Are Juveniles Who Have Committed Sexual Offenses the Same Everywhere? **Psychometric Properties of** the Juvenile Sex Offender Assessment Protocol-II in a Portuguese Youth Sample

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Abstract

Over the last decade, we have witnessed consistent advances in risk assessment procedures, namely the validation of those used with juveniles who have committed sexual offenses. The adaptation of these instruments into other languages requires research examining the conceptual and metric equivalence of the instruments, not just translation equivalence. Informed by data from 141 boys, aged 13 to 18, the psychometric properties of the Portuguese version of the Juvenile Sex Offender Assessment Protocol-II (I-SOAP-II), regarding reliability and construct validation, are presented and discussed. Factor structure, internal consistency, and internater reliability were examined, and a reliable factorial structure that was consistent with the original validation of the I-SOAP was found. Scales 2 and 3 had good internal consistency, and Scale I had acceptable internal consistency. Results regarding concurrent validity revealed mostly statistically significant correlations. The implications of this research for juvenile sex offender risk assessments are discussed.

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Keywords

juveniles who have committed sexual offenses, Juvenile Sex Offender Assessment Protocol–II, J-SOAP-II, risk assessment

For decades, many researchers and practitioners in the field have attempted to answer the question of what leads some teenagers to engage in sexually aggressive behaviors and not others, as well as which juveniles are at risk of recidivating. Research results have suggested that juveniles who have committed sexual offenses (JCSO) are unlikely to continue reoffending sexually as adults (Lussier & Blokland, 2014; Zimring, Jennings, Piquero, & Hays, 2009; Zimring, Piquero, & Jennings, 2007), and that tendency seems to be reflected in the United States and in European countries (Langstrom, 2002; Piquero, Farrington, Jennings, Diamond, & Craig, 2012; Thibaut et al., 2015). However, Nisbet, Wilson, and Smallbone (2004) suggested that even if most juveniles who commit sexual offenses do not continue offending, between 9% and 15% will. The risk of reoffending is not restricted to sex offenses only. Examining recidivism studies within a mean follow-up period of 5 years, Caldwell (2010) conducted a metaanalysis with 63 data sets (a total of 11,219 JCSO) and found that the sexual reoffense rate was 7% (SD=3.9%), whereas the general reoffending was 43.4% (SD=18.9%). Recently, Caldwell (2016) examined 106 studies (involving 33,783 cases of JCSO) that were carried out between 1938 and 2014. Results of this meta-analysis showed a 4.92% base rate for sexual recidivism over a mean follow-up time of 58.98 months. Regarding the low base rate of sexual recidivism, similar results have been found by Klein, Rettenberger, Yoon, Kohler, and Briken (2015) and reaffirm the results of other studies (Spice, Viljoen, Latzman, Scalora, & Ullman, 2013). Among other complex explanations, this low sexual recidivism rate found in JCSO seems to be related to the heterogeneity of risks, which could be of a nondeviant or deviant nature and go from low risk to high risk.

The assessment of sexual recidivism risk is routinely included in psychological assessments of JCSO, in which the risk assessment fundamentally serves as a tool that helps inform and guide several interventions, treatments, and legal processes (Barroso, Ramião, Figueiredo, & Pechorro, 2018; Hempel, Buck, Cima, & Marle, 2013; Rich, 2014). As is often the case, to assist them in their decisions regarding the detention and/or treatment responses to JCSO, judicial systems require risk analysis. A primary intention of this clinical or forensic analysis is to comprehensively understand the juvenile, to make well-informed evaluations of risk, evaluate treatment needs, or assist with court decisions. The clinical knowledge and expertise for discriminating high from low risk in this process is a major task for forensic mental health professionals (Aebi, Plattner, Steinhausen, & Bessler, 2011). It is crucial to take into consideration the risk factors that contribute to sexual reoffending, and several factors have been empirically related to sexual reoffending among JCSO.

A meta-analysis conducted by Seto and Lalumière (2010), on studies comparing JCSO with juvenile non-sex offenders in regard to variables reflecting sexual and general delinquency risk factors, identified specialized and generalized theories of

juvenile sex offending or general delinquency. From the 59 studies included in this meta-analysis, only eight emerged from non-North American countries: specifically, three samples of adolescent sexual offenders from Canada (Awad & Saunders, 1991; Truscott, 1993; Valliant & Bergeron, 1997), two from the United Kingdom (Epps, 2000; Hollin & Swaffer, 1993), and three from the Netherlands (van Wijk, Blokland, Duits, Vermeiren, & Harkink, 2007; van Wijk, van Horn, Bullens, Bijleveld, & Doreleijers, 2005; van Wijk, Vreugdenhil, van Horn, Vermeiren, & Doreleijers, 2007). Although the majority of the meta-analysis studies are North American, it is possible to find the same trend of results in non–North American studies, reflecting the general tendencies found by Seto and Lalumière (2010). They noted similarities between general delinquency risk factors for offending in both groups, although JCSO seem to have their own particularities. Specific etiological distinctions between groups emerged in anxiety, low self-esteem, social isolation, exposure to sexual violence, early exposure to sex or pornography, a history of sexual abuse, physical abuse or neglect, and atypical sexual fantasies. In the last few years, these risk factors, among others, have been identified and operationalized in clinical or empirically guided risk assessment instruments.

