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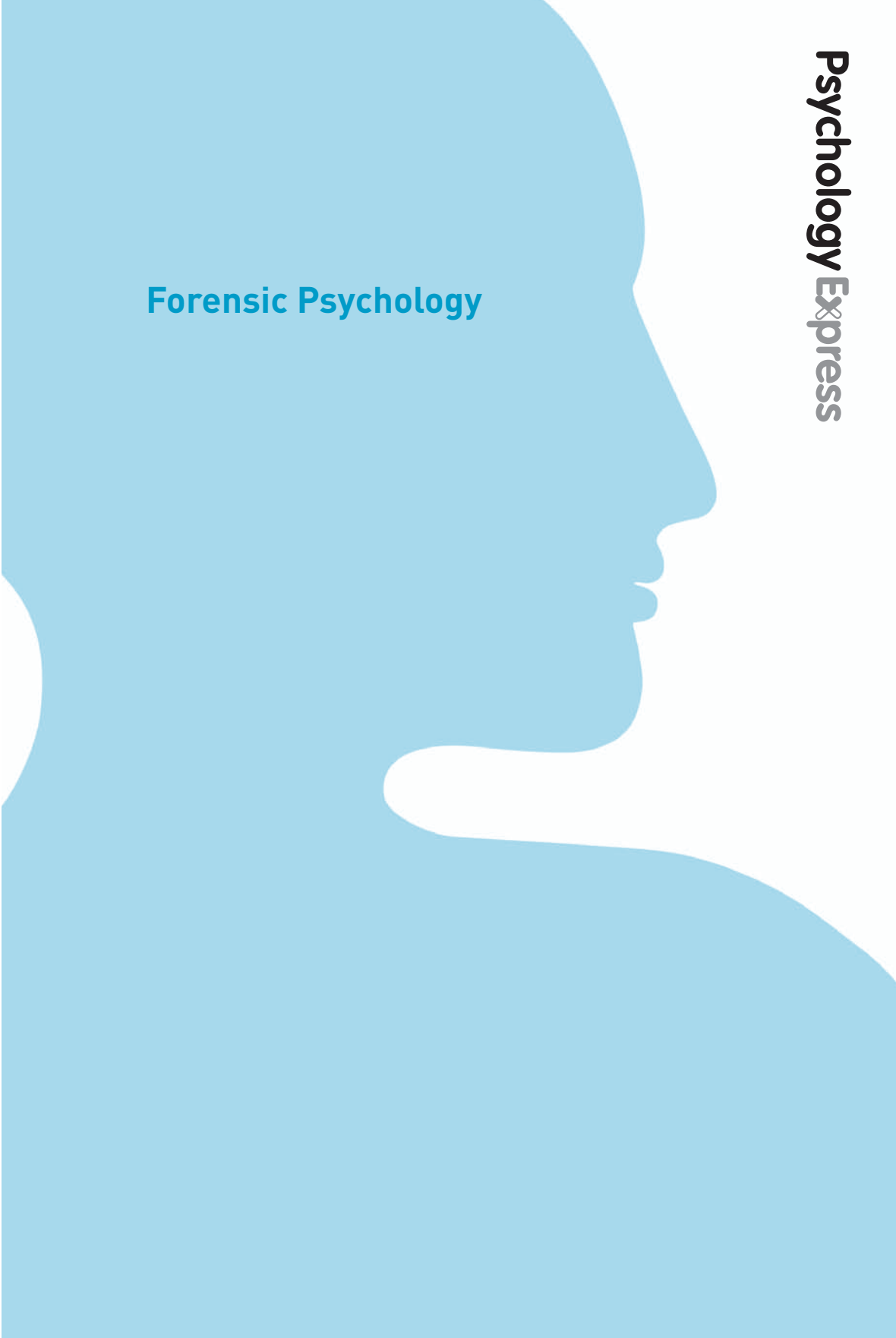
# Forensic Psychology

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## Forensic Psychology



## What are sex offenders like?

Some people assume that sex offenders share certain characteristics. However, just as there are a wide range of behaviours that are classified as sex offences, so too there is no one 'type' of person that commits these offences. Some stereotypes exist around the risks of strangers attacking us or about the 'odd-looking man hanging around the school gates' but the majority of victims know their attacker. Indeed, as discussed in Chapter 10 of this text, people living in the UK in the 1980s may remember a government campaign called 'Say no to strangers' aimed at educating primary school aged children in the dangers of talking to strangers. These sorts of campaigns fuelled such stereotypes.

