

# **An exploration of the nature of sexual offending in the mentally disordered population.**

by

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## **ABSTRACT**

This thesis focused on the exploration of the offending behaviour of mentally disordered sex offenders. The nature and prevalence of their disorders, the relationship between their disorders and their offending behaviour has been systematically reviewed. This review highlighted the lack of research regarding the offending behaviour of this population and drew attention to the inconsistency and inconclusiveness of findings which led to the conclusion that further research is needed.

The empirical research investigated behavioural consistency and change within a series of crimes perpetrated by mentally disordered sex offenders. This part of the thesis attempted to explore factors that could potentially influence the modus operandi. The research highlighted the number of personal and situational factors, and their complex relationships, that are associated with the offenders' behaviour at the crime scene. The findings identified consistency that was reflected in behavioural patterns. At the same time, the variability of the behaviour was observed. The changes in the behaviour seemed to be either gradual and associated with experience, learning, etc., (evolutionary), or more sudden, linked to more acute change in the motive or mood (reactive). Additionally the thesis introduced the Wilson Sexual Fantasy Questionnaire (WSFQ) that was designed to measure the sexual fantasies, one of the factors believed to influence sex offender's behaviour at the crime scene. Although the WSFQ is often used in a clinical practice, its properties were found to be open to discussion. This was partially due to the small number of studies that examined and reported its reliability or validity. The findings of the thesis, need for future research, and the application of the findings in investigative and clinical practice, were also discussed.

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# **Chapter 1**

## **Introduction**

The issues relating to sex offending have been extensively explored by numerous professionals who tried to gain a better understanding of various aspect and processes associated with this type of behaviour (e.g., Carabellese, Maniglio, Greco, & Catanesi, 2011; Cartoni, 2009; Gee, Ward, & Eccleston, 2003; Ward & Beech, 2006), identify the most appropriate treatment that could reduce risk of reoffending (e.g., Marshall, Marshall, Serran & Fernandez, 2006; Siegert & Ward, 2003; Yates, 2003), develop more effective risk assessments (e.g., Craig, Browne & Beech, 2008; Flak, Beech & Fisher, 2007; Polaschek, 2012), as well as explore the aspects that could guide and support the police investigations (e.g., Santtila, Junkkila & Sandnabba, 2005; Sorochinski & Salfati, 2010; White, 2007; Woodhams & Toye, 2007). These studies attempted, for example, to develop more appropriate investigative approaches, to improve the adequacy of assessments of the nature and severity of risk that sex offenders pose to others, or to identify more effective approaches to their treatment that could reduce that risk (Andrews & Bonta, 2006; Bennell & Jones, 2005; Hanson, 2006; Ward & Beech, 2006; Santtila, Junkkila, & Sandnabba, 2005; Woodhams & Labuschagne, 2011). Others have also examined these variables in subpopulations of sex offenders, such as those with mental disorders (e.g., Olver, & Wang, 2006; Seinfert, Jahn, & Wirtz, 2002; Stinson, Becker, & Tromp, 2005; Ullrich & Marneros, 2004).



## **Mental Disorder and Sex Offending Behaviour**

The subpopulation of mentally disordered sex offenders is often believed to be a minority, and the link between the mental illness and sexual recidivism has been presented as doubtful by some authors (Cortoni, 2009; Seinfert, Jahn, Bolten, & Wirtz, 2002). Nevertheless, a large amount of research suggests a high prevalence of mental disorders in the population of incarcerated sex offenders (Harsch, Bergk, Steinert, Keller, & Jockusch, 2006; Heasman, 2006; Leue, Borchard, & Hoyer, 2004). Although the prevalence and co-morbidity of these disorders has been explored by various authors, far less is known about the offending behaviour of these individuals who are deemed to be mentally disordered (Greenall & West, 2007).

## **Understanding Change in Mentally Disordered Sex Offenders' Behaviour**

Many factors have been identified as potentially maintaining and influencing the sexual offence cycle, for example beliefs, attitudes, emotional states, or sexual fantasies (Carabellese, Maniglio, Greco, & Catanesi, 2011; Ward & Beech, 2006). Although their role in the offending behaviour has been supported with evidence (e.g., Bartels & Gannon, 2011; Bulten, Nijman, & Staak, 2009; Cortoni, 2009; Flak, Beech, & Fisher, 2007), the nature of their impact, circumstantial variability of their role, as well as the extent to which they are capable of influencing the behaviour at the crime scene, remains unclear.

Moreover, these features are also characterised by the tendency to evolve with time (Gee & Belofastov, 2007). In fact, behavioural change can be associated with

changes in an offender's attitudes, his awareness, emotional states, sexual fantasies. These behavioural changes could be a result of experiences, or gaining new skills and knowledge (e.g., associated with the reactions of the victim, contact with the police, gaining more confidence, evolution of sexual interest and fantasy, etc.) (Leitenberg & Henning, 1995). The understanding of these processes behind sexual offending and the complexity of dynamic factors remain limited.

### **Behavioural Stability of Mentally Disordered Sex Offenders**

One of the main questions of this thesis relates to the behavioural patterns, or changes displayed at the crime scene. This would include factors influencing these behaviours. Better understanding of the conditions under which offenders will show behavioural stability and change is crucial, not only for risk assessment and management, but also the therapeutic work around the offence parallel behaviours or offence prevention work (Daffern, 2010; Jones, 2010). This knowledge could also support further development of approaches to police investigations.

Studies that investigated the modus operandi of sex offenders have been conducted with samples where the mental health status of the offenders was unknown (Bennell et al., 2009; Grubin et al., 2001; Santtila et al., 2005; Woodhams & Labuschagne, 2011). These studies often used police data, and their results suggested a moderate degree of stability, as well as change in the offending behaviour of serial sex offenders (e.g., Bennell et al., 2009; Grubin et al., 2001; Santtila et al., 2005; Woodhams & Labuschagne, 2011). In this perspective, behavioural stability and change is essential for the process of crime linkage, by which behavioural similarities between crimes can indicate whether they were committed by the same serial offender. The

literature that explores various aspects of crime linking (i.e., an investigative technique used by the police to link crime pairs committed by the same offender on the basis of behavioural consistency and individual distinctiveness; Bennell & Jones, 2005) defines serial offenders, as those individuals who committed at least two crimes. For the purpose of this thesis, these criteria have been used, and any individual who committed two or more sexual offences was classified as a serial sex offender (Woodhams et al., 2007; Woodhams & Toye, 2007). This evidence of behavioural similarity from crime linkage can be used not only to guide investigations, but also as similar fact evidence in legal proceedings (i.e., the evidence of the accused person's previous convictions for similar acts) (Woodhams et al., 2007).

It is difficult to hypothesise about the nature of the crime scene behaviour of mentally disordered offenders. The current literature suggests that mental illness could be associated with greater level of disorganisation at the crime scene and more opportunistic nature and motives, which over time, could result in more behavioural variation (Greenhall & Green, 2006; Kocsis, Cooksey, & Irwin, 2002). The concept of organised versus disorganised crime scene was used in the past, in order to classify offenders on the basis on the degree to which their behaviours at a crime scene was either organised (e.g., planned, more calculated) or disorganised (e.g., more chaotic, possibly opportunistic, etc.) it was then suggested that this would carry over to the offenders' personal characteristics (Canter, 1995; Trojan & Salfati, 2008). However, on the other hand, there are assumptions regarding the persistent and enduring beliefs of mentally disordered and ill sex offenders (Drake & Pathe, 2004) that support the hypotheses of their more consistent behaviour. This agrees with the assumption that mentally disordered individuals have more rigid, inflexible mental representations that

are crucial in the production of behaviour (Mischel & Shoda, 1995). However, the above findings are not supported by empirical evidence.

Although, according to the literature, it seems that mentally disordered offenders rarely commit sexually motivated crimes when compared to the general population of sex offenders (Seinfert et al., 2002; Wallace, Mullen, Burgess, Palmer, Ruschena, & Browne, 1998), it is important to establish whether the potential difference in their behaviour could impact on the outcome of previously cited research.

### **Justification of Thesis**

The aim of this thesis is to explore the nature and the behaviour of mentally disordered sex offenders. This includes a review of the existing knowledge about mentally disordered sex offenders. The empirical research has the potential to benefit a range of parties. There is little research on the reasons why offenders enact similar behaviours over time, or indeed why they might alter their behaviour. This thesis therefore addresses this gap in existing literature about serial sexual offending behaviour perpetrated by mentally disordered individuals. This hopes to provide more conclusive information that could guide a risk management within and outside the institution, assessments of future risk, and treatment plans for mentally disordered offenders. It could also highlight potential risk factors, and protective factors associated with serial sex offending committed by males that have been diagnosed with a mental disorder, consequently improving relapse prevention work with those offenders. Moreover, the research findings could provide additional guidance for the investigative process of crime linkage conducted by the police.

## **Overview**

The second chapter of this thesis is a systematic literature review which examines the current research regarding mentally disordered sex offenders. The review highlights the complexity and broadness of this problem which encompasses issues relating to the prevalence and comorbidity of mental disorders within the population of sex offenders, the characteristics of this population, as well as factors influencing their offending behaviour. The diversity within the identified studies suggested the need for further research.

Chapter 3 is an empirical research study which examines serial sexual offenders' behaviour at the crime scene, in order to identify factors that potentially influence offending behaviour. It investigates the individual's behaviour present throughout the series of his crimes and factors that are associated with either its stability or change.

Chapter 4 explores the psychometric properties of the Wilson Sex Fantasy Questionnaire (WSFQ). This measure was designed to assess the sexual fantasy which is one of the factors associated with a behaviour displayed at the crime scene. The reliability and validity of this assessment tool is discussed and the limitation of using it in practical settings, as well as in research is discussed.

Chapter 5 is a constructive summary of all findings of the thesis. These are discussed in the context of current literature, recommendations for future research, as well as their practical and clinical implications.

The next chapter will provide an overview of the current literature around mentally disordered sex offenders. Due to a very limited number of identified studies that explored the offending behaviour of this population of sex offenders, criteria for

this review have been broadened to incorporate all relevant empirical evidence relating to the characteristics and behaviours of this complex subpopulation of sex offenders.

## **Chapter 2**

### **Systematic Review**

**What is known about mentally disordered sex offenders? An investigation into the potential behavioural consistency of mentally disordered sex offenders.**

## **Abstract**

Currently there are a significant number of empirical studies which contribute towards theories and models of sexual offending behaviour. Nevertheless, it seems that the population of mentally disordered offenders has been studied less extensively.

Assumptions about the nature of these offenders seem to be based on general knowledge. Future research is needed to establish if behaviours of mentally disordered sex offenders could be understood and prevented. Acknowledging the specific nature of this subgroup of offenders may have crucial implications for not only their treatment, but also for investigative processes. The question of the behavioural consistency of mentally disordered individuals should be derived from the review of general findings from studies of this population. Hence, this review focuses on what has been identified about the nature of mentally disordered sex offenders.

**Objective:** To examine and evaluate the current knowledge of the population of mentally disordered sex offenders that would focus on their offending behaviour and any potential relationship between their mental disorder and sex offending behaviour.

The search involved The Cochrane Library, EMBASE (Ovid) (1996-2012), MEDLINE(R) (Ovid) (1996-2012), PsycINFO (Ovid) (2002-2012), CINAHL (EBSCO Host), ASSIA (CSA), hand searches of key journals, and searches of references lists of identified articles.

The review looked at all studies of the population of male, adult sex offenders diagnosed with any mental disorder. Systematic reviews and literature reviews were



rejected, as well as studies that did not meet the inclusion criteria (see the inclusion criteria listed on the page 17). Data were extracted using a data extraction form (see Appendix I).

Due to the small amount of research identified during the search of the databases, and extreme diversity regarding the diagnosis of mental disorder, measurements and the aims of identified research, this review was only able to focus on evaluating obtained studies and highlighting the direction for further research.

Due to very different aims of analysed studies, the synthesis of the data and comparison of their outcomes was very difficult. The studies investigated prevalence of specific disorders; comorbidity of various mental disorders and the influence of disorders within sex offenders' behaviours. These aspects were explored with different diagnostic tools, different diagnostic criteria, as well as they focused on different types of offences. Nevertheless, interesting observations have been reported by some of the researchers that could be related to the level of behavioural consistency of the mentally disordered sex offenders. The search reflected the state of current knowledge about mentally disordered sex offenders, as it seems that little is known about this population. This might be a consequence of the generally accepted assumption that mentally disordered individuals act in a disorganised manner, and rarely commit sexual offences (Kocsis et al., 2002; Seinfert et al., 2002). The diversity and inconsistency of this review's findings will be discussed at the end and the recommendations for further research will be discussed.

## **Introduction**

The current state of knowledge regarding issues of sex offending includes many empirically evidenced models and theories (e.g., Marshall, Marshall, Serran, Fernandez, 2006; Polaschek, 2012; Siegert & Ward, 2003; Ward & Beech, 2006). Nevertheless, it seems that some areas receive much more attention than others. Understanding of the population of mentally disordered sex offenders remains unclear, and is still based on many contradictory assumptions and a limited amount of research. The reasons for this might be, for example, a general view that mentally ill individuals hardly ever commit sex crimes (Seinfert et al., 2002), or ethical and practical issues relating to any research on mentally ill persons (i.e., in the active stage of their illness). Nevertheless, there is some evidence suggesting that in the majority of cases, mentally ill individuals tend to commit their sexual offences when their illness is in remission (Davis, 1992). Therefore, the question arises whether mentally ill sex offenders are similar in their behaviour displayed at a crime scene to those offenders without any mental disorders.

Further complications for the studies of this subgroup are relating to the definition of mental disorder itself. It includes an extremely wide spectrum of disorders of a very diverse nature. This review looked into Axis I and II disorders from the Diagnostic and Statistical Manual of Mental Disorders DSM-IV (APA, 2000). It also incorporated the concept of psychopathy (Hare, 1991), which regardless of its complicated relationship with other diagnoses, is often described along with other personality disorders (Widiger & Lynam, 2003). Moreover, the DSM-IV criteria emphasised the conceptual link between antisocial and psychopathic disorder (Hare, 2008). Axis I disorders include schizophrenia and other psychosis, mood disorders, paraphilias, sleeping disorders,

eating disorders, and many more. Axis II describes the criteria for personality disorders. Sex offenders diagnosed with different mental disorders will experience different symptoms impacting upon their functioning and behaviour (including offending behaviour) in a very different ways. For example, there are suggestions in the literature that mentally ill offenders are more opportunistic and driven by a sexual desire whereas for example, sadistic psychopaths are more organised and interested in violence during the attack (Mokros & Alison, 2002). Therefore, a closer examination of the role of mental disorder symptoms in offending behaviour could enhance the understanding of this behaviour, improve the treatment and prevention plans for these offenders, as well as support the investigative processes conducted by the police.

The contradictions within the literature also relate to the prevalence of a mental disorder diagnosis in the population of sex offenders. There are suggestions that a mental disorder diagnosis is very common among sex offenders (Heasman, 2006), particularly mood disorders, anxiety disorders, phobias and post traumatic stress disorder (PTSD). However, at the same time, some authors stress that most of the existing findings are based on the research of incarcerated samples of sex offenders (Harsch, Bergk, Steinert, Keller, Jockusch, 2006; Leue, Borchard, & Hoyer, 2004). This could lead to overestimation of comorbidity between sex offending and mental disorder, as within the prison environment the prevalence might be higher than in the general population (Fazel & Danesh, 2002). This would specifically apply to forensic mental institutions, where the referral process is based on the mental state of the patient.

The criticism of problems related to the reliability and validity of diagnosis according to the DSM-IV criteria cannot be ignored. More specifically, diagnosis might be biased by an individual's approach to the interpretation of the criteria, or limitation

of the information obtained from the patient, or from observations (patients are often not willing to talk about the entire spectrum of the symptoms they experience) (Novak et al., 2007). This would apply not only to Axis I disorders, but also Axis II. The assessors are often led by subjectively interpreted criteria of DSM-IV (Marshall, 2007). The criteria for some disorders are influenced by law. For example, paedophilia is relating to a sexual offence against a child. According to DSM-IV a child is a person under the age of 13. However, in different countries the law sets different criteria (16-18 in USA, 12-18 in Mexico, 16 in United Kingdom, 14-16 in most of the European countries but Spain where the age of consent is 13) (Birkhead, 2011; Thomson, 2004; Wellings & Parker, 2006).

The existing literature provides some evidence investigating the link between mental disorders and sex offending behaviour. For example, paraphilic disorder has been identified as strongly linked with sex offending (White, 2007). It has been also suggested that paraphilic behaviour is fantasy driven (Briken et al. 2006). Better understanding of the nature and prevalence of paraphilic disorders, and fantasies associated with them, would potentially provide an explanation of certain behaviours displayed by sex offenders during the offence.

Research on stability and change in sexual offending behaviour has begun more recently, with research suggesting that serial sex offenders show both stability and change in their behaviour over time (Bennell et al., 2009; Grubin et al., 2001; Santtila et al., 2005; Woodhams & Labuschagne, 2011). In investigative psychology, an understanding of behavioural stability and change is needed in the process of crime linkage, whereby behavioural similarities between crimes can point to them being committed by the same serial offender (Woodhams et al., 2007). Evidence of

behavioural similarity from crime linkage is used to guide police investigations and has been used as similar fact evidence in legal proceedings (Woodhams et al., 2007).

Knowledge of the stability and variability of sexual offending behaviour is also highly relevant to the management and treatment of offenders who are detained in forensic settings. Crime linkage analysis is very similar to functional analysis conducted for offence-paralleling behaviour that enables the assessment of the potential future risk of reoffending and planning appropriate interventions based on identified treatment needs of the offender (Jones, 2010b). In fact, direct links have been drawn between crime linkage and the offence paralleling behaviour analysis (Daffern, 2010). The most important similarity between the crime linkage and the offence–paralleling behaviour analysis lies in the recognition of both approaches of the necessity to investigate a series of offences rather than a single event (Daffern, 2010).

### **Aim and Objectives of the Current Review**

A better understanding of the subpopulation of mentally disordered sex offenders and their behaviour would not only contribute to the improvement of the investigative processes conducted by the police (e.g., the understanding of their behaviour at the crime scene, predicting more accurately whether different crimes could be perpetrated by the same person, etc.), but could potentially improve the planning and implementation of therapeutic treatments (treatment needs, risk and protective factors). Additionally, it would help to gain a better insight into the differences between the population of mentally disordered and not disordered sex offenders, the prevalence and comorbidity of mental disorders in the population of sex offenders, the relationship

between the symptoms and the offending behaviour, risk, motivation, etc. The aim of this chapter is to examine the current knowledge about the population of mentally disordered sex offenders using a systematic approach, and to appraise the methodology employed within these studies.

## **Methods**

Initially, electronic databases were searched in order to identify any systematic reviews that had focused on similar topics (e.g., Cochrane Library, DARE: database of abstract reviews of effectiveness, and Campbell: collaboration database). No relevant work was found. The electronic databases were searched with the keywords listed below. The titles and abstracts were examined and all studies that did not meet the inclusion criteria were rejected. The final part of the search involved exploring the reference lists of published articles selected for the review and hand searches for further relevant studies.