The Use of Unstructured Clinical Judgments

From a clinical, forensic, and scientific perspective, the use of unstructured clinical judgments in the risk assessment process is ineffective, giving no evidence of sufficient prediction (Hanson & Morton-Bourgon, 2009). In this sense, Schmidt, Sinclair, and Thomasdóttir (2016) reinforced the idea that the use of risk assessment tools is relevant and requires further studies. These authors conducted a study to examine the predictive validity of the Youth Level of Service/Case Management Inventory (YLS/CMI) and the use of professional override in a matched sample of JCSO and nonsexual offenders. The frequent use of override in samples with JCSO was always directed toward increased risk assessment and had a similar effect on the predictive validity of the YLS/CMI, regardless of offending history. Using this Structured Professional Judgment (SPJ) approach aids trained evaluators in estimating the offender's risk of reoffending.

Consequently, the use of structured risk assessment instruments has been recommended as a standard element in the assessments of juveniles who sexually offend (Barroso, Pham, Greco, & Thibaut, 2019; Fanniff & Letourneau, 2012; Hempel et al., 2013; Murrie, 2012; Prentky & Righthand, 2003; Worling, 2004). Specifically, important factors to address in this specific population are those related to developmental changes in emotional, behavioral, and sexual self-regulation, as well as the influence of family and/or peers (Hanson, 2014). In the current view of risk assessment, the risk of sexual violence is seen as contextual (contingent on various situations), dynamic (subject to change), and continuous (fluctuating along a continuum of possibility) (Ryan, 2012).

In the last few years, a number of structured risk assessment instruments have been designed for male juveniles with a history of sexual coercive behavior between 12 and 18 years of age. A commonly used measure developed specifically to assess risk of

sexual reoffense among JCSO is the Juvenile Sex Offender Assessment Protocol-II (J-SOAP-II; Prentky & Righthand, 2003). Viljoen, Mordell, and Beneteau (2012) conducted a meta-analysis to synthesize findings on the predictive validity of four risk assessment tools (J-SOAP-II, Estimate of Risk of Adolescent Sexual Offense Recidivism [ERASOR], Juvenile Sexual Offence Recidivism Risk Assessment Tool-II [J-SORRAT-II], and Static-99). Studies showed no significant differences between tools, providing support for the use of the four instruments in assessing sexual reoffense risk in adolescents. Nevertheless, Viljoen et al. (2012) argue, as the effect sizes were moderate, such instruments are not yet capable of making precise estimates of risk and they should therefore be used prudently in legal processes. A review of the literature was conducted (Hempel et al., 2013) to understand the predictive accuracy of six risk assessment instruments (e.g., J-SOAP-II) used to appraise risk among JCSO. Results showed differences in the predictive accuracy for general, violent, and sexual recidivism, and none of them showed unequivocally positive results in predicting future offending. In this study, the J-SOAP-II fared better for sexual recidivism when compared with other specialized tools, although authors discard long-term restrictions based on a risk assessment only.

The Design and Evidence Base of the J-SOAP-II

The J-SOAP-II is proposed to assess recidivism risk in boys aged 12 to 18 with a history of sexually aggressive behaviors (Prentky, Harris, Frizzell, & Righthand, 2000; Prentky & Righthand, 2003). The instrument includes both static risk factors and dynamic risk factors, which are arranged according to four scales: Sexual Drive/Preoccupation (Scale 1), Impulsive/Antisocial Behavior (Scale 2), Intervention (Scale 3), and Community Stability/Adjustment (Scale 4). Each scale is composed of five to eight items (risk factors), and each item is scored on a 3-point scale reflecting severity or presence/applicability. These risk factors (items) are based on their association with both sexual recidivism and general recidivism in the research literature (Prentky et al., 2000). The J-SOAP-II is currently used as a structured clinical guide, helping clinicians review the risk factors associated with sexual juvenile offending.

Although problems in the predictive evidence are a significant limitation of the J-SOAP-II and other existing measures (Barroso, Pechorro, Manita, Nobre, & Gonçalves, 2017; Fanniff & Letourneau, 2012, 2014; Rich, 2014; Viljoen et al., 2012; Worling & Langstrom, 2006), psychometric studies about the J-SOAP-II have been gradually providing important evidence regarding the reliability (particularly examining the internal consistency and interrater agreement) and validity (mostly examining the concurrent evidence) of this instrument. Eleven published studies with information regarding the psychometric properties of the J-SOAP-II based on probation records and prior to treatment were identified. Aspects from these studies are summarized in Table 1.