What we know is that sex offences are more widespread than previously thought and not all sex offenders are disturbed or inadequate individuals, as we will see later in this chapter. Furthermore, and again discussed later in this chapter, sex offending behaviour can start at a very young age.

While there is no one 'type' of sex offender, some researchers have looked at rapists and paedophiles separately to review if there are any patterns in behaviour or personality type.

### KEY STUDY

#### Hazelwood (1987)

Hazelwood was an offender profiler in the United States who suggested the following four categories of *rapist* in his influential work in the area:

Power-assurance rapist	<ul style="list-style-type: none"> <li>● The most common type of rapist</li> <li>● Rape concerns insecurities about masculinity</li> <li>● Short time before reoffends</li> <li>● No great force, weapons unusual, but threats typical</li> <li>● Usually planned</li> <li>● If victim passive, fantasies played out</li> <li>● 'Trophies' may be taken</li> </ul>
Power-assertive rapist	<ul style="list-style-type: none"> <li>● Sexually confident</li> <li>● Rape an expression of power over women</li> <li>● Victims may be sought in social locations</li> <li>● Initially friendly, may quickly change</li> <li>● Extreme violence</li> <li>● Socially skilled</li> <li>● Offences infrequent</li> <li>● This pattern is common in date rape</li> </ul>
Anger-retaliatory rapist	<ul style="list-style-type: none"> <li>● Extreme levels of anger towards women</li> <li>● Rape may involve degrading activities</li> <li>● Short, intense attacks</li> </ul>

- Typically a similarity between victim and woman he holds grudge against
- Regular attacks as a result of build-up of anger

**Anger-excitement rapist**

- The least common type of rapist
- Rapist gains pleasure/sexual excitement from distress of victim
- Infliction of pain is common and violence/torture may cause death
- Careful planning often involving a 'rape kit' (ropes, blindfold, etc.) and he may photograph/record the attack
- Victims are usually strangers
- Irregular attacks, carried out when planning complete

**KEY STUDY**

**Craissati, McClurg, & Browne (2002)**

Craissati, McClurg and Browne (2002) studied all convicted *child sexual abusers* (156 individuals) in south-east London over a seven-year period.

- 46% of the sample reported being sexually victimised as children
- 82% of the total sample had no history of physical abuse, sexual abuse or emotional neglect
- The majority were bullied as children

They compared the offence characteristics of offenders who had been sexually victimised as children and those who had not:

<i>Previous convictions</i>	<i>Non-sexually victimised perpetrators (%)</i>	<i>Sexually victimised perpetrators (%)</i>
Previous sexual convictions	21	40
Any previous convictions	54	61
Male offence victim	27	49
Anal intercourse in offence	10	20
Extra-familial offending	47	49
Previous unconvicted allegations	16	35

**Young people who sexually offend**

As discussed above, stereotypical views of what sex offenders are like are often wrong. This is highlighted by the numbers of sex offences committed by people under 18 years of age. In the United States the US Department of Justice (2009) estimated that over a third of sex offences are committed by 'juveniles'. In the UK the NSPCC (2002) suggests this figure is anywhere between 23% and 40% of all sexual offences. While most of these offenders are over the age of 12, some are younger than this. In addition, while over 90% of teenage sex offenders are male, of those pre-teen sex offenders, significant numbers are female (Silovsky & Niec, 2002).

In the UK in 1997 a 13-year-old boy became the youngest person to be put on the *sex offenders register*. One year later a 12-year-old boy was convicted of raping a five-year-old girl and sentenced to three years' detention under the Children and Young Persons Act. There have been cases of serious sexual abuse reportedly committed by children as young as six years old.

## CASE STUDY

### Britain's youngest convicted sex offenders

In 2010 two ten-year-old boys were found guilty of the attempted rape of an eight-year-old girl, becoming Britain's youngest convicted sex offenders. Both boys denied the charges but, during an interview with police, the older boy admitted exposing himself and touching the girl in a sexual way. The boys were convicted and placed on the sex offenders register.