## **The Inclusion Criteria for the Selection of the Studies**

The studies included in this review were:

- English language papers
- focused on the population of mentally disordered (Axis II DSM-IV personality disorders, and psychopathy according to the Hare's definition (1991))
- adult males (at least 18 years old)

- who had committed sexual offences (rape, child molestation, mixed sexual offending, etc).

The exclusion affected:

- papers that looked into female or mixed (females and males) samples,
- juveniles (under the age of 18),
- or offenders with learning disabilities, or with Axis I mental illness diagnosis,
- Individuals classed as psychopathic according to the legal criteria but not Hare's (1991) criteria,
- reviews, or papers regarding types of therapy or any other treatments, or their evaluations.

## **The Types of Participants**

Male, adult sex offenders who met the criteria for any personality disorder diagnosis of DSM-IV Axis II and/or psychopathy.

## **Search Methods for Identification of Studies**

Electronic searching of following databases: EMBASE (Ovid) (1996-2012), MEDLINE(R) (Ovid) (1996-2012), PsycINFO (Ovid) (2002-2012), CINAHL (EBSCO Host), ASSIA (CSA), which consisted of searching the title and key words using the key words:

Sex\* offen\*, sex\* abus\*, sex\* assault\*, sex\* aggress\*, sex\* violen\*, rap\*, molest\*,  
serial offen\*, serial rap\*, repeat\* offen\*, recidiv\*, re-offen\*, multipl\* offen\*, sex\*  
crim\*, discharg\* (using OR between each term)

AND

Mental\* disord\*, mental\* ill\*, personality disord\*, schizo\*, psychop\*, psychos\*,  
psychot\*, paraphil\*, sadis\*, pedophil\*, hebephil\*, insan\*, devian\*, narcissis\*, fetish\*,  
antisocial\*, borderline, depress\*, mani\*, bipolar, affect\*, paranoi\*, disord\*, frotteur\*,  
voyeuris\*, exhibit\* (again OR was used to widen the search scope)

AND

Body dispos\*, crim\* investig\*, crim\* profil\*, journey to crime, travel to crime, modus  
operandi, MO, spatial behav\*, signat\*, offen\* method\*, behav\* consist\*, behav\*  
character\*, crim\* scene, crim\* link\*, geograph\* profil\*, victim\*, offen\* pattern\*, crim\*  
analys\*, (OR)

AND

Foren\* psych\*, foren\* hospital\*, special hospital\*, secure hospital\*, secure unit\*,  
forens\* unit\*, high secur\*, max\* secur\*, med\* secur\*, incarcer\*, forens\* institut\*,  
inmat\*, prison\*, patient\*



Table 1

*Systematic Review Research Results*

EMBASE 1996-2012	345
PsycINFO 2002-2012	206
MEDLINE (R) Ovid	311
PsycARTICLES	19
ASSIA (CSA)	11
CINAHL(EBSCO Host)	284

The initial search identified 1143 papers. This was incorporated with a hand search (n=10) of journals and journals identified from the reference lists (n=23) which was followed by the analysis of titles and abstracts for relevance (n=12 removed). Any article that did not meet the inclusion criteria listed in the previous paragraph (n=13), along with duplicate articles that were already found by another search engine, was excluded (n=1128). Literature and systematic reviews, book chapters that did not involve research projects (n=12) and articles in languages other than English were also rejected (n=16). This process selected 7 studies of which full copies were retrieved and assessed for eligibility. Details of the data selection process have been presented in the Figure 1.

The next step of the review involved the critical evaluation of each research using a predesigned data extraction form, detailed in Appendix I.

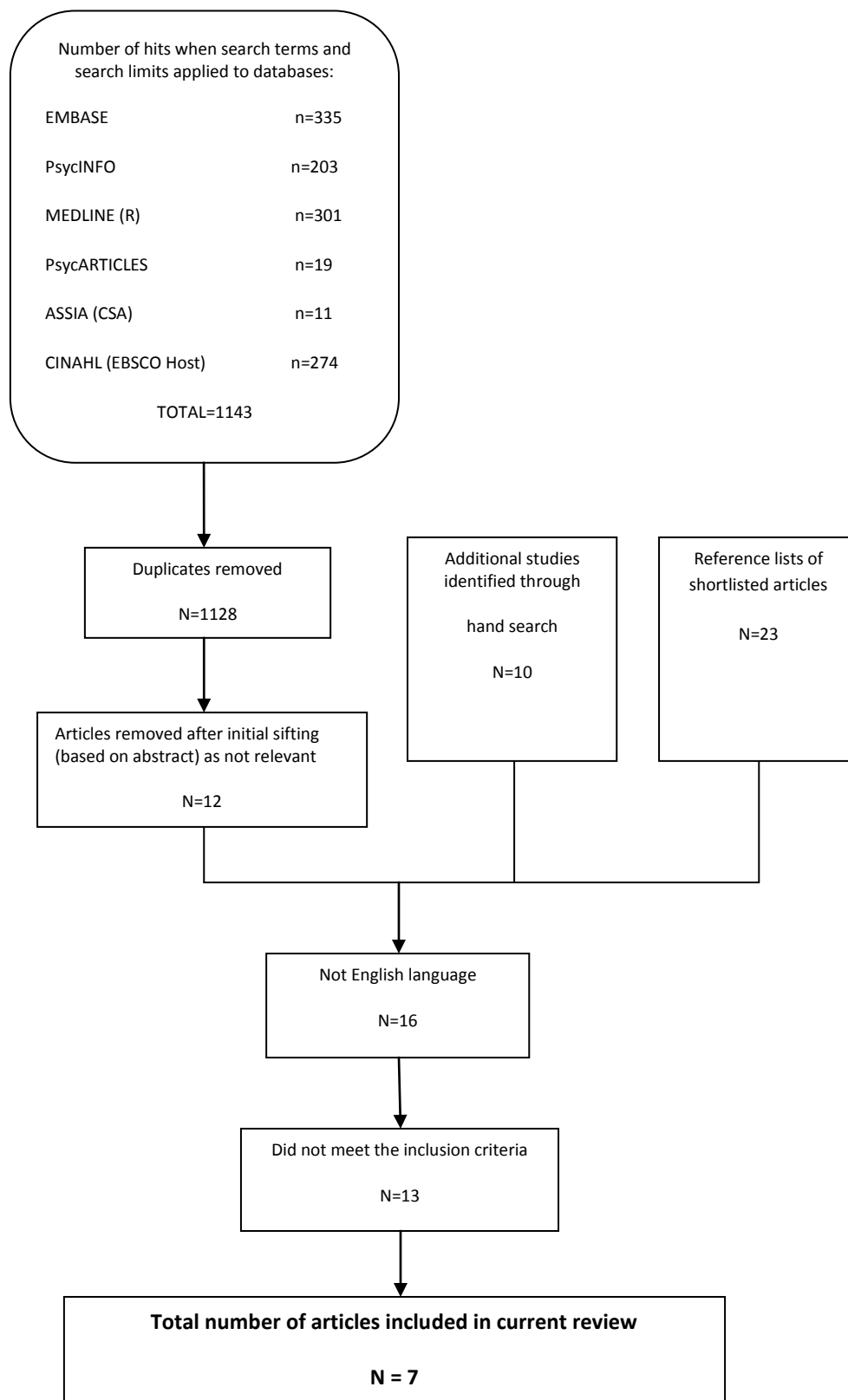


Figure 1. Data selection process.

## **Data collection and Analysis:**

Due to the significant differences of identified studies it was impossible to compare the outcomes of these in order to draw more generic conclusions. Therefore this review focused on the overview of the findings and assessment of their quality, in order to recognise any gaps in the literature, as well as assess the current knowledge on mentally disordered sex offenders. The review focused on seven studies that explored the mentally disordered sex offenders. Among them there were: Olver and Wong study from 2006; the paper published in 2005 by Stinson, Becker, and Tromp; Leue, Borchard, and Hoyer study from 2004; Dunsith, Nelson, Brusman-Lovins, Holcomb, Beckman, Welge, Roby, Taylor, Soutullo, and McElroy study from 2004; research published by Harsch, Bergk, Steiner, Keller, and Jockush; Rigonatti, Padua Serafim, Freitas Caires, Guerra Vieira Filho and Arboleda-Florez (2006); and research published by Porter, Brinke, and Wilson in 2009.

The tables below present this review's findings in a more concise and organised manner. Table 2 lists all identified studies, along with the year and the country of their publication. The next table (3) includes the information regarding the studied sample, measurement used by researchers, participants' mental disorder diagnosis and the type of their offending behaviour. The last table (4) includes a very brief description of the study aims and results.

Table 2

*Research Articles Identified by the Review*

	<b>Authors</b>	<b>Year</b>	<b>Country</b>
1.	Olver & Wong	2006	Canada
2.	Stinson, Becker, & Tromp	2005	USA
3.	Leue, Borchard, & Hoyer	2004	Germany
4.	Dunsieth, Nelson, Brusman-Lovins, Holcomb, Beckman, Welge, Roby, Taylor, Soutullo, & McElroy	2004	USA
5.	Harsch, Bergk, Steiner, Keller, & Jockusch	2005	Germany
6.	Rigonatti, Serafim, de Freitas Caires, Filho, & Arboleda-Flores	2006	Brazil
7.	Porter, Brinke, & Wilson	2009	Canada

Table 3  
Methodological differences among identified studies

	Sample size Offence type	Measurement	Diagnosis	Aim	Results	Critique
1.	N= 156 male sex offenders  <u>offences:</u> -Rape -Child molestation (victim under 14) -Mixed offenders -Incest offenders	Psychopathy Checklist – Revised (PCL- R) cut off =25  Violence Risk Scale: sexual offending (VRS:SO)	Psycho- pathy  Sexual deviance	Explored the relationship between psychopathy, sex offender type, sexual deviance and recidivism	<p>- Psychopathic offenders evidenced a more serious nonsexual criminal history than non-psychopathic offenders, including more prior nonsexual violent convictions (<math>M = 2.2</math> [<math>SD = 2.3</math>] and <math>M = 1.1</math> [<math>SD = 1.8</math>], respectively, <math>F[1, 153] = 9.16, p &lt; .01</math>)</p> <p>-In comparison to non-psychopathic sex offenders, offenders with psychopathic traits had higher base rates of nonsexual recidivism including nonsexual violence (30 and 58%, respectively, <math>\chi^2[1] = 10.71, p &lt; .01</math>) and any nonsexual reconviction (51 and 78%, respectively, <math>\chi^2[1] = 9.24, p &lt; .01</math>)</p> <p>-The PCL-R also continued to significantly predict any new nonsexual violent conviction (<math>\beta = .28, p &lt; .01</math>), From the studied sample, 78% of offenders reoffended, (n=156 as authors did not report numbers of participants in the results)</p> <p>-Mixed offenders and rapists tended to score higher on the PCL-R (due to high scores on factor 2, Hare, 1991) than child molesters and incest offenders: total PCL-R score for rapists (n=76) was 37, mixed offenders (n=26) 42, child molesters (n=25) 4 and incest offenders (n=29) 17 (<math>p &lt; 0.05</math>)</p> <p>-Authors reported that sexual deviance provided a stronger link to sexual recidivism than did psychopathy.</p>	<p><u>Strengths:</u></p> <p>-The data collection and analysis was conducted by more than one person (very good inter-rater reliability <math>r=.81</math>)</p> <p>- Raters were blind to all recidivism information when they were collecting the collateral data</p> <p>-The study used standardized assessment tools (PCL-R and VRS-SO) allowing replication of the research</p> <p><u>Weaknesses:</u></p> <p>-Data collection involved only file reviews, or existing scores of previous PCL-R assessments (no interviews)</p> <p>-No randomisation or control group; all participants were involved in the Sex Offenders Treatment project, all could be described as a relatively high-risk group of sex offenders (offenders in denial, lower risk sex offenders, or non engaging individuals could change the outcome of this research)</p> <p>-Research took place in a high security hospital (research involved a very specific population therefore the outcome cannot be generalised on the population of sex offenders) - The research results were reported only in percentages what may lead to statistical and inferential misinterpretation (Leue e al., 2004).</p>

2.	<p><i>N</i>=68 adult sex offenders</p> <p><u>offences:</u> -Child molestation <i>N</i>=46 -Rape <i>N</i>=13 -Mixed offenders <i>N</i>=9</p>	<p>Beck Depression Inventory (BDI)</p> <p>Minnesota Multiphasic Personality Inventory (anxiety subscale) (MMPI)</p> <p>Millon Clinical Multiaxial Inventory(anxie ty subscale) (MCMI)</p> <p>PCL-R (mild traits – score between 20-24; moderate 25- 29; and severe 30+)</p> <p>Axis I and II interviews</p>	<p>Psycho- pathy</p> <p>Affective disorders</p>	<p>Explored the comorbidity of psychopathy and affective disorders</p>	<p>- Significant prevalence of depressive symptomology in the sample (especially in a group of sex offenders with high scores on Factor 2, PCL-R) -Authors reported these results only in percentages: over one-third of the sample (37%) scored between 0 and 19, indicating no significant psychopathic traits. Among the rest of the sample: 23.5% had mild traits, 19% moderate, and 20.5% scored 30+ (severe) -Among all psychopaths 42% had depressive features and 26% of the total psychopaths reported symptoms consistent with an anxiety disorder diagnosis -Rapists demonstrated the highest group percentage of psychopathy (85%), with 31% also reporting affective symptoms at a level of clinical interest. Among pedophiles, 59% were psychopaths and 46% evidenced symptoms of an affective disorder. Finally, among those who offended against both adults and children, 44% were psychopaths, and 33% endorsed significant mood disorder symptoms.</p>	<p><u>Strengths:</u> -Clearly stated hypothesis that derived from the literature review; <u>Weaknesses:</u> - As the tool was developed by researchers it might be open to bias (multiple Paraphilic Interests Scale), as test-retest reliability was very weak <math>r=.40</math>, moreover authors relied on self report measures (MCMI, MMPI, BPI)  -Lack of clear cut off for the PCL-R (authors introduced the classification of mild (score 20-24), moderate (25-29) and severe (30+) psychopathic traits, however when authors referred to the group as ‘psychopathic’ it is not clear whether they included individuals with moderate psychopathy traits. The authors followed Hare’s concept of psychopathy (1991) who introduced the cut off score of 30, or higher score on the PCL-R scale, but it was not clearly stated (some authors would include the score of 25 and higher, i.e., Olver &amp; Wong, 2006)  -The sample range of age was really wide from 23 to 78 which can introduce another factor (i.e., age) that could be related to the prevalence of the affective disorders  -No randomisation and no control group (very select group of individuals, with high risk of reoffending)  -Small sample size; with the group of child molesters much bigger than rapists (<math>n=46</math> and <math>n=13</math>) hence when authors reported findings in percentages it introduced further issues with interpretations of the results; numbers and percentages not reported clearly when presenting the general findings (e.g., when authors reported that rapists demonstrated the highest group percentage of psychopathy -85%, this finding has not been included in the tables, hence no number of psychopathic offenders who committed a rape has been provided)</p>
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3.	<p>N=55 adult male sex offenders</p> <p>(30 with paraphilia, 25 ICD)</p> <p>Offence type: sex offending</p>	<p>Mini-DIPS (German version of interview for DSM-IV)</p>	<p>Axis I and II disorders from DSM-IV</p>	<p>Explored the prevalence of DSM-IV (Axis I and II) disorders among sex offenders</p>	<p>-Authors reported high rates of lifetime axis II diagnosis in both subgroups of sex offenders with paraphilia and Impulse Control Disorder (ICD) – all ICD sex offenders (n=25) and 93% (n=28) with paraphilia met the Axis I, or Axis II diagnosis;</p> <p>- Out of all paraphiliacs 70% (n=21) and 48% (n=12) offenders with ICD also had at least one Axis I and one Axis II. Moreover, 93% (n=28 with paraphilia and n=23 ICD) of sex offenders suffered from at least 1 axis I, or II prior to the commitment of the sex offence. Authors reported that all offenders with diagnosed personality disorders have the disorder developed prior to the sex offending</p> <p>- Cluster B and C PD were also highly prevalent in the studied sample, as 47% (n=14) of the paraphilics and 40% (n=10) of ICD had a diagnosis of at least one cluster B PD, where n=12 (paraphiliacs) and n=5 (ICD) were diagnosed with Cluster C PD</p> <p>-Among Cluster B diagnosis: most common in the studied sample were antisocial (n=19), avoidant (n=13) and borderline (n=8).</p>	<p><u>Strengths:</u></p> <p>File information was used in order to prevent socially desirable responding and cognitive distortion</p> <p><u>Weaknesses:</u></p> <p>-The study excluded those individuals in denial, which could potentially influence the outcome; Participants were involved not only in psychological but medical intervention. The sample was small, no control group was introduced, and the sample was not randomised. Hence, it is difficult to state whether the outcomes could be applied to the general population</p> <p>-This was a replication of their previous study, which also could be open to bias (replication of the same limitations and assumptions could lead to type I error. i.e., the rejection of potentially true null hypothesis, Field, 2009)-The authors applied the German version of the ‘Structured Clinical Interview for DSM IV Axis II’ (the ‘Strukturierte Klinische Interview für DSM IV Achse II (SKID II). This tool has only a moderate inter-rater reliability (<math>\kappa=0.55</math>, Yule’s <math>Y=0.72-1.00</math>). Moreover, the researchers did not introduce an independent rater to verify PD or Axis I diagnoses (e.g. by a second clinician) and only one person was involved in this process</p> <p>-Small sample size</p> <p>-Research took place in a state forensic hospital, therefore the prevalence of mental disorder could be higher than in the general population</p>
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4.	<p><i>N=113</i> male adult sex offenders</p> <p><u>offences:</u> Sex offending</p>	<p>Structured interview for DSM-IV (Axis I and II)</p>	<p>Mental disorders (DSM-IV) Axis I and II</p>	<p>Explored the prevalence of personality disorders among sexual offenders</p>	<p>-In the studies sample there was a very high rates of Personality Disorders(PD) - Axis II diagnoses (n=98 (87%) sex offenders met the criteria for at least one diagnosis of PD, n=32 (28%) who met 3 or more</p> <p>-The most common diagnosis within the studied sample was Cluster B: antisocial n=63 (56%), borderline (28%),narcissistic 28 (25%)</p> <p>-Significantly higher rates of avoidant PD among sex offenders with paraphilias (p=.013)</p>	<p><u>Strengths:</u></p> <p>-The assessment has been conducted by two professionals (excellent levels of inter-rater reliability Kappa=0.85)</p> <p><u>Weaknesses:</u></p> <p>-In order to avoid socially desirable responses research involved file information, however this is also open to bias (missing information, subjectivity of the assessments of paraphilia, lack of the current assessment, etc.)</p> <p>-Due to small sample size analysis of certain relationships between variables were impossible, small statistical power</p> <p>-The authors did not explain the exclusion criteria (the research looked into Axis I diagnosis, not clear why but patients who had history of psychosis were excluded)</p> <p>-No randomisation of the sample, or control group, as all participants took part in a sex offender programme and volunteered to participate in the research, (according to the exclusion criteria only these individuals who did admit that they, in fact committed the offence took part in the study)</p> <p>-Small sample size</p> <p>-Diagnoses were evaluated by un-blinded investigators</p> <p>-Researchers acknowledged that participants' frequent denial and distortion of deviant sexual fantasies, sexual behaviour criminal behaviour limitation</p>
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5.

