made by parents and carers; standardized behavior rating scales; direct observation and self-monitoring and neuroimaging studies.

The values and limitations of these methods are presented in the axiological optics on the basis of own studies on children from the clinical population.

J. M. Mas

The objective was to assess the presence of comorbid diagnoses of mental and addictive disorders within the center of juvenile justice The Alzina in Barcelona during 2014 and 2015.

The medical records of 127 patients were assessed at follow-up for two years. Diagnoses were collected using the ICD 10 and compared with data from the most recent at the same age (1) general population and comorbidity is studied substance. Being a closed center is considered only substance dependence criteria at the time of entering the center.

In general it is served by a mental health and / or addictions to 52% of the prison population compared to 4% of the teenage population that is served in juvenile infant mental health in Catalonia. The prevalence of dual diagnosis, considering that the presence of a current diagnosis of mental disorder and disorder snuff use of different substances, was 62.20%. A 88.18% of youth met criteria for a substance dependence, the most prominent THC (85.82%) followed by cocaine.
There was an association between the diagnosis of dual pathology and harmful use or dependence. The most common mental disorders in dual patients than in non-dual were mood disorders, ADHD, behavioral disorders and psychotic disorders however the most common disorders in non-dual patients were anxiety.

There is a high prevalence of patients with dual diagnosis among subjects in the adolescent population served within juvenile justice far above the general population. It is necessary to extend the study sample with the other centers of the autonomous community of Catalonia in order to obtain more reliable data and research to promote statewide.

40. Mapping the structural organization of the brain in female adolescents with conduct disorder

Structural covariance methods are particularly useful for studying the neural correlates of disorders that may be associated with neurodevelopmental abnormalities, as they provide information about coordinated patterns of brain development. Recent research has suggested that deviations from typical brain development might contribute to the pathophysiology of Conduct Disorder (CD). In particular, a recent study tested whether structural covariance measures distinguish between different subtypes of CD (i.e., childhood-onset CD [CO-CD] and adolescence-onset CD [AO-CD]) in male youths. Male CO-CD participants displayed a higher number of significant cross-cortical correlations compared to healthy control (HC) or AO-CD participants, whereas AO-CD participants displayed fewer significant cross-cortical correlations than HCs.

The goal of this study is to test whether females with AO-CD or CO-CD show similar abnormalities in structural covariance as their male counterparts.

Our study included 30 females with AO-CD, 12 females with CO-CD and 40 female HCs. We acquired T1-weighted structural images and pre-processed them using FreeSurfer. We assessed inter-regional correlations in cortical thickness as a measure of structural covariance.

Contrary to the previous study, we found a higher number of significant cross-correlations in the female AO-CD group (n=970), relative to the CO-CD and HC groups (n=85 and n=746, respectively).

The reverse pattern of alterations in AO-CD and CO-CD females compared with previous findings in AO-CD and CO-CD males, supports the idea that a delayed-onset pathway in girls is analogous to the childhood-onset pathway in boys. In particular, similar structural covariance abnormalities appear to be observed in childhood-onset CD males and adolescence-onset CD females.

41. Changes in early maladaptive schemes in portuguese institutionalized adolescents: results of a psychosocial rehabilitation program for at-risk youth
L. Santos, and M. R. Pinheiro

The program Gerar Percursos Sociais/GPS (Rijo et al., 2007), a psychosocial rehabilitation program for at-risk youth, has been applied at Casa do Canto, a temporary foster home from APDMF-CrescerSer for children victims of risk, abandonment, negligence or maltreatment. GPS has been integrated in an autonomy program (Projet’Ar-te), with the purpose of facilitating the acceptance and integration of their own institutionalization and life story. In this paper, the results refer to 15 female participants, aged between 14 and 17 years (M=15, SD=1), to
whom a pre and post intervention and also a follow-up standardized evaluation was carried out, using the Schemas Questionnaire for Adolescents/QEA (Young, 2005; adapted by Santos, Rijo & Pinto Gouveia, 2009). The assessment strategy also included a specific appraisal of each session using an observation grid regarding reaction, learning and learning transference. The results highlighted a significant change on the Early Maladaptive Schema/EMS of Abandonment ($F = -2.303; p = .021$). In terms of intra-individual changes, more than 60% of the participants decreased in all maladaptive schemas that were worked out in GPS, except for the Entitlement/Grandiosity EMS. A slight and gradual increase in mean indicators of cognitive flexibility and active learning was also found. The RCI calculation for the global score of the QEA, despite the not significant value of the chi-square test, suggests a clinical improvement in 10 (66.6% in remission status) of the 15 intervention participants, resulting in a decrease of distortions in information processing added to an improvement of more realistic and functional interpretations of life events.