This case raises a number of issues. One key issue concerns the age of criminal responsibility (the age at which an individual is thought to be responsible for their actions, fully understand the consequences, and be accountable in a court of law). While the United Nations sees anything below 12 years as 'not internationally acceptable' and many countries set criminal responsibility at 16 or 18, in the UK the age of criminal responsibility was lowered from 14 to 10 after two young boys killed a toddler in 1993 (see Chapter 7), making it the lowest in Europe.

While many adult sex offenders have a history of committing sex offences as children, not all young people who commit such offences continue this into adulthood. Consequently, it is important to note how sex offenders may differ according to age. While in the past, research and theory concerning young sex offenders was based on what we know about adults, more recently one of the most significant differences that has been identified is that *younger sex offenders are likely to be more responsive to treatment* (Letourneau & Miner, 2005), with some studies reporting that 85–95% of juvenile sex offenders have no further convictions for such offences, and if they are rearrested it is likely to be for crimes of a nonsexual nature (Alexander, 1999; Caldwell, 2002; Reitzel & Carbonell, 2007).

## Is sex offending an addictive crime?

As highlighted above, most young sex offenders do not commit further sex offences. However, a minority are at risk of committing further sex offences and becoming adult sex offenders.

Whether or not sex offenders are at high risk of reoffending has been the subject of debate.

### Evidence that sex offending is not addictive

Craig, Browne, Stringer and Hogue (2008) have produced one of the most comprehensive reviews of sexual reconviction studies in the UK, reviewing eight studies that included 5915 incarcerated sex offenders and 1274 non-incarcerated convicted sex offenders. They found that sexual reconviction rates in the UK are broadly comparable to those in Europe and North America, with 6% of the sample

being reconvicted within two years of leaving incarceration, 7.8% within four years, and 19.5% within six years. The non-incarcerated sample had figures of 5.7%, 5.9% and 15.5% respectively. The lower reconviction rates for non-incarcerated sex offenders may add support to the argument that less serious offenders (who are less likely to receive custodial sentences) are less likely to reoffend.

The figures discussed above tell us that over 80% of sex offenders are not reconvicted of a sex offence within six years of completing a sentence. This suggests that most sex offenders do not reoffend. Research by West (1987) supports this view, finding that the majority of sex offenders who appeared in British courts in the 1980s appeared only once.

### Criticisms

However, this study relied on official records. Given that we know that many sexual offences go unreported, this may not provide an accurate picture of reoffending amongst sex offenders.

### Evidence that sex offending is addictive

Research by Abel et al. (1987) is often cited as providing evidence for high rates of reoffending amongst sex offenders. In contrast to West, Abel et al. found that 561 sex offenders attending a private clinic admitted to approximately 500,000 offences. This suggests that each sex offender was responsible for, on average, approximately 450 offences. This shocking figure suggests that sex offenders may indeed have high levels of recidivism.

### Criticisms

However, as with all studies, it is important to break down the figures and take an in-depth look at the methodology. If we look closely we find that in actual fact most rapists admitted to just one rape, suggesting that the vast number of rapes are committed by a small number of rapists. Furthermore, the sample used may make these findings questionable. Offenders attending a private clinic may be likely to report more offences in order to seem cooperative with their therapist and avoid being viewed as in denial.

What can be said is that reoffending rates differ and some types of sex offenders may be more likely to reoffend than others.

#### KEY STUDY

##### Hood, Shute, Feilzer, & Wilcox (2002)

Hood et al. studied UK sex offenders with a four or more year custodial sentence. The majority were imprisoned for very serious sexual offences. They tracked the offenders for six years post-release and found:

- 89% of intra-familial (incestual) offenders were NOT reconvicted for any offence within six years. 0% were convicted for a sexual offence.
- 53% of extra-familial offenders were NOT reconvicted for any offence within six years. 26% reconvicted and imprisoned for a sexual offence.