*N*=40  
sex offenders  
in forensic  
hospitals  
(FSO)

*N*=30  
sex offenders  
from prison  
(PSO)

*N*=26  
violent  
offenders from  
prison  
(PVO)

offences:

-Sex offending

-Violent  
offending

SCID for Axis  
I and II  
diagnosis

Semi structured  
interview

developed by  
authors  
(paraphilic  
interests)

Global

Assessment of  
Functioning

Scale

BSS scale

Axis I and  
II  
diagnosis

Explored the  
prevalence of  
mental  
disorder in  
forensic  
hospital and  
prison

Personality disordered the most prevalent in  
SF (sex offenders in forensic hospitals)  
population: PD 85 % - significantly higher  
than in the group of sex offenders in prisons  
(27%) – at least 1PD, and within violent  
offenders in prison 39%,  
With the most common diagnosis from  
cluster B (i.e., Antisocial)  
FSO (*n*=40) cluster B 24 (60%): 20(50%)  
antisocial, 5(12.5) BPD, 5 (12.5),  
narcissistic; cluster A: 5(12.5%) paranoid 5,  
cluster C 8 (20%): 8(20%) avoidant,  
1(2.5%) dependant , NOS 2(5%)  
PSO (*n*=30) cluster a 1 (3.3%) paranoid 1  
(3.5%), cluster b 6 (20%): 5(16.7%) aspd,  
2(6.7, n.o.s. (i.e. Not Otherwise Specified)  
1(3.3%)

PVO (*n*=26) cluster A 3 (11.5) paranoid 1  
(3.9%), schizoid 2 (7.7%), schizotypal 1  
(3.9), cluster B 8 (30.8%): 8 (30.8%)  
antisocial,

-Comorbidity more FSO than PSO  
(*h*=23.25, *df*= 1, *p*=.0001) and VO  
(*H*=13.77, *df*=1, *p*=.0001)

Strengths:

-No control group but comparison groups sexual and  
violent offenders from the prison were recruited

-Authors attempted to employ stratified randomisation (by  
offence type, and institution) to the selection process

Weaknesses:

-Not very clear presentation of the results (sometimes  
reporting the results only as 'higher' and 'lower' scores)

-File reviews and interviews were conducted by one person  
(first author), which affects the reliability (i.e., no inter-rater  
reliability assessment)

-The use of the tool developed by authors (SCID II to  
assess DSM-IV axis II)

6.	<p><i>N=50</i> rapists</p> <p><i>N=50</i> murderers</p> <p><u>offences:</u> -Rape -Homicide</p>	<p>Clinical assessment in Neuro-psychiatry with interview based on DSM-IV</p> <p>Structured Personality Disorder Interview based on DSM-III-R</p> <p>Mini Mental Status Examination Non verbal intelligence Test</p>	<p>PD</p> <p>Explored the prevalence of personality disorders among rapists and murderers in prison</p>	<p>-The high prevalence in both groups of antisocial personality disorder - Additionally, 96% of murderers and 84% of rapists were diagnosed with Antisocial Personality Disorders</p> <p>-Results of SIDP-R showed a high frequency of both antisocial and sadistic types of personality (96% and 86%, respectively, in the murderer group, and 92% and 74%, respectively, in the rapist group)</p> <p>The most common Personality Disorder diagnosis was classified as Cluster B and C:</p> <p>-Antisocial murderers n= 48 96.0% rapists n= 46 92.0 %</p> <p>-Borderline murderers n=4 8.0% rapists n= 1 2.0%</p> <p>-Dependent murderers n=12 24.0% rapists n=0</p> <p>-Schizoid murderers n=7 14.0% rapists n= 5 10.0%</p> <p>-Avoidant murderers n=11 22.0% rapists n= 3 16.0 %</p> <p>-Histrionic murderers n=15 30.0% rapists n=0</p> <p>-Narcissistic murderers n=4 8.0% rapists n=0</p> <p>-Paranoid murderers n=13 26.0% rapists n= 5 10.0%</p>	<p><u>Strengths:</u></p> <p>-Trained and experienced psychiatrist conducted open and semi-structured interviews</p> <p><u>Weaknesses:</u></p> <p>-The participants constituted only 9% of sex offenders in prisons and 4% of violent prisoners of the general prison population; all participants were recruited from the Maximum Security prison in Brazil</p> <p>-The inclusion criteria (i.e., individuals who either committed murders, or individuals who only committed a rape) resulted in exclusion of these individuals who were involved in both types of offending (or other types of sex offending). That not only means that the results could change due to inclusion of these individuals, but also there is a potential risk of including participants who did not disclosed their full forensic history (e.g., a murderer who committed a sexual crime but has never been convicted of it)</p> <p>-The assessment tool used by the researchers is the only scale validated for the Brazilian population. This scale is based on DSM-III-R</p> <p>-Only one rater collected the data (no inter-rater reliability assessment), moreover, relying on the self reports SIDP-R (Structured Interview for Personality Disorders by DSM-III-R)</p>
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7.	<p><i>N</i>=211 adult male sex offenders</p> <p><i>N</i>=99 non sex offenders</p> <p><u>offences:</u> -Rapists</p> <p>-Child molesters (victims under the age 14)</p> <p>-Non-sexual offenders</p>	<p>PCL-R (cut off – 30)</p>	<p>Psycho- pathy</p>	<p>Explored the relationship between the PCL-R scores, offending type, the criminal history, chance for conditional release, recidivism</p>	<p><i>PCL-R scores and the offence type:</i> out of <i>N</i>=99 rapists <i>n</i>=36 met the criteria for psychopathy, out of <i>N</i>= 88 child molesters <i>n</i>=7, out of <i>N</i>=24 mixed rapist/molesters <i>n</i>=15 met the criteria , and out of <i>N</i>=99 non-sex offenders <i>n</i>=32</p> <p>- Total PCL-R scores differed significantly between groups: rapists (<i>M</i>=26.06,<i>SD</i> = 5.79), mixed rapist/molesters (<i>M</i>=28:95, <i>SD</i> =6.62), and non-sex offenders (<i>M</i>=25:67, <i>SD</i>=6.98) all had higher total scores than child molesters (<i>M</i>=21.10, <i>SD</i>=6.37; <i>p</i>&lt;.05)</p> <p>- On Factor 2, rapists (<i>M</i>=12.01, <i>SD</i>=3.28), mixed rapist/molesters (<i>M</i>=12.19, <i>SD</i>=3.00), and non-sex offenders (<i>M</i>=12.42,<i>SD</i>=3.7) all scored significantly higher than child molesters (<i>M</i>=7.96, <i>SD</i>=4.23)</p> <p>The offenders diagnosed with psychopathy (<i>M</i>=7.29, <i>SD</i>=9.90) committed significantly more violent offences than low psychopathy offenders (<i>M</i>=4.47, <i>SD</i>=5.62); offenders without a diagnosis of psychopathy (<i>M</i>=728.53, <i>SD</i>=897.93) spent, on average, more (approximately twice as many) successful days on release than those diagnosed with psychopathy (<i>M</i>=387.85, <i>SD</i>=403.14)</p>	<p><u>Strengths:</u></p> <p>-Clear link between the hypothesis and the theory (clearly explained inclusion and exclusion criteria, as well as the methodology of the study)</p> <p>-Authors acknowledged different approaches to the concept of psychopathy (psychopathy as a discrete, or a continuous variable), but accepted the cut off of 30 for the PCL-R for the diagnostic purposed according to Hare classification (1991);</p> <p>- Relatively big sample</p> <p>-Researchers introduced the control group of non sexual offenders</p> <p><u>Weaknesses:</u></p> <p>-All participants were recruited from a Medium Secure prison</p> <p>-PCL-R scores (total and factor scores) were obtained from each offender's institutional psychology file (item scores were not available). Hence, no reliability of these scores were assessed</p>
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## **Data synthesis**

### **Brief Overview of the Findings**

The search ended with 7 studies that were included in this review. Two of these studies were conducted in Germany, two in Canada, two in the United States and one study was conducted in Brazil. The majority of the research took place in prisons (medium and maximum security) and forensic hospitals. However, two took place in Residential Treatment Facilities and State-Operated Treatment facilities. Five reviews investigated the prevalence of specific disorders (Axis II personality disorders, psychopathy, and affective disorders) in the population of sex offenders. Two focused on the relationship between psychopathy and the criminal behaviour, two investigated the relationship between other mental disorders and sex offending. Those studies used a wide spectrum of instruments (among them three studies used PCL-R, one used the Positive and Negative Scale (PANSS), one The Clinical Global Impression Scale CGI-S and CGI-I, 1 SCD I and II for Axis I and II, questionnaires developed by authors, one Global Assessment of Functioning Scale, one BSS scale, one Clinical assessment in neuropsychiatry interview schedules, one structured interview for PD, one Mini Mental Status Examination, one non Verbal Intelligence test, two Mini-DIPS German and 1 DSM-IV Axis I and II version, one Beck Depression Inventory, one Minnesota Multiphasic Personality Inventory, one Social Interaction Anxiety Scale, one Social Phobia Scale, one Violence Risk Scale, one MDS, and one MTC:R3). Moreover, few studies used tools used only in their country (e.g., Germany: the effect of MD, or Brazil: the DSM-III).

### **Difficulties Related to the Data Synthesis.**

The studies were conducted in four different countries, which resulted in them following different standards and definitions, using specific methods and categorising mental disorder and sex offending in various manners. For example, when investigating different types of sexual offending, child molestation was classified in various ways. Some studies proposed the victim's age to be 13 (according to the DSM-IV's criteria for paedophilia), or 14 years (e.g., some states in the USA), these criteria are different from accepted by, for example British legal system (16 years (Birckhead, 2011; Thomson, 2004; Wellings & Parker, 2006)). This means that sex offenders who offended against 14 year old victims could be categorised as child molesters in one country, and as adult sex offenders in other countries.

Another difficulty of a similar nature related to the definition of psychopathy. Three out of seven identified studies focused on the concept of psychopathy (Olver & Wong, 2009; Porter et al., 2009; Stinson et al., 2005). Generally, psychopathy has been understood according to the definition introduced by Robert Hare (1991). However, when using the PCL-R tool some authors adapted the cut off score of 25 (i.e., an individual with a score higher than 25 meets the criteria for psychopathy) (Olver & Wong, 2006) and another, 30 (Porter et al., 2009). Stinson and his colleagues employed different approach and instead of dichotomous classification (i.e., an offender either meets the criteria for psychopathy, or not), they instead introduced classification that highlighted the a continuous nature of this variable where scores between 20 and 24 indicate mild psychopathic traits, individual with moderate traits would receive scores between 25 and 29, and individuals with severe psychopathic traits would score 30 and more on the PCL-R (2005).

The differences of inclusion and exclusion criteria for these studies resulted in either rejecting or including individuals in denial, a history of psychosis, and in some cases, paedophilia was perceived from a legal perspective, whilst in others as a mental disorder.

Due to the methodology of some studies, for example the use of a test only available in one language (Beeintreachtigungs-Schwere-Score available only in German) (Harsch et al., 2005), tests based on DSM-III rather than DSM-IV (Rigonatti et al., 2006) and instruments developed by the authors themselves (Harsch et al., 2005), the comparison and synthesis of the outcomes needed to be done very carefully. The studies, identified above, were not free from bias and limitations. The sample was often small (especially, when it was broken down into specific categories), which made it hard to apply any findings to a bigger population. All participants were incarcerated which could influence the outcome of some diagnostic tests (e.g., assessments of mood disorders). It also led to conducting all studies on a non randomised sample. Most of the studies lacked a control group, and most of them based their diagnosis of disorders purely on file information which could contain incomplete data. Some also had a weak-test retest reliability, inter-rater reliability, or their findings were not statistically significant (Hoyer et al., 2001; Leue et al., 2004; Olver & Wong, 2006; Stinson et al., 2005;). The number of participants in the studied samples ranged from 55 to 310.

## **Discussion**

Despite the numerous differences amongst the explored research questions, it was possible to identify themes that focussed on similar aspects related to the population of

mentally disordered sex offenders. It seems that a number of studies identified and highlighted the diversity which characterises sex offenders diagnosed with mental disorders. These mentally disordered sex offenders were also likely to be involved in non sexual offending (e.g., child offenders and rapists who are more likely to engage in other violent crimes), as well as various types of sex offending (e.g., child molesters who would engage in intra and extra familial sex offences) (Olver & Wong, 2006; Porter et al., 2009; Stinson et al., 2005). The review identified four areas that were explored by researchers: the prevalence of mental disorders (Axis II personality disorders) and psychopathy in the population of sex offenders, comorbidity of various mental disorders in the population of sex offenders, the potential relationship between a mental disorder diagnosis and offending behaviour (i.e. the type of offending), and the mental disorders and psychopathy and recidivism.

### **Prevalence of Personality Disorders and Psychopathy in the Population of Sex Offenders**

Research papers identified by this review reported a relatively high prevalence of psychopathic traits in the studied population of sex offenders (Olver & Wong, 2006; Porter et al., 2009; Stinson et al., 2005). In the general population, the prevalence of psychopathy was found to be around 6% (Coid, Yang, Roberts, & Hare, 2009), and it has been suggested that in the general forensic population the base rate for psychopathy is between 15% to 25% (Abracen, Looman, & Langton, 2008). In two studies (Porter et al., 2009; and Stinson et al., 2005) authors reported that a third of their studied sample met the criteria for psychopathy. However, it is important to stress that in the study

conducted by Porter and his colleagues (2009) only individuals who scored at least 30 on the PCL-R were classed as psychopaths, whereas Stinson et al. (2005) also included individuals with scores between 25 and 29. Hence, in effect, individuals with the score 30 and above constituted a smaller part of their studied sample. Olver and Wong (2006), on the other hand, reported that out of 159 participants 29 met the criteria for psychopathy which would suggest slightly lower percentage of the studied sample than the two previously listed studies (18.6%). Nevertheless, the indications that there is a high prevalence of psychopathic traits among sex offenders should be considered in clinical practice (e.g., in relation to risk assessments and treatment programs, etc.), and emphasis on the use of PCL-R tool should be encouraged in order to provide the most appropriate treatment and prevention plans.

More studies introduced by this review focused on the prevalence of personality disorders in their studied groups of sex offenders. The results appeared to be consistent when reporting a very high percentage of sex offenders diagnosed with at least one Axis II personality disorder (Dunsieth et al., 2004; Harsch et al., 2005; Stinson et al., 2005).

Moreover, the cluster B personality disorders (i.e., the ‘dramatic’ cluster that includes the diagnosis of antisocial (ASPD), histrionic (HPD), narcissistic (NPD) and borderline (BPD) personality disorders, (Torgersen, Czajkowski, Jacobson, Reichborn-Kjennerud, Røysamb, Neale, & Kendler, 2008) was identified as the most frequently diagnosed disorder among the group of incarcerated sex offenders, followed by borderline and narcissistic PD (Dunsieth et al., 2004; Rigonatti et al., 2006; Stinson et al., 2005). Whereas cluster A (i.e., ‘odd, eccentric’ cluster) and C (i.e., ‘anxious’), for example avoidant, dependant, or paranoid personality disorders were less common (Harsch et al., 2005).



Generally, the high prevalence of disorders from both Axis I and Axis II was reported amongst the studied sex offenders' group. However, given that majority of studies were conducted in a Forensic Hospital, it is possible to assume that the prevalence of mental disorders would be higher than in the general population of sex offenders (Leue et al., 2004; Stinson et al., 2005). When, for example Rigonatti and his colleagues (2006) compared the groups of sex offenders that were placed in prison with the group from forensic hospitals, the prevalence of personality disorder diagnoses was much higher in the group of patients from forensic hospitals (85% of sex offenders in hospital and 27% in prison).

### **Comorbidity of Mental Disorders**

The overview of the prevalence of psychiatric disorders among of sex offenders also highlighted the comorbidity of various disorders within this population. The most commonly reported co-occurrence in the above studies related to the diagnosis of personality disorders, as a large part of the studied samples were diagnosed with more than one type (Dunsieth et al., 2004; Rigonatti et al., 2006; Stinson et al., 2005).

Interestingly, Stinson et al. (2005) suggested high comorbidity of affective disorders and psychopathic traits among their sample of sex offenders. According to their findings, in the studied sample, almost a third of sex offenders were characterised by psychopathic traits experienced symptoms of affective disorders (e.g., depression, anxiety). Therefore, they suggested that affective disorders should be identified as one of the potential treatment needs for psychopathic sex offenders. Furthermore, authors emphasised the possible explanation for the inability to regulate negative emotions,

poor impulse control and reckless behaviour among psychopathic individuals that could potentially lead towards offending behaviour (Stinson, et al., 2005).

Leue et al., (2004) also reported comorbidity of mental disorders in their population of sex offenders. Apart from the prevalence of Axis II diagnosis, they investigated the co-occurrence of paraphilic disorders, anxiety disorders and social phobia. Paraphilic interests (i.e., Axis I disorder) that are found to often co-occur with personality disorders are often associated with sex offending behaviour (Dunsieth et al., 2004). The sex offenders with paraphilic interests appeared to have a tendency for mood, anxiety disorders and social phobia (Leue et al., 2004). Mental disorders high comorbidity identified in studies (mood disorders, anxiety and impulse control disorders, paraphilias, etc.) was usually higher in a population of sex offenders detained in forensic hospitals. As previously stated, this suggests that this population possibly does not reflect the actual level of comorbidity (and the prevalence of mental disorder) in the general population of sex offenders (Dunsieth et al., 2004; Harsch et al., 2005) as it would be expected that those in hospital would have higher levels of mental health problems.

### **Relationship between Psychopathy and an Offence Type**

The systematic evaluation of previously introduced papers emphasised the differences in symptomology between various types of offenders. Whereas there was no consistency among the studies in relation to personality disorders, the association between PCL-R scores and the offence type seemed to suggest that the group of rapists and mixed offenders tend to have more psychopathic traits than child molesters (Olver & Wong, 2006; Stinson et al., 2005). What was interesting, amongst the child molesters

subgroup, individuals who had higher PCL-R scores tended to have more convictions for more sexual offences than molesters with lower PCL-R scores (Porter et al., 2009).

It also has been suggested that the differences between the offence type and mental disorder was reported in relation to affective symptoms, for example the group of child molesters were more often diagnosed with affective disorders than the subgroup of rapists, or mixed offenders (Stinson et al., 2005). These findings are original, interesting and could contribute towards better understanding of the complex processes involved in sex offending behaviour. However, further research is needed that would revisit these findings in a more general population of sex offenders and verify whether similar relationships between the mental disorder and offending type exist, or are in fact as a result of 'nonrandomised' sample and very specific environment (i.e. forensic hospitals).