Although the reliability values obtained were adequate, a controversy (Fanniff & Letourneau, 2014; Hecker, 2014) regarding low reliability values of the J-SOAP-II Scale 1 (Sexual Drive/Preoccupation) (Fanniff & Letourneau, 2012) emphasizes the

(continued)

 Table I. Characteristics of and Reliability Estimates From Prior J-SOAP-II Studies.

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juveniles 104 15.16 (1.44), Probation and Total ICC = .84 juveniles range = 12-18 incarcerated in youth correctional institutions	Caldwell and	172	17.92 (1.5)	Incarcerated	_	∢ Z	ICC = .93	YLS/CMI =26** (Scale
104 15.16 (1.44), Probation and Total ICC = .49 juveniles range = 12-18 incarcerated in youth correctional institutions	Dickinson (2009)	juveniles			2		ICC = .84	1); .65*** (Scale 2)
juveniles range = 12-18 incarcerated in youth correctional institutions	Chu, Ng, Fong, and	104	15.16 (1.44),	Probation and	Total		ICC = .49	ERASOR= .70***
youth correctional institutions	Teoh (2012)	juveniles	range = 12-18	incarcerated in				YLS/CMI= .71***
institutions				youth correctional				
				institutions				

Table I. (continued)

Citation	и	Age (M ± SD)	Setting	Subscale	Internal consistency	Interrater reliability	Concurrent validity with J-SOAP-II total score
Fannif and Letourneau (2012)	73 juveniles	73 juveniles 15.11 (1.54), range = 12-18	Sexual offense adjudications	2 3 4 Total	α = .65 α = .84 α = .48 α = .43 α = .81	CC = .69 CC = .78 CC = .07 CC = .07 CC = .69	ACSBI Caregiver = .35**** ACSBI Child = .16 CBCL Ext = .56*** CBCL Int = .23* YSR Ext = .34*** YSR Int = .19 SRD = .29*
Martinez, Flores, and Rosenfeld (2007)	60 juveniles	14.9 (1.47)	14.9 (1.47) Community-based adolescent sex offender treatment program	2	α = .72 α = .74 α = .90 α = .69 α = .69 α = .76 α = .87 α = .87	CC = .79 CC = .63 CC = .88 CC = .42 CC = .71 CC = .71 CC = .86 CC = .70	Any reoffense = .34* Sexual reoffense = .31*
Parks and Bard (2006)	156 juveniles	14.86 (1.24)	14.86 (1.24) Adjudicated	1 2 3 4 4 Total (1-3)	α = .77 α = .80 α = .90 α = .81	r = .81 r = .91 r = .89 r = .95	∢ Z
Powers-Sawyer and Miner (2009)	96 juveniles	17.2 (a)	Adjudicated	- 2	₹ Ž	Ψ/Z	N/A

Table I. (continued)

Citation	и	Age (M ± SD)	Setting	Subscale	Internal Interrater Subscale consistency reliability	Internal Interrater onsistency reliability	Concurrent validity with J-SOAP-II total score
Prentkly, Li, Righthand, Schuler, and Lee (2010)	559 juveniles	12.4 (a)	Youth referred for a special evaluation	- 2 x 4	A/Z	₹ Z	N/A
Rajlic and Gretton (2010)	286 juveniles	I5.8 (I.5) Convicted	Convicted	2 3 4 Total	Y/Z	CC = .93 CC = .93 CC = .80 CC = .85 CC = .95	Ϋ́
Viljoen et al. (2008)	169 juveniles	15.37 (1.51) Specialized residential treatment	Specialized residential treatment program	 2 3 4 Total	A/A	Z Z Z Z Z Z Z Z Z Z Z Z Z Z Z Z Z Z Z	Sexual reoffending =.19*** General reoffending =.25**

RAS = New Jersey Juvenile Risk Assessment Scale total score; PCL: YV = Psychopathy Checklist-Youth Version total score; RRAS = New Jersey Registrant Risk Assessment Instrument total score; WDOC = Wisconsin Department of Corrections Guidelines for Release of Confidential Information on Persons Committing Sex Offenses as Youth total score; ERASOR = Estimate of Risk of Adolescent Sexual Offense Recidivism; YLS/CMI = Youth Level of Service/ Note. I-SOAP-II = Juvenile Sex Offender Assessment Protocol-II; ICC = intraclass correlation coefficient; N/A = the parameter of interest not reported; Risk Assessment Scale total score; SORNA = Sex Offender Registration and Notification Act of 2006 risk tiers; TJSORAI = Texas Juvenile Sex Offender Case Management Inventory total score; ACSBI Composite Scale = Adolescent Clinical Sexual Behavior Inventory composite of sexual risk/misuse and divergent interest scales; CBCL = Child Behavior Checklist (Internalization and Externalization scales); YSR = Youth Self-Report (Internalization and Externalization scales); SRD = Self-Reported Delinquency. p < .05. *p < .005. *p < .001. importance of analyzing and interpreting the values obtained in this scale with caution. More specifically, Fanniff and Letourneau (2012) suggested that the use of records and a clinical interview is crucial for an accurate coding of Scale 1.