**Further reading** Sex offenders and sex offending

Topic	Key reading
Court responses to victims of rape and sexual assault	Smith, O., & Skinner, T. (2012). Observing court responses to victims of rape and sexual assault. <i>Feminist Criminology</i> , 4, 298–326.
Attitudes towards sexual assault in the criminal justice system	Temkin, J., & Krahe, B. (2008). <i>Sexual assault and the justice gap: A question of attitude</i> . Oxford: Hart Publishing.
Intra-familial child and adolescent sexual abuse	Gannon, T. A., Gilchrist, E., & Wade, K. A. (2008). Intra-familial child and adolescent sexual abuse. In C. Hilarski, J. Wodarski, & M. Feit (Eds.), <i>Handbook of social work in child and adolescent sexual abuse</i> . New York: The Haworth Press.
Early ideas on rapist typologies	Groth, A. N. (1979). <i>Men who rape: The psychology of the offender</i> . New York: Plenum Press

**Test your knowledge**

- 4.1 What would an age of criminal responsibility of 12 or older have meant for the children (both offenders and victim) in the case study above? Consider issues of criminal responsibility, treatment and punishment.
- 4.2 '85–95% of juvenile sex offenders have no further convictions for such offences.' Consider the consequences of placing juvenile sex offenders on the sex offenders register.
- 4.3 What are the potential issues with studies that use official records to investigate reconviction rates for sex offenders?
- 4.4 What are the potential issues with studies that collect self-report data from sex offenders?

Answers to these questions can be found on the companion website at: [www.pearsoned.co.uk/psychologyexpress](http://www.pearsoned.co.uk/psychologyexpress)

**Theories of sexual offending**

A number of theoretical approaches to explaining sex offending behaviours have been suggested, from biological, psychodynamic and learning approaches, through to more complex integrated approaches. These theories have been developed over the past few decades and what you will find below is an overview of the most influential theories in this area.

**Basic theories**

*Biological* theory suggests that deviant sexual preferences arise from biological abnormalities and in essence medicalises sex offending as a form of illness. Indeed paedophilia, for example, is included in the Diagnostic and Statistical

Manual of Mental Disorders IV (DSM IV). However, as discussed earlier, clinical definitions of paedophilia are very narrow and thus would only include around a third of child abusers. Biologically based treatment approaches are discussed later in this chapter.

*Psychodynamic* theory, derived from Freud's work, suggests that sex offending stems from unresolved problems experienced in the stages of development, such as unresolved oedipal conflicts where boys develop an aversion to women as an adult and subconsciously fear castration. Psychodynamic theory suggests that deviant sexual behaviours are a result of character disorders from childhood and thus behaviours are entrenched and not amenable to change. The theory proposes that motivations are not sexual but express non-sexual needs and unresolved issues.

*Learning* theories and *behavioural* theories describe sex offending as a learnt condition where the behaviours are acquired and maintained via the same mechanisms as conventional sexuality. Laws and Marshall (1990) suggested that offenders progress to deviant sexual behaviours through reinforcement and that deficits in establishing relationships with appropriate partners may result in negative reinforcement of deviant attractions, being less stressful and positively reinforced if no negative consequences are experienced (Abel, Blanchard, Becker, & Djenderedjian, 1978).

While these theories have offered some value as start points in attempting to explain sex offending behaviours, the more developed theories typically focus on attempting to explain paedophilia as a greater research base exists around this type of sexual offending.

## Theories of paedophilia

Key theories that have been developed in an attempt to explain paedophilia typically suggest that it results from a combination of factors rather than a single explanatory factor. Some key theories are discussed below.

### *The preconditions model of abuse*

This was proposed by Araj and Finkelhor (1985) and suggests four key preconditions for sexual abuse – that is, four areas in which an individual would be likely to suffer deficits that may lead to paedophilia.

- 1 *Emotional congruence* – lacks self-esteem, is psychosocially immature, and may exercise a need to dominate others.
- 2 *Being sexually aroused by children* – may have occurred through socialisation by child pornography, hormone abnormalities may exist.
- 3 *Blockage* – social blockages may exist making adult contact difficult, such as difficulties relating to women or poor social skills.
- 4 *Disinhibition* – no inhibitions around the lack of normality of adult/child sexual relations. Disinhibition may, for example, relate to the effects of alcohol or exposure to incest-tolerant subcultures.