### **Recidivism among Mentally Disordered Offenders**

Unfortunately, the only aspect of the findings of this review that could be discussed in the context of behavioural persistence was focused on the issue of recidivism. A number of studies explored the concept of psychopathy and its relationship with sexual re-offending. It was highlighted that individuals with high PCL-R scores tended to have an extensive criminal history which involved more violent crimes and started early in life (Olver & Wong, 2006). Psychopathy was also associated with a higher risk of non sexual recidivism (Stinson et al., 2005). It has been observed that psychopathic participants started their criminal career earlier than non-psychopathic participants, and they were involved in more serious non sexual offending behaviour. However, this group was also observed to have higher rates of non-sexual reoffending

(78% of the sample, lack of actual number) (Olver & Wong, 2006; Stinson et al., 2005). Although psychopathic child molesters had a tendency to commit a higher number of sexual offences, it was suggested by these authors that psychopathy could only be treated as a strong predictor of non sexual recidivism. While psychopathic offenders are more likely to have diverse victim types, psychopathic molesters engage in a particularly high rate of sexual offending, suggesting that risk assessment tools should be tailored to specific offender groups instead of 'violent' or 'sexual' offenders (Porter et al., 2009). Therefore this could suggest that among serial, more prolific sex offenders the prevalence of sexual deviance (i.e. paraphilic interests) would be much higher than the prevalence of psychopathy.

## **Summary**

Based on the review's findings, little can be concluded about the motivation and the behaviour at the crime scene of mentally disordered sex offenders. Some studies introduced a 'mixed offender' type suggesting that these offenders would have potentially different motives, variable modus operandi, offence planning, the victims' choice, etc. (Olver & Wong, 2006; Stinson et al., 2005). Therefore, this also suggests that these mentally disordered sex offenders were likely to display different behaviours at the crime scene across their series of crimes.

This review highlighted this gap in knowledge and the need for further research. Indeed, few studies indicated how a mental disorder could impact on offending behaviour. Rigonatti et al. (2006) reported that most of the mentally disordered rapists offended against victims they were not related to, fewer offended against a victim they

knew, but only a fraction offended against their relatives. Although these studies suggested some level of stability in offending behaviour, they were not consistent with other findings that suggested diversity in the choice of victims and behavioural change (Bennell et al., 2009; Grubin et al., 2001; Santtila et al., 2005; Woodhams & Labuschagne, 2011). Authors reported that all offenders with diagnosed personality disorders have the disorder developed prior to their sex offending;

The review also highlighted the issues related to recidivism amongst mentally disordered sex offenders. The findings were consistent with current literature that links psychopathy with a higher risk of non-sexual recidivism (Olver & Wong, 2006; Porter et al., 2009). Higher rates of recidivism were also reported amongst sex offenders with paraphilia (Hoyer et al., 2001). Interestingly while psychopathy has been associated with higher risk of future nonsexual offending and not linked with sexual recidivism, Porter et al. reported that child molesters with high PCL-R scores were convicted for more sexual offences than molesters with lower PCL-R scores (2009).

A high prevalence of substance misuse amongst mentally disordered sex offenders and a possible role of the substance misuse in offending behaviour have been suggested (Harsch et al., 2005; Leue et al., 2004; Rigonatti et al., 2006). Although, this was not closely investigated, it seems that psychoactive substances played a crucial role in increasing the risk of offending, as these offenders were often committing their crimes under the influence of these substances (Rigonatti et al., 2006).

These findings further highlight the complexity of the group of sex offenders and their treatment needs. They also suggest numerous factors that could potentially influence their offending behaviour, and impact on the progress in their treatment. Therefore, the careful evaluation of their mental state, as well as the relationship

between symptoms of various disorders and their problematic behaviour, should be carefully examined before choosing the most appropriate treatment approach.

Unfortunately, the review focused on a very small number of studies. Therefore, the findings of this review cannot be generalised in a way that could reflect the complex population of mentally disordered sex offenders. The systematic search reflected the state of the current knowledge about mentally ill sex offenders, and it seems that little is known about this area. The small amount of research that explored the offending behaviour of mentally disordered sex offenders might be a consequence of the generally accepted assumption that mentally ill individuals rarely commit sex offences (Seinfert et al., 2002). Moreover, that they are more unpredictable and disorganised (Kocsis et al., 2002). However, what has been found amongst published studies does indicate that the prevalence of mental disorders among sexual offenders is very high and worthy of closer attention.

### **Recommendation for further research**

More research is needed that would further investigate the relationship between mental disorders and sex offending. There are great number of studies and literature focusing on the treatment and risk assessments of mentally disorder sex offenders. However, only few empirical studies investigated this population (i.e., prevalence of mental disorders among sex offenders, comorbidity of disorders, the relationship between the symptoms and offending behaviour or consistency and change of behaviour at the crime scene). This knowledge would improve our understanding of this population and support the planning of appropriate treatment programmes, prevention

plans, and risk assessments. Moreover, it would improve our understanding of motives and etiology of the sex offending, help to identify behavioural patterns (and behavioural change), as well as the extent to which symptoms can influence modus operandi. Therefore, the recommendations could include several suggestions from the generic to more specific, focused on narrowed concepts. Further research focusing on the population of psychotic/schizophrenic sex offenders would be beneficial, as the majority of researchers tended to exclude them from their studies.

It was suggested that sex offenders with paraphilic interests were more likely to re-offend; they offended against more victims, and initiated their offending behaviour earlier in life. Therefore, the further investigation of the role of paraphilias in sex offending behaviour is needed, as the available findings are not conclusive. This knowledge could potentially improve the understanding of the risk posed by offenders with paraphilias, as well as explore their behaviours at the crime scene which could also improve their treatment.

Further explanation of the relationship between psychopathy and mental disorders could enhance our insight into how these disorders can possibly influence offending behaviour and the future risk of recidivism (sexual and non sexual).

It seems that advanced exploration of the diversity within the population of child molesters could also explain the level of their behavioural consistency and change and the motivation for offending (for example mix offenders), which could improve the assessment of their risk, potentially identify factors that could reduce the rates of recidivism, as well as improve the investigative processes of the police. It also seems that the relationship between psychopathy and paedophilia needs to be explored, as the

higher PCL-R scores among these sex offenders seemed to be associated with a higher risk of sexual recidivism.

There is no research that investigates the modus operandi of mentally disordered sex offenders and the consistency, or lack of behavioural consistency, across a series of crimes committed by the same offender. Moreover, there is no research that would explore the distinctiveness of an offender's modus operandi. The exploration of these aspects could not only improve work of the police but provide better explanation of offending cycle's maintaining factors, activating circumstances, as well as protective factors. These suggestions are not conclusive and only focus on the main themes identified by the review and related to the thesis objective.

## **Conclusion**

Unfortunately, the review focused on a very small number of studies. Therefore, the findings of this review cannot be generalised in a way that could reflect the complex population of mentally disordered sex offenders. The systematic search reflected the state of a current knowledge about mentally ill sex offenders, and it seems that little is known about this area. The small amount of research that explored the offending behaviour of mentally disordered sex offenders might be a consequence of the generally accepted assumption that mentally ill individuals rarely commit sex offences (Seinfert et al., 2002). Moreover, they could reflect the position that they are more unpredictable and disorganised (Kocsis et al., 2002). However what has been found amongst published studies does indicate that the prevalence of mental disorders among sexual offenders is very high.



The current chapter explored the literature around the population of mentally disordered sex offenders. In particular, the review identified many gaps in the current understanding of this complex population of sex offenders. The findings need to be supported by further investigation of these areas.

The subsequent chapter is the empirical research study. The study attempted to expand on the literature found in this review by exploring the offending behaviour of mentally disordered serial sex offenders in order to investigate the factors that could potentially influence their behaviour and furthermore by analysing whether these are responsible for behavioural stability or change. This could potentially give a better understanding of mentally disordered serial sex offenders' behaviour at crime scenes.

## **Chapter 3**

### **Empirical Research Study**

**Questioning the behavioural consistency and change of mentally disordered serial sex offenders. The exploration of the nature of factors that influence sex offenders' modus operandi.**

## **Abstract**

The stability and change of human behaviour in the context of crime linking of offending behaviour has been widely researched. Although it has been evidenced that sex offenders show a good level of consistency in their Modus Operandi across a series of crimes (Bennell & Jones, 2005; Woodhams, Hollin, & Bull, 2007b; Woodhams & Labuschagne, 2011), questions regarding the factors that could contribute towards this stability or change remain unanswered. Better insight into the relationship between various factors and the offending behaviour of serial sex offenders would not only improve investigative processes (e.g., crime linkage), but potentially improve the risk management and treatment approaches appropriate for this subgroup of offenders who often present with complex and enduring problems. This study's aim was to gain insight into why serial sex offenders might maintain certain behaviours over time or why they might change the way they commit their offences. All participants that took part in this study met the criteria for personality disorder diagnosis (APA, 2004). Semi-structured interviews were conducted with four participants that met the inclusion criteria for the study. The data collection and analysis followed existing guidelines for template analysis (King, 2010). Questions asked covered different aspects that were identified by previous studies as playing an important role in sexual offending (i.e., sexual fantasies, attitudes, psychological and emotional state, etc.) (Andrews & Bonta, 2006; Bulten, Nijman, & Staak, 2009; Cortoni, 2009; Ward & Beech, 2006) and focused on the most significant event characteristics and circumstances that were associated with sexual offending before, during and after each of the offences. The results identified a number of labels that fell under two higher order themes (i.e., situational and personal factors). The relationship between them is discussed and a model of behavioural consistency/variability is proposed.

## **Introduction**

The behaviour of sex offenders has been studied extensively in recent years (Bennell & Jones, 2005; Siegert & Ward, 2003; Ward & Beech, 2006; Woodhams & Labuschagne, 2011). The purpose of researchers investigating the nature of these crimes has been to gain a better understanding of this population in order to develop appropriate treatment, risk assessment and management plans that could protect the public, as well as promote recovery and improve the quality of offenders' lives (Ward, Collie, & Bourke, 2009). Although the body of evidence regarding the offending behaviour of serial sex offenders is steadily growing, there are many areas related to this issue that remain unclear, or unknown. The literature emphasises that since serial sex offenders are responsible for more crimes than one-off offenders, it is important to learn more about this subgroup of offenders (Grubin, Kelly, & Brunsdon, 2001).

### **The Stability and Change of the Offending Behaviour across a Series**

In order to explore factors that could potentially influence offending behaviour, it is important to establish what is known about its stability or change across a series. Research on developing investigative techniques, such as crime linkage, have contributed towards a great body of empirical evidence that has enhanced our understanding of serial offenders and their behaviour at the crime scene (Bennell & Jones, 2005; Woodhams et al., 2007b). This process of linking crimes uses police records to look for behavioural similarities that would suggest two or more crimes were committed by the same offender. The main assumptions of crime linkage are related to

offenders' behavioural consistency across the series, and a relatively distinctive manner in the way they commit their crimes (Bennell & Canter, 2002; Woodhams et al., 2007b). Various studies have attempted to confirm these main assumptions of crime linkage analysis. The general consensus from these works is that serial sex offenders show both stability and change in their behaviour across the length of a series (Bennell, Jones, & Melnyk, 2009; Grubin et al., 2001; Santtila, Junkkila, & Sandnabba, 2005; Woodhams & Labuschagne, 2011).

## **Behavioural Stability of Serial Sex Offenders**

The principles underpinning crime linkage have been tested on various samples of serial sex offenders. This has included examining the level of consistency of behaviour displayed at the crime scene overall (Bennell & Jones, 2005; Woodhams & Labuschagne, 2011), or of different behavioural domain types, for example control, escape, or hunting behaviours (Beauregard, Proulx, Rossmo, Leclerc, & Allaire, 2007; Grubin et al., 2001; Woodhams, 2008). Overall, the results of these studies suggest a significant degree of behavioural stability across offences, at least for some offenders.

However, it is crucial to acknowledge that alongside aspects of offending behaviour that were found to be relatively stable (e.g., escape and control behaviours), there are a number of features that tend to change with time. For example, the experience gained during an offence can influence the development of new, potentially more effective methods (Davies, 1992; Duff & Kinderman, 2008; Soroichinski & Salfati, 2010). Moreover, it has been suggested that with time offenders can become more confident (e.g., as a result of being successful in their offending) which can be

reflected in the escalation of violent sexual fantasies that could, in turn, affect their crime scene behaviour (Gee & Belofastov, 2007). Furthermore, Grubin et al. (2001) suggested that with time the offender may change his goals for offending behaviour. This could occur, for example, as a result of his continuously adapting sexual fantasies involving new, more sexually satisfying themes. These fantasies could influence planning of his future offences and modify his previous motives (e.g., introduction of more sadistic elements). It has been found that the escalation of violence is common in the content of sexual fantasy of sex offenders (Gee, Ward, Eccleston, 2003; Soroichinski & Salfati, 2010). The current understanding of the behaviour of serial sex offenders emphasises its consistency, as well as change (Bennell et al., 2009; Woodhams & Labuschagne, 2011).

However, there is a need for more research that would focus on the factors that contribute towards behavioural consistency or change, the manner in which they are influencing offending behaviour, as well as the relationship between these factors. It is also important to acknowledge the limitations of the existing literature on behavioural stability and change of serial sex offenders. The crime linkage research relies on police data for reasons of ecological validity (Woodhams, Bull, & Hollin, 2007a). However, this precludes any understanding of the consistency in some behaviours and not others, or understanding why some offenders are more consistent than others (Woodhams & Toye, 2007). The police records do not necessarily reflect an accurate account of the event. They often rely on incomplete description of the offender's actions (e.g., missing elements of verbal behaviour), relying on retrospective victim's memory, or witness' recollection that could exclude certain aspects of a crime. These accounts may miss important information due to subjective (i.e., false) perception of the event, selective

memory, highly emotive state induced by the traumatic experience, or witness' individual characteristics (Davies & Loftus, 2007; Pozzulo, Coplan, & Wilson, 2005). Furthermore, detailed disclosure of experience of sexual assault is very difficult for the victim and has potentially detrimental psychological consequences. Hence, the victim may withhold some information related to the offence (Ahrens, 2006). Moreover, the person providing the information about the offence could be simply not fully aware of offender's behaviours (e.g., victim was blindfolded, etc.). Some aspects of the behaviour also may be omitted by the person who took victim's statements, or these could be influenced by post-event suggestions that followed the crime, for example co-witness account, method of questioning by the police, or selective method of recording the police data (Alison, Snook, & Strein, 2001; Pezdek, Sperry, & Owens, 2007; Woodhams 2007a). Although on rare occasions investigators have access to a primary record of an offense (e.g., a closed circuit television recording), these also fail to record all aspects of offender's behaviour (i.e., offender's verbal communication with the victim) (Santtila et al., 2005). Additional limitations of existing research on behavioural consistency of sex offenders are related to the samples used. Most of the studies exploring behavioural consistency and variability of sex offenders focus on small number of participants (Santtila et al., 2005; Sorochinski & Salfati, 2010; Woodhams & Labuschagne, 2011). Furthermore, as previously stated the material accessed by the researchers consisted of police data which was not collected for the research purposes and therefore its quality is inconsistent (Santilla et al., 2005). It is also important to highlight that these study samples consisted mainly of solved cases. It has been suggested that these cases might have been solved due to offender's behavioural consistency. Therefore it is difficult to generalise these findings on the general

population of unsolved serial sexual offenders, as there is a possibility that these remained unsolved due to their greater inconsistency (Beauregard, Rebocho, & Rossmo, 2010; Bennell & Canter, 2002; Woodhams, Bull, & Hollin, 2007a).

## **Identifying Influential Factors Related to Offending Behaviour**

The current theories and models of sex offending have identified numerous external and internal factors that can play a crucial role in offending behaviour. Internal characteristics, such as offence-supporting attitudes, are often identified as factors associated with a higher risk of re-offending (Ward & Beech, 2006). Therefore, they are discussed in the context of offender's treatment needs and reduction of his future recidivism (Andrews & Bonta, 2006). The empirical evidence suggests that by altering these factors it is possible to reduce the risk of reoffending (Craig, Browne, & Beech, 2008), therefore this implies that these factors could affect behavioural consistency and change (Bulten et al., 2009; Polaschek, 2012). Although dynamic risk factors linked with sexual interest (and sexual fantasy), self-regulation, socio-affective functioning or criminogenic attitudes have been widely studied by numerous researchers (Andrews & Bonta, 2006; Bulten et al., 2009; Cortoni, 2009; Craig et al., 2008; Ward & Beech, 2006) it is not known to what extent, and in what way, they would influence behaviour at the crime scene.

When discussing processes and factors influencing crime scene behaviour, it is important to acknowledge the role of external elements encountered by the offender, such as the environment or victim (Davies, 1992). The victim's behaviour as well as offender's perception of his victim can influence an individual's actions and future planning, lead to modification of his original aims, and impact on his decision making



processes. It has been suggested that the offender would treat his victims in a way that would reflect his attitudes towards their individual characteristic (e.g., social status, attractiveness, age). Therefore, his behaviour would change depending on his victim's individual differences or victim's reaction (Campbell, 2009; Davies, 1992). These factors can equally lead to reinforcement of previously displayed behaviours, for example due to their high desirability (Lundrigan, Szarnomski, & Wilson, 2010).

Hazelwood and Warren (2004) suggested that a sense of familiarity related to either a location, or a type of victim, allows offenders to focus less on external factors and their attempts to control them, and more on other aspects of the crime, such as engaging in desirable sexual behaviours during the offence. The sense of situational familiarity could potentially increase the level of stability in an offender's behaviour, as it seems that parallel situations encourage similar reactions due to their corresponding psychological meaning (Daffern, 2010; Soroichinski & Salfati, 2010). Some studies conducted on populations of sex offenders have emphasised that offenders' preferences for a familiar location in which to offend could result in more opportunistic target selection due to a victim's availability (Beauregard, Proulx, & Rossmo, 2005; Beauregard et al., 2007).

Mischel and Shoda (1995) proposed a theory that provides further explanation of human behaviour with regards to selecting, seeking and creating familiar situations. They introduced the concept of the cognitive-affective personality system (CAPS), a model that describes how mental representations, which include goals, beliefs, strategies, are responsible for the interpretation of any encountered situation and its circumstances. These authors suggested that people have a tendency to seek a familiarity in situations and moreover these situations tend to activate known to individual relevant interpretation of these (Mischel, 1999; Mischel & Shoda, 1995;

Pervin, 2002). These familiar circumstances activate and reinforce specific reactions that are functionally linked with individual's distinctive qualities. Therefore, familiar situations, by activating specific cognitions and affects, can encourage certain strategies and consequently behavioural consistency (Eaton, South, & Krueger, 2009). This however also indicates that any variation in mood would activate relevant, different cognitive representation. Among the external factors that could potentially reduce the level of familiarity of the situation and therefore modify the offending behaviour are for example the presence of a third party disturbance, victim's reactions, or routine activity at the offence location (Davies, 1992; Sorochinski & Salfati, 2010). Each event strengthens links between cognitive-affective units (CAU) (Eaton et al., 2009) which increases the likelihood of their future activations. Both victim behaviours and situational characteristics therefore seem to have the potential to encourage stability (when they seem familiar to the offender) or change in behaviour (when the offender perceives them as different).