42. The impact of shame and shame coping strategies in the relationship between early experiences and aggressive behavior in adolescents
C. Oliveira, D. Rijo, and N. Brazão

Previous studies highlight the impact of early experiences on shame and diverse psychopathological outcomes. Nonetheless, the predictor impact of shame is not entirely clear in some disorders, like Disruptive Disorders. Recent studies have also pointed out the importance of strategies used by individuals to cope with shame. This cross-sectional study aimed to explore the potential mediator effect of shame and shame coping styles in the relationship between early experiences (shame and warmth/safeness) and aggressive behavior in 283 adolescents with Disruptive Disorders or Antisocial Personality Disorder. Mediation analysis results showed that shame and shame coping strategies mediated the association between early experiences (shame and warmth/safeness) and different dimensions of aggressive behavior (physical/verbal aggression, anger and hostility). Both types of early memories significantly predicted current levels of shame. Shame predicted the dimensions of aggressive behavior both directly and indirectly (through shame coping strategies). Attack Other and Attack Self strategies positively predicted aggressive behavior, while Avoidance and Withdrawal had a negative predictor effect. These findings suggest that individuals with aggressive behavior may engage in externalized and internalized shame coping strategies, although they mainly seem to take on externalized ones, especially Attack Other, in order to cope with shame.

43. Who will stop when everybody starts offending? Childhood risk and protective factors in childhood onset offenders for adolescent desistance
B. C. M. van Hazebroek, L. van Domburgh, and A. Popma

Juveniles who start their delinquent career early in life are at particular high risk to persist in criminal behavior (Moffitt & Caspi, 2001; Moffitt, 1993; Loeber & Farrington, 2001). However, not every child who gets into contact with the police for offending behavior in childhood, will persist offending during adolescence. This is remarkable as adolescence is the developmental period when offending is most common in life. Drastic benefits could be achieved if we gain more insight into the mechanisms of desistance during adolescence.

Therefore, this study aims to assess offending trajectories of childhood on-
The current study will use a longitudinal dataset of childhood arrestees ($N = 350$). Information on this Childhood Arrestees Sample (CAS) is based on self-report methods (provided by the delinquent in question, and their parents and teachers), as well as police and crime records 10 years after the first arrest. The following protective factors will be studied: individual factors such as prosocial behavior, friends, cognitive functioning, mental health disorders and aggression; and family factors such as parenting, social economic status and family composition.

Data are currently analysed. Results will be presented at the conference.

44. Interviewing children victims of CAN in court proceedings
M. Boshkovska, and M. Raleva

In the context of protection of children victims and witnesses in the court proceedings from further victimization, special training of policemen, prosecutors and judges in interviewing children is an important issue. The first interview is most relevant, and usually the crucial evidence in the legal procedure. Although each case is unique and needs individual approach which depends of the age and developmental level of the child, general criteria for interviewing children must be met.

The aim of this presentation is to discuss the training in interviewing children for policemen, prosecutors and judges, carried out by child mental health professionals.

The training was organized by the Academy of Judges and Prosecutors in collaboration with UNICEF-Country Office Skopje, as a systematic education of legal professionals in the country. This programme is addressed primarily to judges in civil and criminal courts and prosecutors from 4 regions in the country (approximately 120 participants) in two-days training. The topics covered the psychological, ethical and legal aspects of interviewing children, paying attention to cognitive competences, fantasy, suggestibility and communicative skills of children. Unprofessional interviewing of children might lead to secondary victimization with severe psychological and mental health consequences.