Regarding the concurrent validity parameter of the J-SOAP-II, six studies (Caldwell & Dickinson, 2009; Caldwell, Ziemke, & Vitacco, 2008; Chu, Ng, Fong, & Teoh, 2012; Fanniff & Letourneau, 2012; Martinez, Flores, & Rosenfeld, 2007; Viljoen et al., 2008) compared the J-SOAP-II with (a) previously validated risk assessment measures, or with (b) other instruments designed to measure similar constructs or other measures with which it is theoretically predicted to correlate. As the J-SOAP-II authors recommend, Scale 4 should be omitted if the juvenile has been in a correctional facility or in a secure residential treatment for 6 months or more at the time of the evaluation. This factor is the reason why few studies provide similar evidence for this section of the instrument. Significant positive correlations were identified with the J-SOAP-II Total Score and other general and sexual risk assessment measures (Caldwell et al., 2008; Viljoen et al., 2008). In addition, Viljoen and colleagues (2008) and Caldwell and Dickinson (2009) found similar validity of Scale 1 in two juvenile risk instruments. The evidence of Scale 2 is supported by significant positive correlations between this scale and, among others, the YLS/CMI (Caldwell & Dickinson, 2009; Chu et al., 2012). The validity research results of Scale 3 are mixed, considering the correlation with other sexual risk assessment instruments (Viljoen et al., 2008), but additional research is needed.

In conclusion, the most recent data and literature provide important evidence regarding the reliability and validity of the J-SOAP-II. The development of its items/ sections was based on previous literature, including risk assessment studies on adult offenders (Prentky & Righthand, 2003), and currently seems to provide comprehensive and useful support to practitioners and researchers. The heterogeneity among JCSO could explain some discrepant findings. However, although empirical findings regarding the psychometric properties of the J-SOAP-II support the clinical and forensic use of this instrument, it is crucial to consider new data related to their reliability and validity. As Fanniff and Letourneau (2012) highlight, more studies conducted in different contexts can provide valuable information and generate a more complete view of the J-SOAP-II's psychometric data. Further research is needed, particularly studies regarding the reliability and validity of juvenile risk assessment instruments among non-North American participants. Research shows that risk assessment instruments for juvenile offenders were predominantly developed in North America, questioning their applicability in other countries (Lodewijks, Doreleijers, & de Ruiter, 2008; Olver, Stockdale, & Wormith, 2009). Only one published study, specifically in the German language, of the J-SOAP-II's psychometric properties has been conducted in a European country (Aebi et al., 2011). Examining the psychometric properties of this instrument in different ethnic and cultural backgrounds is a crucial step to apply the J-SOAP-II to risk assessment and risk management and to evaluate whether sexual risk assessment measures that were developed in North American contexts are applicable in European contexts (e.g., Portugal).

Aims of the Present Study

The main aim of the current study was to examine the psychometric properties of a Portuguese version of the J-SOAP-II. Specifically, it examined the psychometric properties of a translation of the J-SOAP-II in a Portuguese sample. We present an analysis of the reliability and validity of a translated version of the instrument with scores based on archival juvenile justice records for a sample of detained JCSO. First, we carried out an examination of the structure factor, followed by internal consistency, interrater reliability, and validity evaluations. The internal consistency and interrater reliability of the J-SOAP-II were examined. It was expected that significant associations would be found in terms of concurrent validity with other validated risk assessment instruments (e.g., Psychopathy Checklist–Youth Version [PCL: YV]) and in terms of concurrent-related validity.

Method

Participants

The sample included a total of 141 male adolescents who had been convicted of a sexual offense against children (victims younger than 12 years old and at least 3 years younger than the offender), rape, and coercive sexual behavior in the Portuguese context between 2005 and 2012. Of the sample, 52.6% (n=74) had committed sexual offenses against peer/adult victims, 45.4% (n=64) had committed sexual offenses against children, and 2% (n=3) had committed sexual offenses against both peer/adult victims and children.

The participants' age ranged from 12 to 18 years, with a mean of 14.91 years (SD = 1.63). In the sample, 46% of the participants (n = 65) were from Portugal and 54% (n = 76) from other countries where Portuguese is the official language (e.g., Angola, Brazil, Cape Verde, Mozambique). The victims' age ranged from 3 to 83 years, with an average age of 15.63 years (SD = 14.02). The majority (71.9%) had committed sexual offenses against female victims.