Personal attitudes and the belief system held by offenders seemed to be a fundamental component of processes behind sex offending behaviour (Andrews & Bonta, 2006). Numerous theories and models highlight the impact of cognitive processes on the perception and interpretation of information (Ward & Beech, 2006). Cognitions related specifically to criminal conduct have been identified as important criminogenic needs as they reinforce and motivate specific behaviours, for example, by minimising the consequences of rape, normalising offending, etc. (Bulten et al., 2009). The cognitive processes associated with sexual offending also underlie changes in strategies that offenders use to reach their goals (Ward & Beech, 2006). Hence, rigid cognitions could be associated with similar behaviours being repeated at the crime

scene (Duff & Kinderman, 2008). On the other hand, with growing experience an offender can learn new skills and strategies, and attitudes and aims can be modified, which would introduce variation in their offending repertoire (Davies, 1992; Sorochinski & Salfati, 2010).

Cognitive systems are known to directly influence emotional reactions (Ward & Beech, 2006). For example, it has been observed that offenders who hold strong beliefs and attitudes inducing anger display more aggressive behaviour at the crime scene (Barnett, 2010). Therefore, an offender's mood at the time of the offence, as well as preceding the crime, could have a crucial impact on the level of violence and other types of behaviour displayed, (e.g., a more negative state could lead to an increased level of violence during the offence; Beauregard et al., 2005). Mood can also be a motive for an offence. For example, it has been suggested that for offenders who were occupied by grievance thinking or revenge around the time of their offence, anger and vengeance became their motive (Declercq, Willemsen, Audenaert, & Verhaeghe, 2012).

As well as cognitive distortions and emotional functioning, the literature identifies deviant sexual fantasies as one of the fundamental components of the processes behind sexual offending (Gee et al., 2003; Maniglio, 2010; Ward & Beech, 2006). Fantasies can have numerous complex functions in offending behaviour. They can encourage sexual conduct, maintain arousal, as well as fuel preoccupation with offence-related behaviours. Sexual fantasy may also be used by offenders as a coping strategy (Craig et al., 2008). Fantasies also facilitate planning of the crime, or rehearsing the offence (e.g., selecting the victim, approaching the victim, attempting to re-live the offence while planning the next one) (Carabellese, Maniglio, Greco, & Catanesi, 2011; Gee & Belafastov, 2007). Studies suggest that the ritual behaviour within the modus operandi

reflects the content of an offender's sexual fantasies (Sheldon & Howitt, 2008). Consistency or change in the fantasy could therefore contribute towards behavioural stability and change. Although there is an indication that fantasies would introduce some repetition in offenders' behavioural patterns, simultaneously it has been highlighted that sexual fantasies do evolve with time, becoming less general and more focused on specific, preferred actions (Gee, Devilly, & Ward, 2004). Sexual fantasies can also escalate in their severity and frequency with time, which would suggest that they are more likely to introduce change (Gee & Belafastov, 2007). Although it is difficult not to acknowledge the crucial part that sexual fantasy plays in the offending behaviour, it is unclear to what extent they influence behavioural patterns of serial sex offending (Maniglio, 2010). Therefore further studies are needed to identify these aspects of sexual fantasies that are more likely to remain stable and reinforce the offending behaviour (for example, the core aspects of sexual fantasy directly related to sexual preferences and interests), and these aspects that are less important in relation to offender's behavioural stability.

Factors mentioned above that have been associated with sexual offending highlighted the complexity of the processes that could impact on the degree of behavioural consistency within sex offenders' modus operandi. This complexity has been also reflected by the Criminal Events Perspective (CEP) theory which postulate that in order to gain a better understanding of a crime its wider context (i.e., victim, situational, and social factors) needs to be acknowledged (Pino, 2005). The CEP theory uses a holistic approach when analysing the offending behaviour by drawing attention to the antecedents to the offence, the offence itself, and the consequences of the crime, along with the accompanying social context (Pino, 2005).

## **Personality Disorders and Offending Behaviour**

Recently more studies have started to explore the functional link between mental disorder (e.g., personality disorder) and criminal conduct. It has been reported that amongst the population of sexual offenders there is a high prevalence of personality disorders (PD) which are also strongly associated with a higher risk of criminal conduct (Ullrich & Marneros, 2004). Amongst the most commonly diagnosed personality disorders are disorders from cluster B and C, labelled as 'dramatic' and 'anxious' (APA, 2004; Harsch, Bergk, Steinert, Keller, & Jockusch, 2006; Leue, Borchard, & Hoyer, 2004). It is not possible to link specific personality disorders (PD), that are characterised by the enduring, rigid and distorted cognitive patterns, to any particular type of offending (Jones, 2009; Ullrich & Marneros, 2004). The difficulties with investigation of the relationship between personality disorder types and other factors are further complicated by the overlapping symptomatology (Duff & Kinderman, 2008). A good example for this is the impulsivity that could be associated with paranoid, histrionic, narcissistic, antisocial, or borderline personality disorder (Ullrich & Marneros, 2004).

There is a lack of research focussing on the influence of personality disorders on crime scene behaviour as well as behavioural stability and change, therefore further investigation of these issues is needed. However, it has been stressed that rigidity and pervasiveness of cognitive functioning, that characterises the population of personality disordered individuals, are related to their tendency to repeat the same problem solving strategies, and impairs their ability to learn and adapt their functioning to changing environment (Drake & Pathe, 2004; Jones, 2009; Ullrich & Marneros, 2004). Therefore

it could be associated with similar behaviours being repeated at the crime scene (Duff & Kinderman, 2008). As previously described, the CAPS theory explained how situations perceived as familiar would activate specific CAU which could reinforce behavioural stability (Eaton et al., 2009; Mischel & Shoda, 1995). This would suggest that the pervasiveness and persistence of cognitive distortion as well as emotional functioning in individuals with personality disorders would produce behaviour that should be more stable and less flexible (Buschman & Beek, 2004; Nysaeter & Nordahl, 2008).

Although it seems that for these individuals their tendency to less flexible interpretation could be reflected in greater behavioural consistency (Drake & Pathe, 2004; Eaton et al., 2005), the relationship between PD and stability of the behaviour displayed by the offender is not clear (Duff & Kinderman, 2008; Långström, Sjöstedt, & Grann 2004). It is important to acknowledge the possibility that emotional and cognitive functioning are not solely responsible for the stability of behaviour across an offender's series.

## **Objective of the Study**

The aim of this study was to conduct four in-depth interviews with detained individuals who had committed two or more sexual offences about their perceptions of the stability and variability of their offending behaviour, and to explore various factors that could play a crucial role in their conduct. The study aimed to gain insight into why offenders might maintain certain behaviours over time or why they might change the way they commit their offences.

Prior to this research project, a systematic literature review was conducted to assess whether there was a gap in the literature regarding mentally disordered sex

offenders. Very little research was uncovered as a result and no previous study has looked at the behavioural stability and variability of mentally disordered serial sex offenders. The outcome of this study could therefore provide a review of the existing knowledge on forensic patients who commit sexual crimes, as it seems that there is a significant underrepresentation of studies conducted with mentally disordered offenders. Further investigation of their behavioural stability is needed and could contribute towards a better understanding of their treatment needs, factors associated with repeat offending, and potentially lead to identification of protective factors (e.g., in a situation, where the offender has decided not to offend again). With better insight offenders could be more able to identify lapses in life that could lead to relapse in their sex offending and become more aware of specific triggers, or factors leading to repeat offending.

To the author's knowledge this research project is original, but potentially contributes to the understanding of crime scene actions for this complex subgroup, which would have implications for intervention programmes to reduce future risk. Information regarding the stability of sexual offending behaviour by mentally disordered offenders would also contribute towards policing efforts, as it would have implications for investigative practices, such as crime linkage.

## **Ethical Considerations**

A proposal was submitted to the Black Country Ethics Committee and London West Mental Health R & D Consortium. The research project received a full approval from both committees and was supported by the University of Birmingham which agreed to take on the role of Sponsor. During the study, the patients' clinical team were

involved in order to consider all potential benefits and risks associated with each patient's participation in this research. Any possible issue regarding their capacity to consent due to mental health state was addressed on an individual basis. The selected participants were approached individually and informed about the nature of the research. All of them were reassured that their participation was voluntary and their decision would have no bearing on their care in the hospital.

The interviews included sensitive and potentially difficult issues. Therefore in order to minimise the potential impact of the interviews upon patients, their Responsible Clinicians were consulted (for example, to determine if they were mentally/emotionally stable and able to participate in this study, how ready they were to disclose information about their sexual offending, what was the likelihood that involvement in this research would not be beneficial for them). Moreover, out of all possible candidates for this study, patients were prioritised for recruitment who had already addressed or who had started to address their offending behaviour with a professional person (i.e., have taken part in the sex offending treatment program, psychosexual assessment, or other individual sessions, etc.); or who were open and willing to explore those issues, in the opinion of their Responsible Clinician.

Participants received a full explanation of all aspects of confidentiality, i.e., that everything that they disclosed within the session would remain confidential except for information that suggested there was a potential risk to them and/or others, or if they disclosed any information about a crime that had not been previously reported to the police. The interviews were transcribed and any personal identifiers (e.g., names) were removed and replaced with pseudonyms in order to anonymise the data and protect the identities of the patients and their victims.



During this research, the Caldicott Principles (Crook, 2003) were strictly followed regarding accessing, storing and protecting the confidential information obtained during the research (i.e., only relevant data was collected, all data (coded checklists and interview transcripts) was labelled with an identification number rather than using names, participants' names only appeared on the consent form, which were kept separate from the study data.

### **Interviewer's background**

The process of conducting interviews, as well as coding and analysing the data, was closely supervised by clinical and academic supervisors in order to identify and minimise any potential biases and problems that could be related to any aspect of the study. It is important to discuss my previous involvement in the service and participants' therapy, as it contributed on one hand towards some difficulties, whilst on the other, it proved to be an advantage. Due to my previous involvement in therapeutic interventions at the hospital, I had to carefully examine all potential risks that could occur during the interviews. At the time of commencing the research I had been working in this institution for over three years. All participants knew me personally prior to the study. I had facilitated some therapeutic intervention for three of the patients (which included work relating to their sex offending). Although I knew the fourth participant, I had never worked with him therapeutically.

One of the main issues that was crucial for the interview was related to the differences between the research interviews I was about to conduct, and our prior therapeutic sessions. In order to explain all the issues and their questions regarding the interview, I met with all participants on at least two occasions prior to the interview (I

met one of the participants on three occasions). Knowing the patients already enabled a good rapport to be established, thus giving advantages such as recognising when they were uncomfortable. All of them stated that they would be able to tell me how they felt or raise any concerns they may have regarding the interview.

I spent a substantial amount of time explaining the issues relating to the confidentiality and the differences between their disclosure during these interviews and our previous sessions, i.e., I would not feedback the outcome of these sessions to their clinical team and that, their participation (or declining it) in this study would not have any impact upon their progress in the institution. I noticed a significant change in the quality of their engagement after these initial sessions. Additionally, I informed them that I would not be working with them following these interviews, as I was planning to leave the institution shortly after completing the data collection.

I also needed to encourage the participants to give me more detailed disclosure, and explain the different purpose of our sessions. All of them stated that during their previous sessions (with me and other professionals) it was stressed that detailed accounts of their crimes were not crucial for their progress in therapy, whereas this time I asked specifically for accounts of their offending behaviour that were as thorough as possible. Additionally I used supervision in order to avoid any misinterpretation of the data (for example due to my previous knowledge of these individuals), or the potential tendency to apply any aspect of psychological formulation of their behaviour rather than analysing the transcripts according to the template analysis principles.

I also had to be mindful of the dynamic between myself and the participants. Therefore, I made sure that they understood that they did not have to take part in the

research and could withdraw from it at any time. None of the participants expressed regret or distress, about being interviewed.

## **Methodology**

### **Participants**

The participants were recruited from a high secure hospital where the admission criteria were related to the offenders' risk, as well as their diagnosis of mental disorder. All of the participants considered for the interviews had already taken part in another piece of research conducted by the author which involved file reviews of 20 individuals that met the inclusion criteria (i.e., men who committed more than one sexual offence against different victims). Patients who were deemed suitable to be approached by their clinical teams were contacted individually to determine whether they would be interested in taking part in an interview. Initially, 11 patients were approached by the researcher, out of which 6 patients consented to take part in in-depth interviews. Only four were able to participate in the study. The remaining two were unable to take part due to their transfer to another establishment.

All participants were white, British males, between the ages of 27 to 47 years. All of them reported that their first sex offence took place in their early teens. However, not all offences were known to the police at the time and for some they had not been convicted. The series of sexual offences, that resulted in custodial sentences ranged from 2 to 15. All offences were committed against women. Two participants during the interviews talked about offences only recently disclosed to the police. All participants

reported being involved in other types of offending behaviour in the past (e.g., violent offending, burglary, theft).

All four participants met the diagnostic criteria for personality disorders. The comorbidity of their diagnosis was highly prevalent, mainly consisting of the cluster B personality disorders (antisocial, borderline and narcissistic personality disorder), and cluster A (paranoid) (APA, 2000). All four were diagnosed with antisocial personality disorder. Additionally all participants had been assessed with the Psychopathy Checklist-Revised (PCL-R) (Hare, 2003) for the psychopathy traits and all of them received scores that were above the UK cut-offs for the criteria for psychopathy, (i.e., 25 (Olver & Wang, 2006; Semple, 2005). Two of them scored above 30 which indicated high levels of psychopathy.<sup>1</sup>

The sample consisted of four male patients detained in a high security hospital, diagnosed with mental disorder, who had committed more than one sexual offence and who were able to participate in the research. Individuals who did not have capacity to give consent or were deemed not suitable to be approached for legal, risk or any other purposes, as determined by the clinical team and Responsible Clinician were not considered for this research. Given the complex aim of this study, it was preferable to interview fewer offenders but in detail rather than more offenders in a more general manner (Smith, Flowers, & Larkin, 2009). The number of four participants is also a suitable sample size for conducting qualitative research similar in approach to, for example, Interpretative Phenomenological Analysis (IPA). Although opinions regarding appropriate sample size for qualitative studies vary in the literature (Marshall, 1996; Onwuegbuzie & Leech, 2007), it has been recognised that the contribution to the

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<sup>1</sup> Further information about the participants has been withheld due to confidentiality concerns; to ensure their anonymity.

existing knowledge by the qualitative analysis of a smaller sample is valuable for the development of current understanding. However the consensus is that sample size should be assessed in context of saturation rather than representation of a bigger population (Hodges, 2011; Marshall, 1996). It has been suggested that, for example for IPA, which is a very similar approach to template analysis, a sample of between 3 and 6 should be sufficient for the in-depth analysis that would allow recognition of significant themes (Smith et al., 2009).

## **Procedure**

Various methodological approaches for this study were considered. However, template analysis was selected as the most appropriate methodology, as it offered a certain approach to the study that seemed more useful for this project than, for example, grounded theory. It allows for the introduction of ‘a priori’ codes, as well as a semi-structured interview template that could be implemented to direct the questions (King, 2010). Due to the complexity of the studied subject, as well as the characteristics of participants, identification of ‘a priori’ themes was an advantage. The review of current literature that explored all relevant theories and models that provide an explanation of sex offending behaviour has been conducted in order to identify any potential factors that could be identified as influencing the offending behaviour. This search covered the general theories of sex offending (e.g., the Risk-Need-Responsivity model; Polaschek, 2012; the Integrated Theory of Sex Offending; Ward & Beech, 2006; Child molesters’ implicit theories; Ward, & Keenan, 1999), as well as exploration of more specific issues associated with this type of offending (e.g., deviant fantasies; Williams et al., 2009; Vanhoeck, Van Daele, & Gykiere, 2011; cognitive-affective dysfunction; Mischel &

Shoda, 1995; Schaffer, Jeglic, Moster, & Wnuk, 2010, etc.). As a result of this process numerous 'a priori' themes derived from the existing literature formed the template for the interview schedule which helped to focus discussions on the relevant topics. Later, they helped to structure concepts derived from the study and relate it to current research literature (King, 2010).

A semi-structured interview schedule (Appendix II) was developed based on existing guidelines for template analysis (King, 2010). The questions asked covered different aspects that were identified by previous studies as playing an important role in sexual offending (i.e., sexual fantasies, attitudes, psychological and emotional state, etc.) and focused on the most significant event characteristics and circumstances that were associated with sexual offending before, during and after each of the offences. The final draft of the interview schedule was developed under the supervision of an academic supervisor who had relevant experience and expertise of the research area. The interview used open questions to facilitate individual reflections from the participants and encouraged them to engage in meaningful exploration of their past offending behaviour (King, 2004). The interviewer had access to regular academic supervision that was used for monitoring the quality of the interviews, as well as minimising potential biases, inaccuracies, or inconsistencies within that process (Smith et al., 2009).

In-depth interviews were conducted in a flexible manner, in order to support participants in disclosure of their accounts of their past offending behaviour. Participants were asked open questions, however, due to their interaction with the interviewer, prompts were often required and a more flexible, less chronological manner had to be adopted. The number of interviews varied in each case due to participants'

presentation, readiness to talk about sensitive issues, external factors that influenced patient's engagement and motivation, as well as the volume of the material discussed during the sessions. Overall 14 hour-long, face-to-face interviews were conducted by the author and the number of sessions per participant ranged from 2 to 6.

Confidentiality was discussed prior to each interview to assure the participants that all data would be reported anonymously and in summative structure. Interviews were recorded and transcribed verbatim.

## **Data Analysis**

The transcripts of the interviews were analysed according to the principles of template analysis (King, 2004) resulting in an initial draft of the coding template. Through additional readings of the interview transcripts further revision and modification of thematic structure occurred. Throughout the whole analytical process regular academic supervision was utilised in order to ensure consistency in quality, improve credibility, validity and to address any potential biases (Smith et al., 2009). Due to issues related to confidentiality and sensitivity of the interview material access to the transcripts was limited to only the interviewer and the academic supervisor.

From the preliminary stage of the study, two 'higher-order' codes emerged that facilitated arrangement of lower codes into two groups of factors that influenced participants' offending behaviour. Subsequently these two higher-order codes (i.e., situational and personal factors) were divided into several more specific lower-order codes (Kazi, 2003). During numerous reviews of the interview transcripts themes were revised, modified, added, or rejected. This process was repeated for each of the interviews which at the end generated a final template of higher-order and lower-order

themes (King, 2010). Themes were listed chronologically along with illustrative quotes and the description of their location in each interview to ensure that the theme labels could be accounted for in the original text.