The presentation will also discuss the new regulations in the Child Protection Code on the special conditions required for interviewing child victim of abuse.

45. Hazing in higher education in Portugal: History and review of facts and studies
M. J. Martins, S. N. Caldeira, M. Mendes, S. P. Botelho, and O. Silva

Since the late eighties of twenty century the denominated “praxe académica”, a set of recreational activities, that simulate hierarchic relations between old and fresh students, involved almost all the students that entry in colleges and universities in Portugal. Between 1999 and 2014 there were 13 students that died in accidents that allegedly occurred in hazing activities and several ruthless accidents. These activities were forbidden inside the Portuguese institutions around the beginning of this century but continue to happen in outdoor defined locations of each city. This presentation made a brief history of hazing in Portugal; analysis some written “codes of praxe” disseminated by certain groups of students; review the Portuguese studies and literature about it and essays to search for theoretical explanations for the huge adhesion of students to these activities, and to debate the nature of humiliation and abusive relationships versus integration in academic community eventually associated with this practices, and their effects on individuals social development and competences. We finally conclude with suggestions to prevent hazing, violence and abuse in higher education.
46. The Growing Pro-Social program: Preliminary results from baseline to follow-up in a sample of Portuguese institutionalized adolescents
L. Santos and M. R. Pinheiro

The portuguese psychosocial rehabilitation program Gerar Percursos Sociais/GPS (Rijo et al., 2007), is a selective prevention program, with a cognitive-behavioral basis. The GPS has been integrated in an autonomy program (Projet’Ar-te) for adolescents’ victims of risk, abandonment, negligence or maltreatment, residents at the foster home Casa do Canto (APDMF-CrescerSer). The purpose was to increase the adolescents’ emotional regulation and to reduce the maladaptive schemas/EMS and behavioral problems. This study aims to present the preliminary results, from the baseline to follow-up, in a group of 7 females adolescents, aged between 14 and 16 years (M=14,57, SD=0,787) taking into account the Schemas Questionnaire for Adolescents/SQA (Young, 2005; Santos, Rijo & Pinto-Gouveia, 2009) and the Youth Self Report/YSR (Achenbach, 1991, Fonseca & Monteiro, 1999). Three moments of evaluation were performed: before GPS (pretest), after GPS (post-test), and 12 months of follow up. The calculation of Reliable Change index/RCI for the overall score of the SQA indicated a clinical improvement in terms of the activation of EMS: 71,4% of the adolescents in post-test and 57,1% in the follow up. The calculation of RCI for the total YSR (internalizing and externalizing clusters) suggested that 85.7% of the participants were in remission. The results suggested that GPS is a program that can reduce internalizing and externalizing behavioral problems and early maladaptive schemas impact in the cognitive information process of at-risk adolescents.

47. Risk factors for adolescent sex offenses: evaluation of predictive factors in child sex offenders, peers/adults offenders, and non-sex offenders
E. Ramião and R. Barroso

The identification of predictors of juvenile violence is important to prevent its occurrence. Regarding offense among juveniles the trajectory of this behaviour could enable the development of specific interventions. In the study presented here was intended to analyse what factors predicted sexual offenses and what are the factors that differentiated juvenile non-sex offenders (JNSO) of juvenile sex offenders (JSO), subdividing JSO by rapists and child sex abusers. Data collection was executed in institutions under the supervision of the Portuguese Ministry of Justice, specifically in correctional centres and juvenile prisons. The sample was divided into three categories based on the type of the crime committed: child sex abusers (n = 76), rapist (n = 64) and juvenile non-sex offenders (n = 130). In addition to a specific instrument that was obtained sociodemographic and criminal information, subjects were asked to fill the Youth Self Report, Aggression Questionnaire and Wilson Sexual Fantasies Questionnaire. The results showed that rapists differentiate from child sex abusers by being older, practicing battering to the victims and present bigger drinking habits. The child sex abusers showed cognitive outcomes below average. Compared with JNSO, there were no distinct predictors among subgroups of JSO. The JSO it turns out that the predictive factors related to psychopathology, the behaviours of aggression and externalization are not predominant to the practice of sex crimes. The results are discussed taking into account aspects of assessment and clinical intervention with this population.
48. Psychopathic traits in juvenile sex offenders with pedophilic interests
R. Barroso and P. Figueiredo

