



Psychiatry & Behavioral Sciences Section – 2011

I14 Adolescents, Sex and the Forensic Psychiatrist

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After attending this presentation, attendees will be able to appreciate complexities inherent in the evaluation and understanding of adolescent sexuality, list key differences between adolescents and adults which would be considered in the comprehensive forensic evaluation, and give examples of human behaviors scientifically accepted as normal which may not always be legal or socially acceptable.

This presentation will impact the forensic science community by increasing awareness that adolescent expressions of sexuality warrant special considerations for forensic scientists.

Hypothesis: The forensic evaluation of developmental sexuality in adolescents raises several special issues different from the evaluation of adults.

Interest in sexuality and sexual behaviors increases throughout one's normal human development from birth into adulthood. Sigmund Freud postulated on the stages of psychosexual development, but it is now scientifically known that "latency" does not exist in real children. Rather, children learn that adults are often uncomfortable with childhood sexual behaviors, and so the children learn to keep sexuality private. As the child's body and mind mature—and especially with the onset of puberty—there is an escalation in sexual interest and activities during adolescence. Helping adolescents navigate their sexual desires, behavior, and identity can be clinically challenging.

Complicating this clinical treatment are forensic aspects of adolescent sexuality. The age of consent for sexual activity is a legal, cultural, and societal construct; socially accepted commencement of clinically mature sexual behaviors has changed over time and varies by country. The legal imposition of laws and regulations are sometimes at odds with physiologic and psychological understandings of human behavior. Biologically, humans are designed to have sexual behaviors in adolescence; in the past adolescents regularly married and procreated. This is still the case today in many cultures. Even as teenage pregnancy may be biologically normal, it can be quite disadvantageous for a developing teenager in a technologically advanced society where education is often required well beyond adolescence. Despite this fact, there is controversy in America regarding sexual education, knowledge and access to contraception, and the right to abortion for adolescents.

The disparity between autonomous sexuality versus legal and societal controls can create psychological stress for adolescents. The rights and responsibilities of parents will be discussed, as well as self-determination and autonomy in the developing adolescent. Adolescence is a period of time when there is generally decreasing parental controls with simultaneously increasing adolescent autonomy. The balance at any given moment in the process can be difficult for the adolescent, the parents and the clinician. This presentation will include several clinical vignettes as springboards for discussion and sharing of clinical strategies amongst the audience.

Controversial American policies and practices reflect the conflicting findings of science, ethics, morality, and religion. One example is in the minimization of harm, specifically with efforts for the prevention of infection as well as unplanned or unwanted pregnancies. As another example, 18-year-old males who are sexually active with 16-year-old females may face statutory rape charges in some jurisdictions. Furthermore, although it is scientifically accepted that same-sex desires, behaviors, and identity are normal occurrences within the broad spectrum of normal human sexuality, homosexuality is illegal in some jurisdictions of the United States and in the world. Lastly, there is controversy regarding the presence of Gender Identity Disorder in DSM-IV-TR as a mental illness. Psychiatric diagnoses sometimes are necessary to obtain medical and surgical interventions. In the early days of receiving legal abortions, some jurisdictions required a psychiatric clearance prior to performing them. Psychiatric consultations are also obtained frequently in evaluating kidney donors. Issues of stigma and necessity for psychiatric diagnosis will be discussed especially as related to adolescent sexuality.

Forensic Psychiatry, Adolescent, Sexuality