During the analysis the author used the method of memoing that is used in qualitative research (Corbin & Strauss, 1990; Crabtree & Miller, 1999). This technique involved recording reflective notes. It provided the opportunity to emphasise complexity of identified themes and relate the researcher's observations to a theoretical background; as well as help to validate the choice of codes and their link with the data gathered during interviews (Crabtree & Miller, 1999).

## **Results and Discussion**

Various themes emerged from the analysis, which were classified under two higher-order codes related to situational and personal factors. Each of these two higher-order themes consisted of groups of lower-order themes reflecting more specific descriptions. The final list of themes is presented in Table 1 (see Appendix III).<sup>2</sup>

### **Theme I**

#### **Situational Factors**

All four participants described external factors that influenced their behaviour in both the short and long term. These were organised under the higher-order theme 'situational factors'. Although, each of the four participants provided very unique

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<sup>2</sup> In order to ensure participants' anonymity all quotes were carefully selected with any references or information that could potentially lead to the identification of the participants being removed. A few quotes from the interviews with research participants contain strong language.



accounts of their experiences, it was possible to identify similarities across the four cases, which were encapsulated into six lower-order codes.

The reoccurring factors that appeared to influence the offending behaviour displayed at the crime scene included: the victim (theme divided into sub themes: victim's reaction, and victim's characteristics), the physical environment, employment, social network, presence of a co-offender and third party interruption. Each of these is outlined below with accompanying illustrative quotes

## **Victim Factors**

**Victim's reaction.** The code 'victim's reaction' incorporates all possible responses that victims had to the offender's action or the environment. All four participants recalled that the victim's behaviour played a role in influencing their behaviour during the offence, as well as in the decisions they made in future offences.

All participants stated that the victim's behaviour introduced change in their conduct. In some circumstances the victim's reaction prevented the participant from carrying out the offence.

*“some of the women said NO, NO I am not doing that[...], get away! ...and I went: OK, sorry”*

N2

In other cases the victim's reaction modified the offender's behaviour during the crime, or influenced his planning of a future offence.

*“I could hear her crying. I could hear the effect of what I have done to her[...] as soon as she started crying I knew that I had hurt her emotionally, which was extremely pleasing for me[...] next offence was more about that”*

N1

*“...we sat down and again [...], it was a bit surreal because she said that she wanted to watch her program that was on and we sat there for about 5 minutes and then I pulled her through to the bedroom...”*

N3

Additionally, three participants reported that this theme contributed towards some level of behavioural consistency within their series of offences. This was either because the victim was unable to prevent the offender from carrying on with the offence, or occasionally the victim's reaction was a crucial element for the offence to happen, in which case similarity in victim's reactions within a series triggered parallel behaviours:

*“She would do exactly what I say but because of her fear and she was so scared of what could have happened... as soon as I said to her I want this or I want that... it was immediately done [...]. I told her that I wanted her to remove her clothes and I was very surprised how quickly she did it. There was no argument”*

N1

*“...there was no intention to rape. The intention was to charm, but I am afraid that when rejection is rejection it tends to turn into that...”*

N4

*“She said ‘you can do whatever you like, just don’t hurt me’, and I said ok and I saw that as an offer”.*

N2

**Victim’s characteristic.** This theme related to characteristics of the victim at the time of the offence that, according to the participants, influenced their offending behaviour. This theme incorporated various aspects of the victim’s appearance, or physical condition that were not necessarily related to victim’s behavioural reaction to the offender’s actions. Nevertheless, during the analysis of the crime scene behaviour they often appear closely linked to the victims-offender interaction. Hence, these factors could be perceived as associated with victim’s behavioural reaction. Three out of four participants described how some features of the victim significantly impacted on their behaviour.

Only one offender (participant N2) described how the victim’s appearance affected the consistency of his offending behaviour. He would offend against, very young females of particular appearance to whom he was attracted.

*“...she is pretty, long hair, big boobs, very similar to lots of these victims here[...] around 13 years old...”*

N2

Additionally, the victim’s vulnerability was perceived by participants as an opportunity to engage in a similar type of behaviour over the time. The vulnerability was associated with either her personal abilities (e.g., related to their background) or

physical state (e.g., being intoxicated). Three participants identified the victim's condition as reinforcing their already established offending behaviour:

*"...and she was [...], she couldn't speak English, so she said... she couldn't quite understand [...] she went along with that. I think she just trusted me, I suppose"*

N4

*"...she is staggering, she is a bit drunk ... she looked very vulnerable"*

N2

All four participants reported that, most of the time, physical appearance did not play a role in the process of the victim's selection or their behaviour. However, the specific physical features, or state of the victim did impact on their conduct, sometimes resulting in behavioural change. This was usually unexpected and often undesirable.

*"...as I grabbed her she fell on the floor and she twisted her ankle[...] I got convicted of the actual ABH as well, but attempted indecent assault[...] but there was no opportunity for anything more sexual..."*

N2

*"Because the trigger to the violence, to the extreme violence was the blood..."*

N3

## Environment

All four participants spoke about the relationship between the physical environment (the crime scene) and their offending behaviour. Some level of stability across the series of all four offenders was related to the offence location. Although, all four of them gave different accounts about the degree to which they were aware of their preference regarding the location (e.g., isolated, rural area, victim's house, or public location like a small alleyway), all of them emphasised how the specific location, especially the familiarity of this location reinforced their offending behaviour.

*“I actually found an area the first time around and when I got back I went back to the same spot”*

N2

The environment for two participants regularly provided them with the objects (e.g., weapon) they used during each offence:

*“I went into the kitchen, well it was a little kind of thing for a kitchen [...] and I got the knife”*

N3

The location also played an important role in the stability of their behaviour, as it had been chosen by all offenders for preferable practical aspects (i.e., isolated area, where they would less likely be disturbed, or many ‘escape routes’ that were well known to the offender),

*“I didn't have to force them [...] but I isolated them and they could not escape”*

N4

or in one case the location had its role in maintaining sexual arousal (participant 2):

*“...being overlooked [...] that gave me a sense of thrill, sense of the excitement  
[...] the risk element made me feel that I might get caught here. That was exciting,  
that was thrilling...”*

N2

Nevertheless, in all cases the environment also produced some modification to both the behaviour at the crime scene, as well as participants' conduct in future offences. These changes were mainly introduced after they found the environment too risky, or in circumstances when they felt it was very unlikely they would successfully complete their offence:

*“so I preferred the flat, it was her place[...] I knew I can do whatever I wanted  
and this time no one is going to interrupt me”*

N1

## **Employment**

Two participants (N2 and N4) identified employment as an influential factor with regards to their offending behaviour. In both cases employment facilitated access to their victims:

*“well...access to the young girl[...] how I will get that? ... so I started to work in  
another disco and then I started my own business”*

N2

*“Giving women jobs in the club and expecting, you know rewards for that”*

N4

In two cases (N3, N4) participants used their uniform from work to gain victims' trust and avoid raising suspicion in public:

*“I was wearing my uniform so it wouldn't draw too much suspicion to me”*

N3

These aspects of employment introduced some level of consistency across offences. However, all offenders reported frequent changes in their employment status, as well as the nature of the work they were doing. Therefore, employment itself was not a stable factor for any of the offenders. Instead this factor introduced some level of stability in the short term. What was reported as stable was a preference for the use of their employment in their access to victims across the offence series. Those offenders who reported that they used their employment in one form or another to facilitate their offence were more likely to do it in the future.

## **Social Network**

Only one participant (N2) suggested that his social network influenced his behaviour and contributed to some level of stability in his offending. In his case it was related to the choice and access to potential victims:

*“hanging around much younger people [...] I always knew where to be [...] my friend told me once that: if there is a group of 15 year old girls on the street corner when I walked passed I knew somewhere I am going to be there”*

N2

## **Presence of a Co-offender**

Two participants (N2 and N4) reported that their initial offences were committed with another person. Interestingly, in both cases the co-offender was present at the beginning of their series and later they progressed as a lone offender. In both cases the presence of the co-offender introduced behavioural variation, as the other person introduced unpredictability and other ‘agendas’ in their modus operandi.

*“At the time I was very proud of what I just did [...] I just wanted to impress my mate [...] and I just left saying: well, see you later, I’m off. I have got a date [...] and later I phoned him - ‘is she still there?’”*

N4

*“I stood there by myself thinking ‘oh my God, what is he up to’ [...] I then hear him whistle and I hear her scream”*

N2

## **Third Party Interruption**

Out of four participants, two (N1 and N3) reported being interrupted by somebody during their offence. Naturally, this introduced a change in modus operandi at that crime scene. Moreover, this resulted in changes to the future behaviour of participant N1, as



he was interrupted on two occasions which caused him to change the location of his offending from isolated outdoor areas to indoor location.

*“I heard someone in the alleyways... that was one of my escape routes ...I panicked... as soon as I heard somebody I thought ‘oh shit! I am going to get caught!’ ... So I jumped up put myself away and ran”*

*N1*

The other offender (N3) was interrupted by a third party on one occasion. However, apart from being forced to abandon his plans for offending (a short term change) this incident did not alter his offending behaviour in the long term.

*“I visited [...] but I didn’t commit the offence because when I looked through the window she wasn’t there and there was a male in there so I can’t go back there ever again”*

*N3*

## **Theme II**

### **Personal Factors**

Apart from the situational factors, another higher-order theme was identified which incorporated all individual and personal features and qualities that were responsible for stability or change across the series of offences.

## **Sexual Fantasy**

Although deviant sexual fantasy is unquestionably one of the factors most recognised in the literature as associated with sexual offending (Carabellese et al., 2011), establishing what its exact role is in the behaviour displayed during the offence has proved to be complex (Craig et al., 2008; Gee & Belafastov, 2007; Gee et al., 2003; Maniglio, 2010). The analysis of this theme highlighted the dynamic nature of sex fantasy, as well as its multilayered relationship with moods, motives, and offence planning (rehearsing). Fantasy seemed to reinforce certain behaviours of participants which resulted in their behavioural stability, but at the same time instigated new behaviours in other circumstances. All of the participants described using sexual fantasy as coping strategies to deal with their various problems and difficulties, as well as offence rehearsal (Craig et al., 2008; Gee et al., 2003; Sorochinski & Salfati, 2010). Not all fantasies experienced by offenders had a significant role in influencing the behavioural aspects of modus operandi, for example fantasising about killing the victim did not necessarily lead the offender to engage in murder and for some participants their sexual fantasies were simply too unrealistic or too complex to be enacted (Gee & Belafastov, 2007; Maniglio, 2010; Sheldon & Howitt, 2008). Nevertheless, for all participants their fantasies reinforced some behavioural aspects of their crimes (e.g., through reliving previous offences and planning the next one), and fuelled offender's preoccupation with sexual offending (Craig et al., 2008; Gee & Belafastov, 2007; Ward & Beech, 2006).

All four participants reported that their sexual fantasies were evolving and included various kinds of scenarios depending on mood and personal circumstances.

This content variation resulted in alteration of their *modus operandi* across offence series.

*“They would range from [...] I can make an approach and make sexual advances towards her that would be: ‘well, we’ve already started so we may as well finish’ type, to: I would grab hold of her, drag her to an area, I would then forcibly take her [...] I would rape her and if she was not agreeing with something I really wanted, I would end up killing her and that’s where the fantasies kind of went [...] having sex with [...], to raping and killing... that whole range depending on how I upset, how angry, how happy I suppose I was”*

*N1*

The fantasies were also modified with time due to the individual’s experience and him developing more specific interest and aims:

*“I was thinking about what I have done in the first one then I went for the second one and then thinking in my head adding things”*

*N3*

*“I wanted to enjoy the sexual contact but up to that point I wanted her to fight [...] so that became more important to me”*

*N1*

Three participants (N1, N3 and N4) disclosed having fantasies that they were not able to act upon, due to their unrealistic nature. Their offending behaviour at the crime scene did not reflect these fantasies, as offenders were unable follow them (e.g., due to lack of social or intellectual skills, inadequate planning of the offence, approach, and unachievable goals like pleasing a victim of rape). This often introduced a change to their behaviour:

*“I wanted to make her come[...]at the end of the day it was forceful but at the same time try to please them... up here, but it was quite distorted, impossible to do it. I wanted to do more things to her, it didn’t go according to the plan [...] I have just changed it and I still got to do things I wanted to do, but not in the way that I saw it and that was disappointing in many ways but it wasn’t an issue after I ejaculated”*

N3

Two participants (N1 and N3) reported that with time they observed an escalation of violence in their fantasies which also increased in their frequency. Both of them reflected on simultaneous escalation at the time in their offending behaviour.

*“They were more and more violent [...] my fantasies changed to be more violent, physically violent, the sexual violence is self evidenced in terms of I am forcing somebody to do what I want... but the fact that I was more aroused to being physically violent whilst performing sexual acts against someone [...], that was*

*something... that was highly arousing to me...it started with me doing more stuff, to involve punching while having sex or whatever”*

N1

In other cases, sexual fantasies contributed towards the stability of behaviour at the crime scene, for example, when reinforcing the pleasurable behaviour and desired outcome of the previous offences,

*“I thought about sex with women... they were pretty violent, yeah similar to what I was doing to victims ... in terms of sexual fantasies again I suppose its dominance[...] I was thinking things like I am going to fuck her in the ass... yeah it was violent”*

N3

However, for others fantasy appeared to have little impact on their crime scene behaviour. For example, participant N2 was able to reflect on some changes in his sexual fantasies:

*“it didn’t stop me [...] my interests kept going around that ‘15-16 year old’ age group and then gradually the older I am getting they started to shifting from 15, 16 to 14 and maybe I am one of only half a handful of people that admit it but I think the older you get... the older I have got, the age group of people that I like have come down not gone up”*

N2

However, this participant reported that this fantasy did not impact on his behaviour as such (for example, did not influence the process of selection of his victims, method of approaching the victim, or types of behaviour he engaged during the offence).

For participant N1, who had sadistic interests the feeling of being in complete control in the situation, was crucial. His sadistic sexual fantasies were an opportunity for rehearsal. They tended to be very detailed and tailored for each offence in order to 'prepare' for all possible difficulties. Although, they seemed to be adapted to each offence they would still include similar elements that seemed responsible, at least in part, for this participant's behavioural consistency.

*"In terms of fantasy [...] it is remembering... it is not so much fantasy but remembered sexual experience. I would replay in my mind what I have already done. I would be fantasising about it, while I was following her [...] about what I am going to do to her and how I am going to make her feel"*

N1

## **The Motive/Mood**

This theme incorporated the affective factors that could be identified as drive and motive for the offence. All four participants gave extensive accounts related to this theme which seemed to be very influential in terms of their behaviour. It seems that for all four participants the motive and mood was one of the most powerful themes

responsible for both stability and change in their behaviour across the series of sexual offending. In order to organise this complex theme lower-order codes were identified that described moods/motives related to anger, desire, boredom (looking for excitement) and anxiousness.

**Anger.** The first sub theme that was identified integrated all emotional states and motives for the offence that related in some way to anger (for example, vengeful thinking, feeling humiliated or undermined). All four participants highlighted that some degree of anger was always present during their offences, and all of the four stated that most of the time it was a necessary component to justify their offending behaviour.

*“I had to dislike them to do it. If I liked them I couldn’t hurt them but I had to get to that stage where I disliked them and disliked them enough”*

N4

For participants N4 and N1, ‘revenge for being rejected’ (often by their victims) led to the consistency relating to their perception of the victim (and their offences), as well as the consistency in their behaviour.

*“She categorically rejected me and that was: ‘right! I get you back for that’, and as soon as I thought ‘I will get you back’, I knew exactly what I was going to do... she was going to pay for what she has done to me”*

N1

In instances where the victim was not the person who rejected participant N1 reported still be driven by this motive of revenge and engaging in very similar behaviour towards his actual victim.

*“I deliberately kept her facing the other way. I didn’t want her to see me... I wanted to be able to pretend that the girl I was doing ... that is [...]”*

N1

All four participants reported that at some point they used their offences as a strategy to cope with their anger, to ‘make themselves feel better’. In circumstances where the motive/mood related to their offending was similar, they also exhibited behavioural similarity.

*“On the first occasion I was recovering from [an injury], and I was very angry... on a second occasion... there was no violence at the time but the week or so before I had been attacked[...] and that made me again very angry... and again when I was waiting to meet my last victim, I got kicked in the street by these three thugs that wanted to fight me for some reason[...]and you want to get back, get on a high ground again, you know. I know it is no good you want to feel empowered again and of course in my inadequate mind I thought that I can do it by dominating the female”*

N4



For participants N2 and N3 severe anger was an acute reaction to specific external circumstances that happened around or during the time of their offence. This significant change in their affective state strongly influenced their behaviour introducing extremely atypical elements in their modus operandi. Interestingly, both participants 'returned' to their previous offending styles once they managed to defuse their emotional state. Therefore, there was a great level of stability across the crimes committed in a similar affective state (or driven by similar motives), however across the whole series of their offending history there were significant differences.

*“so there I am... I feel very inadequate as a man [...] undermined me, made me feel angry and pissed off and feeling really, really insecure myself, lots of things and I go off then within 40 minutes to offend, trying to make myself feel better [...] feeling shitty in myself [...] and that was the beginning of a string of several offences I committed at that time“*

N2

*“Because I thought she was [...] then everything went out of control, the rage ...and everything else got clouded out ...the sex and everything ...I was just thinking about things from my past and I started to [...] started to strangle her”*

N3

All participants reported the feeling that their anger was building up and leading to an escalating level of violence. Also, this seemed to contribute towards a lowering of their emotional tolerance. Anger was one of the factors resulting in more reckless behaviour. This recklessness in all four cases led to their arrest by the police.

*“I am already planning the offence that has happened four weeks later. I am angry that I didn’t complete that offence... The first offence I didn’t want to be caught [...] the second offence I didn’t care”*

N1

*“I was so angry with the world and myself and everything else ...I didn’t give a shit”*

N4

**Desire.** The analysis of transcripts suggested that the mood and motive in all four cases was never limited to only one kind. Apart from anger, desire was another common drive related to their sexual offending. This theme incorporated aspects around sexual preoccupation and looking for sexual gratification, and / or intimacy. All four participants stated that sexual pleasure/gratification was one of the most important aims of the offence. This theme contributed towards stability and change in offending behaviour across the series of offences.

For three participants (N2, N3 and N4) desire was responsible mainly for stable features in their offending. This would often involve the repertoire of various sexual activities that they would find enjoyable (e.g., anal or oral sex, specific ways of interacting with the victim – kissing, fondling the breasts, etc.)

*“I just felt ashamed but then when, how I put it, when it started to build up again it started became more of a thing again and I needed a release this was like just go there and take what I want so didn’t really care [...] I went there with the intention of just having sex and I was thinking about things I can do to her and I*

*was thinking about the fact that I wanted to fuck her, make her suck me off... do these things to her”*

N3

*“I never went out to commit rape. I was always in a hope and I had an expectation I wouldn’t even be like that. That it will be just natural, consensual sex and when we talk about rape [...] it was still a normal, you know, missionary position...sex”*

N4

The ‘desire’ theme had a different impact on participant N1 as his sexual interest was strongly and solely influenced by his sadistic preferences. Although a certain range of behaviours would remain fairly consistent in his case, in the long term his fantasies and his sexual interests evolved, incorporating more violent and bizarre acts.