Measures

J-SOAP-II. As previously mentioned, the J-SOAP-II is an assessment checklist that is used to review risk factors that have been empirically associated with sexual offending in juveniles (Prentky & Righthand, 2003). It is designed to be used for boys in the age range of 13 to 18 years, and all the 28 items are coded on a 3-point scale (0 = absence of the risk factor, 1 = some evidence of the risk factor, and 2 = clear presence of the risk factor). It is recommended to access several sources of information in the scoring process. The scores can be summed up to obtain a Total Score, as well as a Static (sum of Scales 1 and 2) and Dynamic (sum of Scales 3 and 4) summary score. At the present time, there are no cutoff scores available for categories of risk; therefore, the scores from the J-SOAP-II should not be used alone in assessing the risk. The highest

possible score on the J-SOAP-II is 56, and in the present study, the mean total scores were 16.64 (SD = 8.56; range = 2-34).

PCL: YV. The PCL: YV (Forth, Kosson, & Hare, 2003) is a 20-item rating scale that assesses interpersonal and affective characteristics as well as overt behaviors associated with psychopathy. Trained observers rated the severity of each symptom based on a semi-structured interview with the youth, a review of official court documents, and information from collateral collaborators. The PCL: YV manual also permits the use of files only to complete the instrument, but suggests caution in interpreting file-only scores because it could provide less information. Several studies indicate an acceptable fit for PCL: YV scores completed solely on the basis of institutional files (Bolt, Hare, Vitale, & Newman, 2004; Forth et al., 2003). Each of the 20 items was scored on a 3-point ordinal scale (0 = item does not apply, 1 = item applies to a certain extent, 2 = item definitely applies). Because of the complexity of administering the PCL: YV, all interviewers completed extensive training. This training was also used in a previous study of the Portuguese version of the PCL: YV (Pechorro, Barroso, Maroco, & Gonçalves, 2017; Pechorro, Barroso, Maroco, Vieira, & Gonçalves, 2015), in which it demonstrated psychometric properties that generally justify its use among Portuguese youth. Reliability studies have demonstrated acceptable levels of internal consistency and interrater agreement (Forth et al., 2003; Vitacco, Neumann, & Caldwell, 2010). The intraclass correlation coefficient (ICC) for PCL: YV total scores in the current study was .88 (confidence interval [CI] = [.63, .96]).

YLS/CMI. The YLS/CMI (Hoge & Andrews, 2003) is a structured assessment instrument designed to assess risk, identify treatment targets, and inform case management and community supervision among youthful offenders (aged 12-18 years) by assessing their risk level and criminogenic needs. It has been found to be a strong predictor of general recidivism in young offender populations (Schwalbe, 2007). It consists of a 42-item checklist divided into eight subscales: Prior and Current Offenses/Dispositions (four items), Family Circumstances/Parenting (six items), Education/Employment (seven items), Peer Relations (four items), Substance Abuse (four items), Leisure/Recreation (three items), Personality/Behavior (seven items), and Attitudes/Orientation (five items). Each item on the YLS/CMI is coded as either absent or present. Items are summed up to a total score (ranging from 0 to 42), organized into four risk cutoffs of low (0-8), medium (9-22), high (23-34), and very high (35-42) risk. The YLS/CMI has been used in previous studies (Caldwell & Dickinson, 2009; Chu et al., 2012) to examine its concurrent validity with the J-SOAP-II. For the present study, the Portuguese form of the YLS/CMI was used (Pimentel, Quintas, Fonseca, & Serra, 2015), and the mean score and standard deviation was 22.93 (4.6). Although there is a new version of the YLS/CMI, the YLS/CMI 2.0 (Hoge & Andrews, 2011), this is the version that has been subjected to psychometric validation in Portugal. The total score of YLS/CMI was included in this study solely to examine how well the J-SOAP-II correlates with it.

File-Based Psychosocial and Criminal Variables Questionnaire. A questionnaire was constructed to describe the criminal and sociodemographic characteristics of the

participants, to offer a descriptive account of the sample, and to explore the association of some of these variables (e.g., age of onset) with J-SOAP-II scores. The question-naire included variables such as participants' age, nationality, ethnic group, highest grade level achieved, history of physical and sexual abuse, quality of parental supervision/discipline, history of substance use, and sexual and general criminal activity (e.g., charges, modus operandi, age of crime onset, age of first problem with the law, age of first detention, length of the conviction, frequency of crimes, number of victims, and use of physical violence).

Procedures

To translate the J-SOAP-II into Portuguese, the guidelines suggested by Brislin (1970) and Sireci, Yang, Harter, and Ehrlich (2006) regarding forward and backward translations of psychometric tools were followed. The provisional translated version of the J-SOAP-II was tested in a pilot study with 18 qualified forensic psychologists to be assessed in regard to face validity and other potential problems. The final Portuguese version of the J-SOAP-II was completed in 2009.

