

A Situational Perspective on Child Sexual Abuse

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Overview

- Traditional Approaches to Child Sex Abuse
- Ten Myths About Child Sexual Abuse
- A Situational Approach to Child Sexual Abuse
- Conclusion

Traditional Approaches to Child Sexual Abuse

- Paedophiles the new 'dangerous'
- Unprecedented media attention
- Growing vigilantism
- Sex offender treatment programs
- Special laws and provisions
 - Longer sentences
 - Restrictions on parole
 - Dangerous offender legislation
 - Sex offender registers
 - 'Blue cards'

Current strategies based on person-centred approach:

- View of offenders as suffering psychopathology
 - Internally driven
 - Early onset
 - Persistent
 - Specialised
 - Psychiatric rather than criminal
- Identifying and screening risky individuals
- Treating known offenders

Ten Myths About Child Sexual Abuse

- Unhelpful misconceptions about child sexual abuse
- Two studies:
 - Smallbone & Wortley (2000)
 - Part of QPS 'Project Axis'
 - Official data on 323 convicted CSA offenders (not a treatment sample)
 - 212 detailed, confidential self-report – psychosexual histories, modus operandi
 - Test-retest reliability +.9
 - Smallbone, Wortley & Kebbell – current
 - Follow-up on 2000 sample plus new participants
 - Particular focus on onset offence

Myth 1: Most child sex offenders target children who are unknown to them and are located in public places

■ The myth of 'stranger danger'

- 56.5% lived with child
- 36.9% knew child
- 6.5% stranger

■ Location

- 69% at home
- 7% public toilet

Myth 2: Most child sex offenders belong to a deviant subculture that involves high levels of networking among its members

■ Before arrest

- 8% talked to other offenders
- 4% member of paedophile group

■ While in prison

- 4% provided with information about accessing children
- 5% provided with information about clubs

Myth 3: Most child sex offenders are homosexual

- Stated sexual orientation:
 - 76% female only
 - 8% male only
 - 13% both
- Choice of victim
 - 72% female
 - 28% male
- However, homosexual offenders tend to have more victims

Myth 4: Most child sex offenders begin to offend sexually at an early age

- Mean age of first contact 32.4 years
- Modal age 31-40 years (37% of sample)
- 10.6% 17-20 years
- 6% > 50 years
- Most juvenile offenders do not progress to adult sexual offending
- However, early onset is associated with higher recidivism

Myth 5: Most child sex offenders have many victims and will invariably reoffend

■ Number of convictions

- 77% first sex offence

■ Number of victims

- 55% one victim
- 3% >10 victims

■ Recidivism

- 13% sex offence after 5 years release; 37% for any offence (Hanson & Bussiere, 1998)
- reconviction for a sex offence 19.3% after 32 years (Soothill et al 2000)

Myth 6: Most child sex offenders specialise in sex crimes

■ Prior convictions

- 57% non sex offences; 23% sex offences
- Four time more likely first offence was non-sexual (82% versus 18%)
- 5% serial specialists

■ Reconvictions

- Hood et al (2002) – sex offenders four times more likely to be reconvicted for non-sex offence (8.5 v 30.9%) after 6 years
- Soothill et al (2000) – child sex offenders four times more likely to be reconvicted for non sex offence (19.3 v 76.2%) after 32 years

Myth 7: Sexual attraction to children is rare and confined to a small group of deviant individuals

- High incidence of child victimisation
 - 34% of women and 16% of men report child sexual victimisation (Dunne, Purdie & Cook, 2003)
 - 43% of all sexual assault victims aged 12-17; only 31% over 17 years (Simon & Zgoba, 2006)
 - 17% of males admitted having molested a child (Finkelhor & Lewis, 1990)
- Attraction to children by non-paedophiles
 - Attraction to children as children
 - Child marriage common historically and in many contemporary cultures
 - non-paedophile males recorded penile volume responses to pre-pubescent boys and girls (Freund et al, 1972)

Myth 8: Most child sex offenders have associated diagnosable sexual disorders

- Low incidence of paraphilia
 - 5.4% exhibitionism
 - 9% frotteurism
 - 5% voyeurism
 - 4.2% public masturbation
 - 1.2% sexual masochism
- Treatment for other problems
 - 23% for depression
 - 18% drug and alcohol
 - 13% anger problems

Myth 9: Most child sex offenders view child pornography: most people who view child pornography sexually abuse children

- Use of pornography by offenders
 - 75% used general pornography
 - 10% use child pornography
 - 4% collected pictures
- Offending by pornography users
 - Prior to internet 30% of arrested child pornographers involved in hand-on offending
 - Current estimates on treatment/convicted samples 17-40%
 - Post internet massive increase in 'casual' viewing (one site received 1 million hits in a month)

Myth 10: Reoffending by child sex offenders can be reliably predicted by mental health professionals.

- Tendency of clinicians to over predict
 - Assume high base rate
 - Playing safe
- Actuarial more accurate but still many errors. For the most risky 12% of offenders (identified on the Static-99) (Hanson & Bussiere, 1998)
 - 39% reconvicted after 5 years
 - 45% reconvicted after 10 years
 - 52% reconvicted after 15 years

A Situational Approach Child Sexual Abuse

- Potential to commit child sex offences more widespread than sexual deviancy model suggests
- Evolutionary predisposition for youthful partners, sexual aggression, and self-interest
- Failure to learn *not* to offend
- Breakdown of personal, social & situational controls – children victimised *because* they are vulnerable
- Sexual preference for children may be a *consequence* of offending – *offending changes offenders*
- Importance of onset offence – primary prevention

Three types of offenders:

■ Committed

- 23% serial sex offenders
- Sexual preference for children
- Manipulate environment to create opportunities

■ Opportunistic

- 41% first time sex offenders/versatile criminal history
- Sexually ambivalent/generalised poor self-control
- Exploit opportunities

■ Reactive

- 36% first time for any offence
- No strong attraction to children/conventional
- Respond to situational stressors and/or stimulation

Situational prevention:

- Crime can be prevented by altering immediate environments in which offending occurs to reduce opportunities and other situational pressures, for example:
 - Increased guardianship
 - Environmental design
 - Work-place protocols
 - Controlling access to home and facilities
 - Individual stimulus control and relapse prevention programs

Conclusions

- Current approaches to child sexual abuse based on misconceptions
 - Preconceived ideas about likely suspects may hamper criminal investigations
 - Screening will not identify most potential offenders
 - Treatment/surveillance of known offenders will not prevent new offenders
- Not all child sex offenders 'driven' to offend (at least not initially) – may be deterred by situational interventions *before they offend*
- Even committed offenders may be deflected by situational strategies
- Implementation not always easy - need to avoid 'siege mentality'

Further reading:

- Smallbone, S. W., & Wortley, R. (2000). *Child sexual abuse in Queensland: Offender characteristics and modus operandi*. Brisbane: Queensland Crime Commission
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- Smallbone, S.W., Marshall, W., & Wortley, R (2008). *Preventing child sexual abuse: Evidence, policy and practice*. Cullompton, Devon: Willan
- Wortley, R., & Smallbone, S. (2006) (eds). *Situational prevention of child sexual offending. Crime Prevention Studies*. Monsey, NY: Criminal Justice Press