Very few studies with juvenile sex offender’s population focus their attention in the presence of sexual deviation or paraphilia’s interests. Juvenile sex offenders are a heterogeneous group and the assessment of intellectual functioning, psychopathy or psychopathology could be useful in the treatment process. This study was conducted with 134 young males sex offenders with crimes committed between 12 and 18. Using the PCL:YV and the Screening Scale for Pedophilic Interests (SSPI), young sex offenders were divided in two groups: pedophiles and non-pedophiles. The results revealed significant differences in the interpersonal subscale of the PCL-YV, with juvenile sex offenders with pedophiles interests demonstrating highest scores. This result could help the clinical intervention process in juvenile offenders at an interpersonal level.

49. An audit of interventions to manage overweight and obese young people in a secure adolescent unit
N. Tarrant and J. O’Brien

In 2014 the BMA report “Recognising the importance of physical health in mental health and intellectual disability” highlighted an over-representation of overweight and obese young people among those with mental health problems. Admission to an adult Medium Secure Unit in the UK was associated with a mean increase in BMI of 3.04 kg/m² in a 2011 study by Abbasi et al.

In the UK the Lester Positive Cardiometabolic Health Resource recommends lifestyle advice for patients prescribed antipsychotics with either a BMI higher than 25, or a weight gain of >5 kg over three months.

The goal of this study is to quantify weight changes of adolescents admitted to a Secure Adolescent Unit, and to audit whether suitable interventions were being offered.

Current inpatients and those discharged since November 2012 were included (n=44).

Initial and final weights and BMIs were recorded. For patients with a BMI above 25 evidence of interventions offered was recorded.

Of the 44 patients, 40 were male (91%).

At admission, the mean weight was 78.1 kg and BMI 25.4. At discharge these were 86.4 kg and BMI 27.5, representing a mean increase of 8.3 kg and 2.1.

80% of applicable patients had been given advice about a healthy diet and 84% about physical activity. 76% had been referred to a dietitian.

The mean BMI at admission was in the overweight category. Despite intervention being delivered to the majority applicable, admission appears to be associated with an increase in mean weight by over 10%.

50. Recollections of childhood victimization: A study of their impact on young adults’ psychosocial adjustment
A. C. Fonseca, M. Oliveira, S. Coelho, and A. Moreira

Although the link between victimization and delinquency have originated a considerable number of studies in recent decades, research on how adult recollections of early experiences of rejection and ostracism impact on social adjustment during adulthood is scant. Furthermore, little attention has been paid to the role that other concomitant variables may play in that process.

The aim of the present study is to examine whether young adults who report experiences of victimization in childhood also display higher levels delinquency,
substance use, aggression and family violence after their transition to adulthood.

A large sample of children, randomly selected from public elementary schools in Coimbra, were followed until their late twenties. As young adults, they completed self-report measures of current anti-social behaviour and one self-report measure of victimization experienced in childhood...Data on early learning difficulties, attention problems/ hyperactivity, and peer rejection reported by teachers and parents, as well as information on family background were also available from previous waves of the same sample.

Preliminary analyses revealed that participants with more recollections of childhood victimization also had received higher scores in a measure of peers rejection completed by parents in elementary school, thus providing indirect support for this retrospective measure.

A second set of analyses indicated that the recollections of childhood victimization were later associated with higher levels of self-reported antisocial behaviour, substance use, aggression and family violence, both for males and females, in early adulthood. And this association remained statistically significant when other confounding variables were statistically controlled for in childhood or at the outcome.

These results suggest that children’s experiences of victimization as remembered by adults, despite their acknowledged limitations, have important long-term effects on psychosocial social functioning. Probably because they reflect well the meaning of those childhood events for the individuals.