Authorization to assess youths was obtained from the General Directorate of Reintegration and Prison Services—Ministry of Justice (*Direção-Geral de Reinserção e Serviços Prisionais—Ministério da Justiça*). The detainees, from the existing Portuguese Juvenile Detention Centers that admit male youths, were informed of the nature of the study and asked to voluntarily participate. The participation rate was approximately 83%. Not all young people agreed or were able to participate; reasons for this rate included refusal to participate (13%) and inability to participate due to security issues (4%). Participants who were unwilling or unable to collaborate were excluded. Some measures were administered by individual face-to-face interviews in an appropriate setting (e.g., PCL: YV). It was stressed that there were no right or wrong answers, and that for each item the youth should consider what they generally think or feel.

In the present study, as a primary source of information, data were also coded from archival juvenile justice records (specifically, mental health assessment reports, court protocols, criminal case reports, and individualized education plans) that had been obtained by the first author when juveniles were in national juvenile secure institutions. After dividing the sample almost in half (71 vs. 70), two of the authors coded the J-SOAP-II according to the guidelines provided in the manual (Prentky & Righthand, 2003). Although no formal training was conducted, the two coders have the online technical support of a J-SOAP-II developer concerning the review of materials and feedback regarding coding and practice ratings. Considering the J-SOAP-II instructions, Scale 4 (Community Stability) was not completed because all these juveniles were in a correctional facility for 6 months or more.

Statistical Analyses

The data were analyzed using SPSS v22. Pearson correlations were used to analyze associations between scale variables, Spearman's correlations were used with ordinal

variables, and point-biserial correlations were used to analyze associations between nominal dichotomous variables and scale variables (Tabachnick & Fidell, 2001). Cronbach's alpha was used to assess internal consistency and ICC was used to assess internater reliability; the two raters assessed each subject.

Results

Factor Structure

Our first step in examining the psychometric properties of the Portuguese version of the J-SOAP-II among Portuguese youth was to assess its factor structure. Principal component analysis (PCA) was used to explain the highest amount of variance with the fewest number of principal components, and the varimax rotation was used to expand the squared factor loadings in each factor (see Table 2). As previously noted, J-SOAP-II authors recommend that Scale 4 should be omitted if the juvenile has been in a correctional facility for 6 months or more at the time of the evaluation. As this situation was true for all participants in this study, Scale 4 was not considered in this analysis. Factorial analysis of the 23 items (Scales 1, 2 and 3) of the J-SOAP-II yielded three factors (Table 2) and corresponded to the original defined dimensions. All items were loaded in one factor only. The sample size recommendations for a PCA were met, meaning that for 141 participants, the proportion of five participants was assured for each item (Bryant & Yarnold, 1995). The first factor explained approximately 20% of the variance, the second factor explained 12.7%, and the third factor explained 9% (see Table 2). All factors had eigenvalues over the Kaiser criterion of 1 and together explained 42% of the variance. The first factor contained items related to the intervention process, with loadings ranging from .36 to .85. The second factor consisted of items related to the impulsive and antisocial behavior, with loadings ranging from .39 to .81. The third factor consisted of items related to sexual drive and sexual preoccupation, with factor loadings ranging from .31 to .70.

The next step was the estimation of Cronbach's alpha, mean interitem correlation, and corrected item-total correlation range (see Table 3). In addition, the ICC was calculated to assess interrater reliability. Our results indicated that the subscales proved to have between acceptable and good internal consistency indices (Shrout & Fleiss, 1979). These indices were $\alpha = .67$, $\alpha = .76$, and $\alpha = .85$ for Sexual Drive/Preoccupation Scale, Impulsive/Antisocial Behavior Scale, and Intervention Scale, respectively. Cronbach's alpha values were .89 of the J-SOAP-II total score. The internal consistency of the J-SOAP-II was also examined with intercorrelations of items (Clark & Watson, 1995). With mean interitem correlation values between .21 and .44, we assumed that each item alone correlates with the J-SOAP-II and that items in the instrument are positively correlated. Interrater reliability, estimated using the ICC, was good to excellent, ranging from .73 to .81 ($p \le .001$). Each coder has approximately the same number of J-SOAP-II protocols.

The concurrent validity of the J-SOAP-II and its subscales with the YLS/CMI and PCL: YV total scores revealed moderate statistically significant positive correlations (see Table 4). The Impulsive/Antisocial Behavior and Intervention scales were both

Table 2. Principal Component Analysis With Varimax Rotation for the J-SOAP-II.