*“it was more about pain and suffering[...] emotional as well as physical pain ...if I had not been caught... if I am honest, I think I would have probably ended up killing someone”*

N1

**Boredom/ looking for an excitement.** Two participants (N2 and N3) identified during their interviews that boredom and the need for additional stimulation was one of the motives for their offending behaviour. In both of these cases boredom did not introduce change but contributed towards behavioural stability. Excitement was associated with the familiar situation of previous offending. When both of them wanted to experience a similar ‘buzz’ they would think about the situation when they felt thrilled.

*“That gave me a sense of thrill, sense of the excitement about... I guess the risk element made me feel that I might get caught... that was exciting, that was thrilling [...] next time I went back to the same location”*

N2

**Anxiety versus confidence.** All four participants referred to their feelings of anxiousness about committing offences at the early stage of their series. In all cases, the initial lack of confidence introduced an element of change in their behaviour, and with time, all four participants reported growing feelings of confidence that had a significant impact upon their behaviour.

*“I actually I couldn’t perform the act of the intercourse with the first girl because I was petrified”*

N2

*“my confidence was building [...] I think for the second one, I can remember it quite well for the second one, when I was coming up to the door, a difference to the first one was this was early morning... so it was quite light the other one was at night time so I think that shows the confidence or stupidity at that time”*

N3

The confidence along with anger contributed towards an escalation in reckless behaviour with time. Therefore, the complex dynamic between various moods and

motives could also introduce some level of consistency, as the more an offender felt that 'he could do whatever he wanted', the more likely he would be to engage in similar behaviours that he would find pleasurable (e.g., oral sex, kissing the victim, etc).

*"I was getting more and more blasé about the whole situation and just doing what I wanted to do even more, not really caring about the consequences"*

N2

The complexity of the theme 'mood/ motives' related not only to co-occurring emotional states and motives, but in addition to its functional link with other personal factors like attitudes and beliefs. Therefore, as a result, these relationships were responsible for specific emotional patterns (i.e., before and after the offence) that would lead to parallel behavioural patterns (for example being forceful and angry at the beginning of the offence and showing concern about the victim at the end of the offence, by trying to give her money for a taxi, or feeling ashamed). Two participants (N3 and N4) reported similar mood patterns re-occurring during each of their offences and described behaviour that would be associated with their emotional states.

*"it was still exciting the lead up to it and it was still exciting during the offence but again like the first offence there was no excitement afterwards, there was a feeling of shame [described the act of compassion] kissed her on the lips and then that was that [...]so it was sex then it was rage and then it was compassion"*

N3

*“After having an orgasm or whatever... [men], they become a different animal, if you like. They become more, maybe loving... caring... more gentle. I was then more concerned about the individual to get home safe. I was always trying to tell them – be careful, I gave them money for a cab”*

N4

## **Experience**

Another theme that influenced the behaviour of all four participants was related to their experience. The literature suggests many types of experience that could potentially play a role in reinforcing crime scene behaviour or in its modification (Bellebaum, Jokisch, Gizewski, Forsting, & Daum, 2012; Soroichinski & Salfati, 2010; Vivian-Byrne, 2002). The analysis of interview transcripts identified three main types: ‘experience of being abused’, ‘experience of abusing others’ and ‘observational learning’.

**Own abuse.** All four participants disclosed during interviews details of being subjected to various types of abuse. All four were sexually abused as children and all of them were able to link their offending behaviour with some elements of their past victimisation. This contributed towards stability in their offending behaviour.

*“From my own experience that was a very painful thing to happen... so I knew that this would cause more pain and that was the whole point”*

N1

*“Conning [...] partially I learned that from that incident... I included that into my own behaviour. The fact that I never complained about the offences committed to me... I thought: ‘well people are not going to talk about it because I have never’ “*

*N4*

However the experience of being abused in two cases (N2 and N3) was associated with change in their offending behaviour. These participants’ memories of their traumatic past triggered extreme emotional reaction and led to significant change in their modus operandi. Both these participants discussed their history of offending behaviour which was contrasted noticeably with the behaviour triggered by their traumatic memories. Both of them disclosed engaging in more ‘romantic’ gestures during their offences (i.e., kissing the victim, hugging, driven by the desire as a motive). When their traumatic memories were activated these elements were overridden by the vengeful motive and extreme anger which was reflected by greater than before severity of violence perpetrated by them at the crime scene.

*“The trigger to the violence, to the extreme violence was that whole thing reminds me of what happened to me when I was a child”*

*N3*

**Abusing others.** Apart from discussing the influence of their own experience of being victimised on their offending behaviour, all four participants acknowledged the impact of their own offending on the stability and change in their behaviour within their

series of offences. Whereas, the difficult memories from their past would often contribute towards stability, their own offending most of the time resulted in more or less subtle changes in the modus operandi. They stated that with time they mastered how to approach their victim, what sexually aroused them more, and how to avoid the consequences of their actions.

*“I got more sexual pleasure from the offence where I didn’t have, or I didn’t rape my victim, compared to the one I did I wanted the victim of my next offence to be very vocal about how much it was hurting”*

N1

Nevertheless, all participants also discussed stable elements in their behaviour that were associated with their previous experience. These elements of offending behaviour proved to be effective and desirable.

*“I would force myself on them and they never complained, they never reported me, they never you know, they never ran out screaming”*

N2

*“I was getting better, more skilful [...] talking that I am in a [type of] industry, or in [type of] industry, or something like that...or that I am in a... you know, it depends what they [the victims] were after or where it was... but I was really good with making things up, so they sounded real”*

N4



**Observational learning.** This theme reflects the ‘observational learning’ that offenders reported as influential in relation to their offending behaviour. ‘Observational learning’ incorporated any knowledge that was a result of observation of other individuals’ behaviour, or via information they accessed from various sources that influenced the offending behaviour (Goubert, Vlaeyen, Crombez, & Craig, 2011). This method of learning usually relates to having overheard, or witnessed specific situations, particular actions with their potential results, and is also referred to as vicarious learning (Craig et al., 2008; Gholson & Craig, 2006).

Three participants talked about how information gained from third parties or their own observation of some incidents impacted on their own behaviour (N1, N2 and N4).

In all three cases observational learning contributed towards some degree of change in their behaviour. However, rather than accurately mirroring the learning situation, it was more likely to be used as an idea for future modifications to modus operandi.

*“one guy I met [...] he had been given 11 years... he picked up two girls, 14 and 15 hitchhiking in [...] and then he put them in the front of his car and then he told them that they have to sit at the back of the car at the back of the lorry and he slammed the lorry and he took them to a secluded area, he then raped them but what he did he got superglue and he glued their hands behind their backs, so they could not do anything and that is something I heard about in prison and listening and thinking I mean I quite like the idea of vulnerability and I thought if not glued but hand cuffed or banding them in the way that she is vulnerable”*

N2

Various sources of information (films, books, inmates from institutions where they were serving their sentence, etc.) improved participants' knowledge about the justice system and legal aspects of their crimes that they would consider in their future offending.

*“So I have learned that the age of the consent over there is [...], so if I am having sex with 15 and that is ok”*

N2

In one case witnessing someone else attacking a woman led N4 to helping the victim but this then shaped his understanding of victim behaviour and reinforced his belief that victims of rape do not report to the police. He also show no concern about capture (i.e., did not take any precautions) after committing his offences which resulted in future consistency.

*“and I asked: ‘do you want to call the police?’ and she was crying on the floor ‘no, no’. I knew that she was embarrassed and I thought that no one would go to the police and talk about that”*

N4

## **Physiological**

Based on the interviews of two participants (N2 and N3), a theme that included the ‘physiological’ aspects of factors influencing offending behaviour was identified.

These two participants reported that, on occasion, they experienced at least one episode (N2) or more (N3) of erectile dysfunction, or premature ejaculation due to various psychological reasons (e.g., anxiety). Since in these circumstances they were unable to sustain an erection this theme contributed to change in their behaviour.

*“I was kissing her. I fondled her boobs and I couldn’t... I was just about to do it... have sex with her, rape her, but I couldn’t get an erection, not even a semi erection nothing at all, I was[...] trying to masturbate, trying to get an erection but all that was happening I am really fearful”*

N2

*“I was in the park, planning sexual assaults and it came close a couple of times but it was only when I was about 5 foot away from one woman that I ejaculated without even doing anything”*

N3

## **Planning/preparation**

During the analysis of the interviews, three themes emerged related to planning and preparation for the offence that all offenders would employ differently: reconnaissance, rehearsing and familiarisation. The heterogeneity of the sample was evident from the participants’ different approaches to, and understanding of, planning. All four participants engaged in some planning of their offences, but as it has been suggested in the literature, also in this case its type, practicality and quality differ in each case (Beauregard et al., 2007). This seemed to be related to their social and intellectual

functioning. For example, one participant who seemed to function very well both socially and intellectually, developed more detailed plans, engaged in advanced reconnaissance and used his insight into people's reactions and behaviours in order to achieve his goals. Whereas another participant who seemed to have limited insight into factors that influenced his behaviour, along with inadequate theory of mind (i.e., ability to relate to other people's and own feelings and beliefs, etc.) (Arntz, Bernstein, Oorschot, & Schobre, 2009) was not able to develop a detailed plan of the offence and tended to rely on his sense of 'familiarity' with the crime location and his victims.

**Reconnaissance.** This theme was identified during the analysis of one of the participant's interviews (N1). The theme 'reconnaissance' includes all actions that relate to in-depth investigation of the location of a potential crime scene (e.g., location, surroundings, escape routes, etc.), or focusing on the victim (e.g., her routine, habits, behaviours, personality) conducted by the participant. This participant engaged in sophisticated preliminary assessment prior to his offences. This resulted in a more individualised approach to each victim. However, due to his feeling of being 'in control' of the environment and his ability to control the victim, he would display high levels of confidence which allowed him to introduce some actions in his modus operandi that were similar across the series.

*“over the course of the next three weeks I started to follow her. I started to find out what her routine was [...] and figure out somewhere in her route home, where I would be able to do it. I already figured out what kind of person she was [...] that fear would make her freeze”*

N1

*“I had gone and I scouted out the whole area. I knew all whereabouts in the certain area [...] I was going to do it. I had gone the whole 9 yards. I planned it out meticulously [...] somewhere that had a lot of escape routes, a lot of cover, so it was hard to be seen. It was also hard for other people to hear [...] even if she screamed and made a noise and tried to get away”*

N1

Although there was a similarity between N1 and N3 in their interest in violent sex, only N1 openly discussed how important it was for him to ‘feel in complete control over the victim’. Participant N3 did not have the same level of insight into his aims and ability to act upon them. He instead relied more on rehearsal and familiarity rather than reconnaissance which required a lot of skill, time, patience and commitment.

*“I think it was building up because I was going to[...] local parks and I was looking to commit the offending and then I was just sitting on the park bench waiting for someone to come by it and commit an offence. They came close a couple of times but I didn’t go through with it”*

N3

**Rehearsing.** Rehearsing the crime was discussed by all four participants during interviews. This theme focuses on the offender’s preparation stage prior to their offence. This would involve thinking about the most effective ways of approaching the victim,

planning their behaviour during the offence, gaining control over the victim, considering bringing a weapon or other items to the crime scene.

This theme contributed to both behavioural stability and change across the series of participants' sex offences. Stability was associated with reintroducing certain elements of a previous offence, since they proved to be effective or desirable. All four participants talked about consistent patterns in their offending behaviour due to previously rehearsed plans.

*“I grabbed her and I [...] first word I have told her was a standard things, I said that to all my victims [...] these offences have involved me asking for them to give me oral sex and in doing so[...] because I have enjoyed watching them as they were giving me oral sex[...] me ejaculating to their mouth”*

N2

The rehearsing would also, for participant N2, involve securing an alibi.

*“I had no intention of going home I told him I had [...]so if there is an offence that happened and it's picked up by the radio or the news or whatever he would think' oh it can't be [me], he is down the [area's name], so there is a level of planning. The other time I told [him] I was going to [name of the city] so I made my excuse to him [...] that is quite deliberate because [name of the city] then was opposite direction where I was going”*

N2

However, consistency also emerged in the absence of rehearsal. The participants would not consciously rehearse some part of their offence as they did not prove to be problematic in the past, for example the way of entering the building.

All four participants also discussed modifications to their behaviour in subsequent crimes following rehearsal. This was either due to developing interests or wanting to improve the effectiveness of their plan:

*“My first victim was someone who was in a wrong place in a wrong time. The only thing I hadn’t planned was who my victim was going to be. But after this offence straight away [...] I am already planning the offence that happened four weeks later. I am angry that I didn’t complete that offence, in terms that I didn’t get to ejaculate [...] I also wanted the victim of my next offence to be very vocal about how much it was hurting [...] I knew exactly who my next victim was going to be”*

N1

The rehearsing would also contribute toward behavioural change when it would include new elements and details added by the offender who planned to act upon new motive or mood (cases N2 and N3):

*“I am going to do something which was very different to the way I thought before ...yeah it was violent before but it was also about pleasing them before [...] this time I only felt rage I just wanted to hurt them”*

N3

**Familiarity.** The third type of planning identified as a theme was labelled as ‘familiarity’. Two participants (N2 and N3) stated that in the process of planning their offences, familiarity played an important role in contributing to behavioural stability across their series. Familiarity could relate to the participant using locations well known to him, victims that they knew of, or weapons that they used in other types of offending that they felt comfortable with (i.e., knife).

*“I actually found an area the first time around and when I got back I went back to the same spot”*

N2

*“it just came all in my head that this person was there and on the same day I went there. I knew of this woman... from previous accommodation that lived there”*

N3

*“Now, I have been carrying a knife since I was 7 so I knew what a knife could do and I knew what sort of power that had and what sort of fear it can evoke and fear has one of two effects - either makes someone run or makes someone freeze”*

N1



## **Attitudes/Beliefs**

The attitudes and beliefs held by an offender are the main component and drive for the processes behind their sexual offending behaviour (Ward, Collie, & Bourke, 2009). The most common cognitions influencing behaviour at the crime scene are those directly supporting the criminal behaviour (e.g., objectification of the victim, blame attribution, entitlement to sex, etc.) (Jones, 2009). All participants identified the crucial and complex role of their personal belief system and attitudes on their offending behaviour. Within this theme, lower order codes emerged that grouped the attitudes accordingly: attitudes and beliefs 'about self', 'about the victim', 'offending', 'police/justice system' and 'the world'. Additionally, the analysis identified those cognitions that corresponded with participants' diagnose of personality disorders. Participants described that external circumstances led to the activation of different attitudes, for example on occasions where one of the offenders approached a very attractive victim, he would think about the incident as 'having sex' which the victim 'enjoyed' (as opposed to trying to 'prove I am a man' which underpinned his other offending behaviour). This shift in thinking was accompanied by shift in behaviour, e.g., trying to kiss the victim. Although behavioural variation influenced by attitudes was present, persistent attitudes more often were associated with reoccurring behaviour at the crime scenes than with its change. These finding are similar to some hypotheses suggested in the literature (Davies, 1992; Duff & Kinderman, 2008).

**Attitudes and beliefs about self.** This factor, in all four cases, contributed towards stability across their crime series. The way participants perceived themselves

was reflected in their behaviour during the offence, often reinforcing the behaviour as they felt ‘entitled to have sex’, or ‘invincible’. Therefore it would encourage behaviour that they were interested in. Attitudes also justified their offending behaviour and maintained their engagement in criminal activities.

*“I knew what I wanted on the second one and I didn’t give a shit about this and the consequences. I can get away with anything”*

N2

*“I think that I was just so insecure... I behaved in such a way because I never felt worthy and I never felt that it would last. Because you are not the nasty and horrible person really in your heart... you make sure that this person will get home safely or whatever”*

N3

**Attitudes and beliefs about the victim.** All participants explored their attitudes towards their victims in interview. These beliefs had a significant impact on their approach to their victim as well as the way they interacted with them throughout the whole series. In most cases it contributed towards behavioural stability.

*“I knew that they will reject me so I started twisting that into well if I take it they can’t reject me then because they can’t say no”*

N1

*“I have kissed the girl and she thinks [...] she feels special [...] young girls were up for it [...] and I believed that the female body was built in a such a way that was no matter if you started putting your hand on the third base long enough, they will eventually just say OK”*

N2

In some cases participants acknowledged individual differences between their victims. The attitudes activated by the offence subsequently varied depending on the circumstances and victims' characteristics.

*“I was quite racist against primarily black people [...] what she expects? It is 11 o'clock in night, she is walking through the dark alleyway, she is alone, she is black”*

N2

*“That was the whole thing around her circle of friends. Any girl who had had vaginal sex was dirty... was not worth anything [...] so using that against her”*

N1

**Attitudes and beliefs about the offence.** All four participants discussed their attitudes and beliefs about their offending behaviour that for all of them had remained consistent throughout their criminal history. Their attitudes related towards sexual assault justified their behaviour and minimised the consequences of their actions. These attitudes reinforced their beliefs leading them to re-offend.

*“I am just going to have sex with you I have never seen that as a rape. I always seen it being a little bit pushy”*

N4

However, attitudes and beliefs also contributed towards behavioural change, when cognitive-affective units (Eaton et al., 2009) associated with specific situational circumstances held by participants were activated by psychologically different events (for example, participant N2 often referred to rape as perceived intimate intercourse which was not consistent with his need for ‘more violent rape’ as way of ‘proving his masculinity’ that followed an incident of him feeling humiliated). This highlights the dynamic, multilayered and complex nature of the cognitive frameworks.

*“prove that I am masculine the idea in my head for proving that I am a man was to force myself on a woman, this will prove it, this will prove it “*

N2

**Attitudes and beliefs about the police and justice system.** Two of the four participants (N1 and N2) discussed the role which their attitudes about police work and the justice system played in their offending behaviour. This theme related to their awareness of the potential consequences of offending and it contributed towards both behavioural stability, as well as change across their series.

Perceptions of the police’s ‘inadequate investigative work’ contributed towards increased confidence and therefore some level of behavioural stability in both cases.

*“After committing the first offence and not being caught in some ways I didn’t care because there was no way I was going to get caught. They couldn’t catch*

*me for the first one so they will not catch me for the second, I just carry on...the same way...doing what I was doing all the time [...]I am not going to be stopped”*

N2

Moreover, with time both participants reflected on their concerns about the inevitable consequences of their actions resulting in feeling that ‘they have nothing to lose’. In both cases this led to escalation in their violence and more reckless behaviour. Hence, it introduced some behavioural inconsistency at the crime scene related to that. However it also reinforced his repertoire of behaviours (e.g., he continued with similar ‘approaching the victim’ method, ‘leaving the crime scene’ and ‘making sure that the victim will get home safely’) which inevitably led to being captured by the police.