	Factor I	Factor 2	Factor 3
I. Prior Legally Charged Sex Offenses	00	.17	.49
2. Number of Sexual Abuse Victims	.12	.03	.67
3. Male Child Victim	.04	02	.67
4. Duration of Sex Offense History	.13	06	.70
5. Degree of Planning in Sexual Offense(s)	.02	.11	.31
6. Sexualized Aggression	.06	.29	.31
7. Sexual Drive and Preoccupation	03	.24	.40
8. Sexual Victimization History	08	12	.59
9. Caregiver Consistency	.16	.39	.18
10. Pervasive Anger	.11	.67	.09
II. School Behavior Problems	.08	.60	.07
12. History of Conduct Disorder Before Age 10	.02	.69	00
13. Juvenile Antisocial Behavior (Ages 10-17)	.06	.81	.06
14. Ever Charged or Arrested Before Age 16	.11	.54	.27
15. Multiple Types of Offenses	.03	.60	10
 History of Physical Assault and/or Experienced Family Violence 	03	.43	.39
17. Accepting Responsibility for Offense(s)	.82	.03	.09
18. Internal Motivation for Change	.84	.06	08
19. Understands Risk Factors	.82	.01	.15
20. Empathy	.85	.04	09
21. Remorse and Guilt	.83	.10	.02
22. Cognitive Distortions	.38	.27	.03
23. Quality of Peer Relationships	.36	.18	.28
Eigenvalue	4.59	2.92	2.22
Variance %	19.95	12.70	9.67

Note. Factor I = Scale 3—Intervention; Factor 2 = Scale 2—Impulsive/Antisocial Behavior Scale; Factor 3 =. Scale I—Sexual Drive/Preoccupation. J-SOAP-II = Juvenile Sex Offender Assessment Protocol–II. Boldface is used to indicate the factor on which item loads most highly.

Table 3. Cronbach's Alpha, Mean Interitem Correlation, Corrected Item-Total Correlation Range, and Interrater Reliability for the J-SOAP-II Scales.

	Cronbach's α	MIIC	CITCR	ICC
I. Sexual Drive/Preoccupation	.67	.21	.2549	.78
2. Impulsive/Antisocial Behavior	.76	.29	.3471	.76
3. Intervention	.85	.44	.3176	.81

Note. J-SOAP-II = Juvenile Sex Offender Assessment Protocol–II; MIIC = mean interitem correlation; CITCR = corrected item-total correlation range; ICC = intraclass correlation coefficient.

significantly correlated with both the YLS/CMI and the PCL: YV, although the Sexual Drive/Preoccupation scale was only significantly correlated with the YLS/CMI. A series of Spearman's correlations were conducted to determine whether there were any

	I. Sexual Drive/ Preoccupation	2. Impulsive/Antisocial Behavior	3. Intervention
YLS/CMI	.30*	.67***	.31**
PCL: YV	.15 ^{ns}	.64***	.29***

Table 4. Correlations of the J-SOAP-II Scales and Its Dimensions With Other Variables.

Note. J-SOAP-II = Juvenile Sex Offender Assessment Protocol–II; YLS/CMI = Youth Level of Service/ Case Management Inventory; PCL: YV = Psychopathy Checklist-Youth Version.

relationships between some J-SOAP-II items and specific PCL: YV items. Results indicated that there was a significant positive association between the J-SOAP-II item "Accepting Responsibility for Offense(s)" and the item "Failure to Accept Responsibility" in PCL: YV, r_s (134) = .395, p < .001. Additional significant positive association was found between "Empathy" item in J-SOAP-II and "Lack of Empathy" in PCL: YV, r_s (134) = .271, p < .001, and between J-SOAP-II item "Remorse and Guilt" and PCL: YV item "Lack of Remorse or Guilt," r_s (134) = .386, p < .001. Concerning behavior problems, significant positive association was found between "History of Conduct Disorder Before Age 10" item in J-SOAP-II and "Early Behavior Problems" in PCL: YV, r_s (136) = .325, p < .001. A significant positive association was also found between J-SOAP-II item "Quality of Peer Relationships" and PCL: YV item "Unstable Interpersonal Relationships," r_s (134) = .248, p = .04.

Discussion

The aim of the current study was to analyze whether the J-SOAP-II was applicable to a different demographic context. Based on current literature, we hypothesized that J-SOAP-II would show acceptable internal consistency and interrater reliability values. It was also hypothesized that concurrent validity with other risk assessment instruments would be found. Several of the psychometric properties were examined, including factor structure, reliability, and validity of the Portuguese version of the J-SOAP-II among a sample of detained JCSO. We found a reliable tridimensional structure, namely (a) first factor (*Intervention*), (b) second factor (*Impulsive/Antisocial Behavior*), and (c) third factor (*Sexual Drive/Preoccupation*), that was consistent with the original validation of the J-SOAP (Righthand et al., 2005). The translation process seems to not affect the structure of this instrument.

Considering the reliability of the J-SOAP-II, our first aim, the internal consistency revealed good to very good values for Scales 2 (Impulsive/antisocial Behavior) and 3 (Intervention), with values exceeding the recommended minimum Cronbach's alpha of .70 (Kaplan & Saccuzzo, 2009; Shrout & Fleiss, 1979). The internal consistency of Scale 1 (Sexual Drive/Preoccupation) in our study (.67) shows an acceptable coefficient. These findings are consistent with other studies that addressed the psychometric properties of the J-SOAP-II (Fanniff & Letourneau, 2012), but are distinct from some

^{*}Significant at the .05 level. **Significant at the .01 level. ***Significant at the .001 level.

previous studies (e.g., Parks & Bard, 2006). It is important to note, nevertheless, Hecker's (2014) consideration about the fact that Scale 1 does not measure a homogeneous and single psychological construct but, rather, includes factors associated with increased risk of sexual reoffending (Prentky & Righthand, 2003), which strengthen Fanniff and Letourneau's (2012) suggestion for the use of records and a clinical interview. In our opinion, this mixed occurrence suggests the need for additional research on the internal consistency of Scale 1. Regarding the mean interitem correlations, no problems were found because Scales 1, 2 and 3 were within the recommended value range of .15 to .50 (Kaplan & Saccuzzo, 2009), revealing an adequate homogeneity between the items.

Interrater agreements were good to excellent in the present study (range from .73 to .81) (Shoukri, 2010), similar to the values obtained in the original version (Prentky & Righthand, 2003) or values obtained more recently (Caldwell et al., 2008; Rajlic & Gretton, 2010).

There was evidence of convergent validity, although the recidivism risk instruments used to establish validity were designed to address general recidivism risk rather than sexual recidivism risk. However, some results did concur with the findings found in previous studies (Caldwell & Dickinson, 2009; Caldwell et al., 2008). The concurrent validity of Scale 2, related to general delinquency, is supported by a positive significant correlation with the PCL: YV and the YLS/CMI, consistent with Caldwell et al. (2008). Scale 3, associated with treatment progress (e.g., accepting responsibility, empathy, remorse, and guilt), was related similarly to the PCL: YV and the YLS/CMI, contrary to the findings by Caldwell et al. (2008). These specific associations with Scale 3 could be related to similar items regarding the youth's dynamic risk factors included in the YLS/CMI (e.g., peer relations, personality/behavior) and the affective subscale of the PCL: YV (e.g., lack of remorse or guilt, emotionally shallow, callous/lack of empathy). Scale 1, associated with sexual behavior and sexual aggression issues, was not related in this study to the PCL: YV or the YLS/CMI.

In general, our results are consistent with other studies (e.g., Fanniff & Letourneau, 2012; Righthand et al., 2005) that presented information about the psychometric properties of the J-SOAP-II, including internal consistency and interrater reliability. That supports the use of this risk assessment with Portuguese youth, although additional research is indispensable to accurately identify high-risk juveniles. Results support the validity of adapting the J-SOAP-II to different languages, as the instrument seems to be conceptually equivalent, shows acceptable psychometric properties, and practically performs in a similar way.

Conclusion

The data from this study reveal practical applications important for future studies. From a clinical perspective, the findings from this study show that the J-SOAP-II can provide useful information to Portuguese evaluators regarding recommendations for sentencing, placement, treatment recommendations, and/or probation/parole requirements. In our study, the J-SOAP-II proves to be a recommended tool for a better sexual

risk assessment, revealing to be applicable in a non-American population. There is sufficient promise to justify further research with the J-SOAP-II in a Portuguese context, particularly research focused on predictive validity. This means that evidence is helpful to identify an important association and open the door for a future prospective study, but further research is needed to examine possible biases of this reporting.

Nonetheless, these current findings should be considered in light of several limitations. Regarding the factorial analysis, although we consider the mean value of communalities to guarantee that it is over .07 and refuse all components with eigenvalues under 1.0, the relatively small sample size for these analyses was another limitation. Further psychometric analysis is needed and must be performed in the near future (e.g., predictive validity, temporal stability). Our results were cross-sectional in nature and limit conclusions, so future longitudinal analyses assessing relations over time would be suitable. Neither of the two raters whose scores informed analyses of interrater agreement completed formal scoring training by an author of the instrument. Although there was regular contact with the authors of the original version, this informal training could have influenced reliability results, although the ICC values showed very consistent values. Future research should analyze J-SOAP-II differences between subgroups (e.g., peers/adult offenders, child abusers, solo vs. group aggressors) because they could share many similarities in their characteristics, but may have different risk factors. Considering the frequency and severity of sex offenses committed by some adolescents, we hope that our study provides additional support for the construction of the J-SOAP-II in general, and may promote future research and a more widespread use of the J-SOAP-II with Portuguese youth, while having an important role in assessing recidivism risk in boys aged 12 to 18 with a history of sexually aggressive behaviors.

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