*“So they had a DNA reference... so I would be caught straight away. I thought [...] oh fuck this. If I get caught I am going to prison for life, I have just committed a rape you know and therefore I will do as many offences as I can, because I am going to prison for life. I have been in prison before, so the chances of not getting the life sentence were minimal[...]is the saying I’d rather be shot for a lamb... no for a sheep than a lamb, the saying, you know, that is how I felt so I stopped being careful and did what I wanted”*

N2

**Attitudes and beliefs about the world and other people.** Finally all participants identified that their attitudes about the world (rules, expectation about life), other people (how they think and behave) reinforced and maintained their offending behaviour. These cognitions justified their actions and placed them in the more general context of

life. These attitudes were stable across their offending history and, as would be expected, had a strong association with previously discussed cognitions.

*“I am going to take what I want. Nobody gives a shit about me..I was so angry with the world and myself and everything else ... “*

N3

*“I tend to give myself permission to think that and very masculine way to behave.”*

N4

***Attitudes and beliefs associated with personality disorders***<sup>3</sup>. The study was conducted with a sample of individuals that met the criteria for diagnosis of personality disorders. Given that the symptoms of different personality disorders (e.g., borderline and antisocial) within the same cluster B are very similar (e.g., impulsivity), attitudes which can be linked with these disorders were identified without clustering them into specific types of disorder (Ullrich & Marneros, 2004). All four participants' attitudes corresponded with their diagnosis and in all four cases these attitudes were stable throughout their lives, contributing to stability in their offending behaviour.

*“I thought that I am a romancer, somebody that is clearly attractive [...] Mr ‘God’s gift’ for women”*

N2

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<sup>3</sup> The links to individual's diagnoses were omitted in order to protect the participants' identities.

*“I will take what I want, I didn’t really care [...] I didn’t care, because I wanted to rape her. I don’t care about the law, fuck the law”*

N3

## **GENERAL DISCUSSION**

The aim of this study was to conduct four in-depth interviews with detained individuals who had committed two or more sexual offences in order to gain a better understanding of potential factors that could reinforce consistency in their offending behaviour or produce change across their series of sexual crimes. The principles of template analysis were followed (King, 2004) and the analysis of interviews resulted in identification of numerous factors that participants characterised as influential in regards to their offending behaviour.

These influences of recognised themes had both short (applied to one, or two offences) and long term (influencing the rest of offender’s series) effects. Two higher order themes were identified: situational (external) and personal (internal) factors. Analysis of the transcripts highlighted the importance of a holistic approach when analysing the above findings, as the categories seemed to complement each other (Duff & Kinderman, 2008; Sorochinski & Salfati, 2010). As it has been stressed previously, the interpretation of isolated items may focus only on a fraction of ongoing processes leading to a distorted understanding of their full meaning (Pino, 2005). Nevertheless, before presenting the dynamic relationship between themes, it is crucial to discuss each higher level theme in a more structured manner.

### **Situational Factors**

The analysis of situational factors suggested that their highly contextual nature could be associated with either behavioural consistency or change (Davies, 1995; Eaton et al., 2009). The ‘third party interruption’ and ‘the presence of co-offender’ seemed to be the only factors that within the studied sample were solely responsible for introducing behavioural change. It seems that the presence of another person introduced a level of unpredictability and lessened the offender’s control over a situation, as well as introducing significantly different, less personal aims of the offence. The findings stressed that the impact of situational factors on crime scene behaviour is highly individual, as they also depend on the personal factors that give them meaning. This complex relationship between situational factors and the behaviour displayed at the crime scene has been previously highlighted in the literature (Beauregard et al., 2007; Davies, 1992; Grubin et al., 2001; Sorochinski & Salfati, 2010; Woodhams et al., 2008). Some of the situational factors described by participants contributed to stability in offending behaviour for only a limited period of time (i.e., only observed in offences committed over a short period of time). This finding is consistent with the previous suggestion about the general tendency in an offender’s behaviour to evolve as a result of external circumstances, i.e., features such as victims’ characteristics, and reactions, or the environment, that do not remain identical across offences (Lundrigan et al., 2010; Sorochinski & Salfati, 2010).

Interestingly, for offenders whose offending was related to their employment or social network, changes in behaviour were also caused by changes to their current life circumstances (e.g., losing a job, a change of address, being detained). Moreover, the participants who utilised their employment in their offending behaviour displayed a tendency to use this resource in their future crimes even if there was an actual change in



type of employment. The role of the social network was similar even if not socialising with exactly the same people, they would still choose people to socialise with people who would facilitate, to some extent, access to victims (for example ‘mixing’ with much younger people).

The analysis also highlighted the limited insight that participants had into the consistency of their choices regarding crime scene location. It seemed that all four offenders preferred to choose location they were familiar with, as it has been suggested by the literature (Beauregard et al., 2005; Beauregard et al., 2007). Any significant change in participants’ choices of environment, or victims, would usually be caused by their experience or a change of mood/motive (Declercq, et al., 2012; Sorochinski & Salfati, 2010). This once more emphasises the strong and dynamic connections between situational and personal factors. In the four cases studied elements of the situation remained the same when they proved to be effective, desirable, or simply did not cause any problems in achieving the offender’s aim. For example, the victim’s decision to ‘fight’ could lead to consistency if this element played a crucial role in the offender’s sexual fantasy and rehearsal. Of course the same reaction by a victim could change another offender’s MO, for example, one participant reported that he would stop when the victim clearly displayed her resistance (Eaton et al., 2009; Sorochinski & Salfati, 2010).

## **Individual Factors**

The second higher order theme was related to the offenders’ ‘personal factors’. The relationship between thoughts, feelings and behaviour has been widely and thoroughly investigated by the literature for a prolonged period of time (Butler,

Chapman, Forman, & Beck, 2005; Schaffer, Jeglic, Moster, & Wnuk, 2010; Ward & Beech, 2006; Yates, 2003). The external stimuli or conditions located within the higher-order “situational” theme always related to personal factors which placed them in a context of offender’s personal meanings.

For each participant there was a slightly different combination of personal factors that repeatedly influence their behaviour. Although these individual combinations would include more or less the same themes, they differed in the degree to which each of components seemed to impact on the offender’s conduct. For example, participants’ understanding and experience of planning, personal attitudes, or influence of sexual fantasy were very diverse. These individual differences highlight that behavioural aspects displayed by offender at the crime scene have a specific meaning to the attacker, not necessarily comparable with the meaning that they would have for the victim or a person investigating the crime (Grubin et al., 2001).

As previously stated, the personal themes seemed to be strongly related to each other, for example sexual fantasy and mood. The nature of their fantasies and its relationship with their behaviour differed due to individual characteristics, such as social skills, intelligence, and impulsivity. The participant who appeared to have higher level functioning described how his fantasies drove the complex and detailed process of planning the crime, as well as regulating his emotions (Gee & Belafastov, 2007), whereas the other individual was not able to methodically plan his offence, had unrealistic expectations from the offence, and was not able to consider situational factors prior to the offence. Participants also discussed how a significant change in mood would activate a relevant fantasy. It has been suggested that with time fantasy can evolve due to experience, escalation of anger and confidence, as well as offender’s

creativity and more specialised interests (Gee & Belafastov, 2007; Sorochinski & Salfati, 2010). This process was also reported by participants in this study. Some offenders stated that they came to the point where their fantasies were simply not realistic, nor possible to be acted upon.

The most prominent moods/motives recognised by offenders as influencing their offence behaviour were anger (e.g., vengeance, frustration, etc.) and desire (e.g., sexual frustration, seeking intimacy). As supported by the literature the offenders' mood was strongly associated with their personal attitudes and beliefs (Barnett, 2010). For example, blame attribution and vengeful thinking would trigger strong emotional reactions in participants and influence their behaviour at the crime scene. The relationship between stable attitudes and corresponding moods/motives reinforced similar behaviours in a sense that whenever the offender was experiencing parallel cognitive-emotional states, he would act in a very similar manner (Grubin et al., 2001). This finding is supported by the previously cited CAPS theory which stresses the role of individual's established cognitive-affective representations in behavioural consistency across time (Eaton et al., 2009; Mischel & Shoda, 1995). This is also consistent with the literature suggesting that external circumstances could lead to the activation of different attitudes, for example on occasions where one of the offenders approached a very attractive victim (perceiving rape as 'having sex', as opposed to trying to 'prove I am a man' which underpinned his other offending behaviour) (Davies, 1992).

Interestingly, the analysis of participants' interviews suggested that an extreme change in acute emotional state could lead to very different behaviour at the crime scene. However, once the specific circumstances disappeared or their mental state changed, they would return to their previous behavioural patterns driven by previous

motive. This seemed to be consistent with literature that suggests that sex offenders use their offending as a 'problem solving' or 'coping strategy' for various problems and difficulties (Ward & Beech, 2006).

Offending behaviour was linked to the offender's perception of himself, the victim, the police and justice system, as well as rape and general core beliefs. One of the factors that shape our understanding of the world and other people is experience (Bellebaum et al., 2012; Hawke & Provencher, 2011). The extent to which experience impacted on behaviour depended on individual's ability to relate to his past experience and use it in order to enhance his satisfaction from the crime, or avoid consequences of his actions. Although past experiences could influence both stability and change in the offender's behaviour, it seems that memories of being victimised were more likely to encourage stability (e.g., introducing some element of their traumatic experiences to their own crimes), whereas the 'experience of abusing others' seemed to be more often associated with behavioural change. However, it seems that this relationship is complex.

Corresponding to the fantasy theme, the individual with sadistic interest that displayed great need for control would invest a considerable amount of time in planning all aspects of the offence. Out of all of the participants, only this individual consciously engaged in reconnaissance (i.e., following the victim in order to learn about her daily routine, scoping the local area in order to find all escape routes). Although other participants appeared to incorporate some elements of reconnaissance in their planning (e.g., stalking the victim on one occasion, scoping for the potential location), in general, they would engage more often in rehearsal of the offence or have a preference for highly familiar situations (a victim they know of, a location they have used before). It seemed that individuals were quite consistent in their preferable method of planning

which is consistent with current literature (Beauregard et al., 2007). It has been observed that this familiarity was important for the offenders and seemed to result in a greater level of behavioural stability (Hazelwood & Warren, 2004). All four participants reported that planning of the next offence, would start very soon after the last offence they committed. For some individuals, as soon as they left the crime scene.

In addition two participants disclosed that their physiological reactions (i.e., erectile dysfunction and premature ejaculation) also impacted on behaviour at the crime scene, understandably introducing change.

### **Attributes of Factors Associated with Behavioural Stability and Change**

The above discussion has already emphasised the importance of a holistic approach to the interpretation of offenders' behaviour (Eaton et al., 2009; Mischel & Shoda, 1995; Pino, 2005). Understanding the dynamic relationship between the above described factors can improve our predictions relating to offenders' decision making processes; develop better methods of identifying the offender and distinguishing him from other individuals; as well as developing even more effective treatment plans. However, before discussing the functional links between various elements, it is equally important to look into the characteristics of situational and personal factors that are responsible for either stability or change in sex offending. The analysis of the transcripts highlighted that offenders have different levels of awareness of external or internal elements associated with their criminal behaviour, which were different in each case. The presence of these factors is sometimes essential for the offender to carry out the offence, sometimes they are circumstantial, or added by the offender in order to improve satisfaction or sexual gratification (e.g., introducing elements of their sexual

interest) (Hazelwood & Warren, 2004; Sorochinski & Salfati, 2010). The offender may not be fully aware of the specific circumstances that triggered his behaviour which may contribute towards behavioural stability across his series (in the presence of similar circumstances, as he would not attempt to consciously change them). The aspects that the offender was not fully aware of, could involve certain habits that the offender displayed at the crime scene. At the same time there are other factors which are fully acknowledged by the offender. Some of them are necessary for achieving the aim of the offence (for example, effective method of gaining control over the victim), others or not essential (e.g., specific sexual behaviours or desirable interaction with the victim) (Hazelwood & Warren, 2004). Better understanding of these factors and the offender's insights into these could improve the understanding of the offender's profile and his crime scene behaviour, as well as improve investigators' predictive abilities. The further study of these factors is needed, in order to gain better insight into the dynamic between them and the degree of their flexibility and responsiveness to other factors.

### **The Model of Behavioural Influence within a Single Offence**

The literature highlights that in order to gain in-depth understanding of offending behaviour and factors responsible for its stability or change it is important to analyse them in the wider context of the crime (e.g., take into consideration the Cognitive-Affective Personality Systems and the Criminal Events Perspective) (Eaton et al., 2009; Mischel & Shoda, 1995; Pino, 2005). The results of the current study correspondingly emphasised the need for a holistic approach when analysing offenders' behaviour at the crime scene. As a result of this study a model of behavioural variance within a single offence was proposed (see Figure, 2).

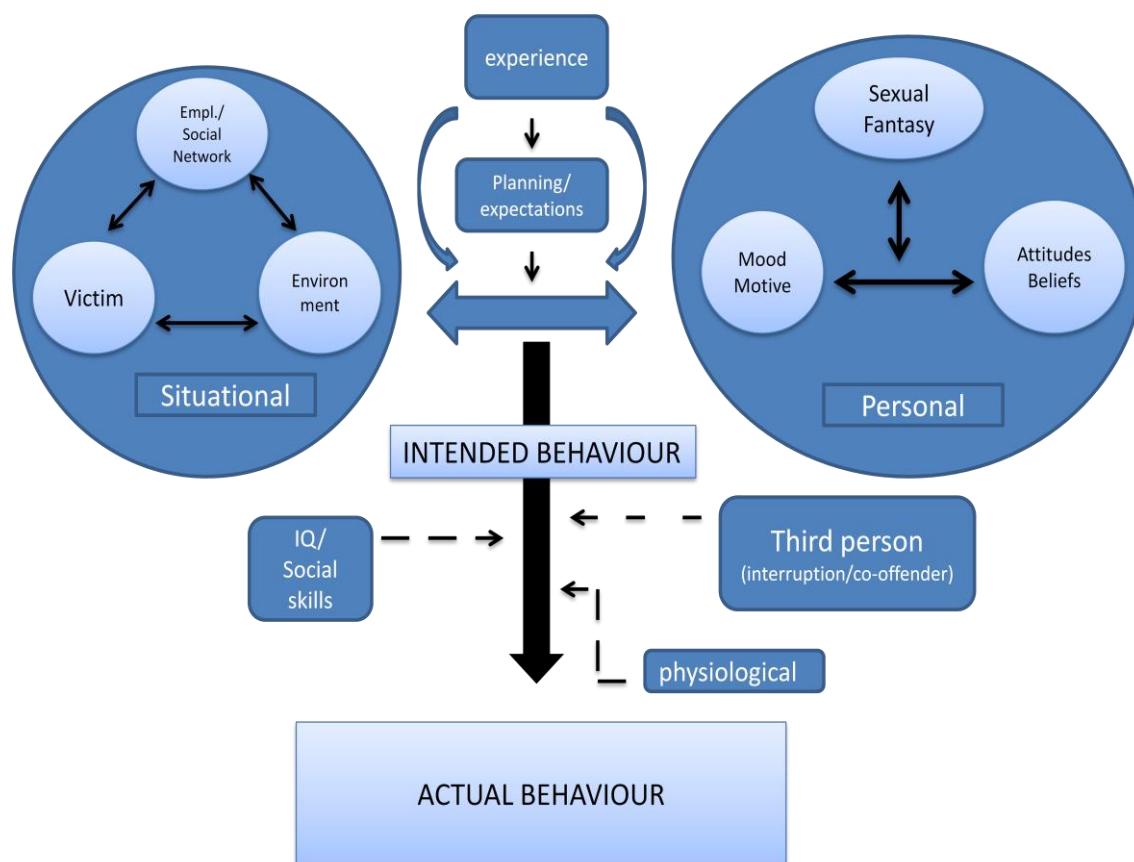


Figure 2. Model of behavioural influence within a single offence (MO).

The associations between mood/motive and cognitions can activate a relevant fantasy. These personal factors affect the offender's way of perceiving, reacting to and interacting with situational factors. It is also important to state that, in turn, the situational factors, like the victim or environment, can shape the dynamic of personal factors (e.g., they can trigger a cognitive-emotional response, modify attitudes through experience). That complex dynamic is additionally modified to some extent by the offenders' prior expectations of the crime due to planning and their personal experience.

However, the degree to which these would impact on the intended behaviour can be affected by personal and social skills, intelligence as well as other unexpected circumstances, such as third party interruption or physiological dimension (i.e., erectile dysfunction). A better understanding of this dynamic between all situational and personal factors and ability to apply this to individual crime would result in a unique profile of the offender that would help to understand the complexity of the crime scene behaviour and which may assist in making connections across series of offences.

Due to numerous elements that reinforce the evolution of offending behaviour such as experience (Davies, 1992; Sorochinski & Salfati, 2010) the model does not apply to the whole series of crimes but focuses on a single event. The above model highlights the importance of a personalised approach towards interpretation of situational and personal factors (Pino, 2005). The results of this study would also suggest that due to various factors it is impossible to propose distinctive types of offender, as proposed previously by the literature (Craig et al., 2008; Declercq, et al., 2012; Greenall & West, 2007). It seems that serial sex offenders can be driven by different motives across their series of crimes, or within the same offence, which not only can significantly influence their behaviour but additionally suggests that most of them would meet the criteria for more than one type (Beauregard et al., 2005; Declercq, et al., 2012). Hence it would have impact on the utility of a fixed typology.

**Practical application of the model.** The above model is presented as an initial template that can be adapted to individual cases in order to create a personalised profile of an offender. The model provides an opportunity for professionals analysing the sex offender's behaviour to organise data in order to identify relevant, influential factors for a particular offender. This also provides a visual representation of individual



differences between sex offenders with regard to factors that contribute to their behavioural stability and/or change. In order to illustrate this, the model was applied to all four participants of this study and is discussed below. In each case, only factors which were identified as greatly influencing the stability or change in the individual's crime scene behaviour were included in the model.

*Application of model to participant N3.* In the first case, (N3) the participant's personal factors (his mood and attitudes relating to sexual desire or anger) greatly influenced his offending behaviour. Although, he reported fantasising about his offences, the content of these fantasies was not always reflected in his crime scene behaviours (due to his social and intellectual abilities, as well as unrealistic expectations, e.g., pleasing the victim). His planning was mainly based on his familiarity with his victims (his previous knowledge of the victim) and the location where the offence would take place (i.e., victims' apartments). Therefore, the choice of the victims and the crime location were quite consistent across his series of crimes.

Although, the third party interruption, or the victim's reaction had an impact on the outcome of his offence, these experiences did not alter the modus operandi of his further offences. The changes in his offending behaviour were usually influenced by the victim (either her reaction or her condition), or the change in his mood (motive). It is important to note that his sexual fantasies were present prior, during and after his offending, and their content was always consistent with his mood. However, the actual behaviour at the crime scene was often modified by the victim's reaction or the environment (for example, during the offence he used various items that were present at the crime scene).

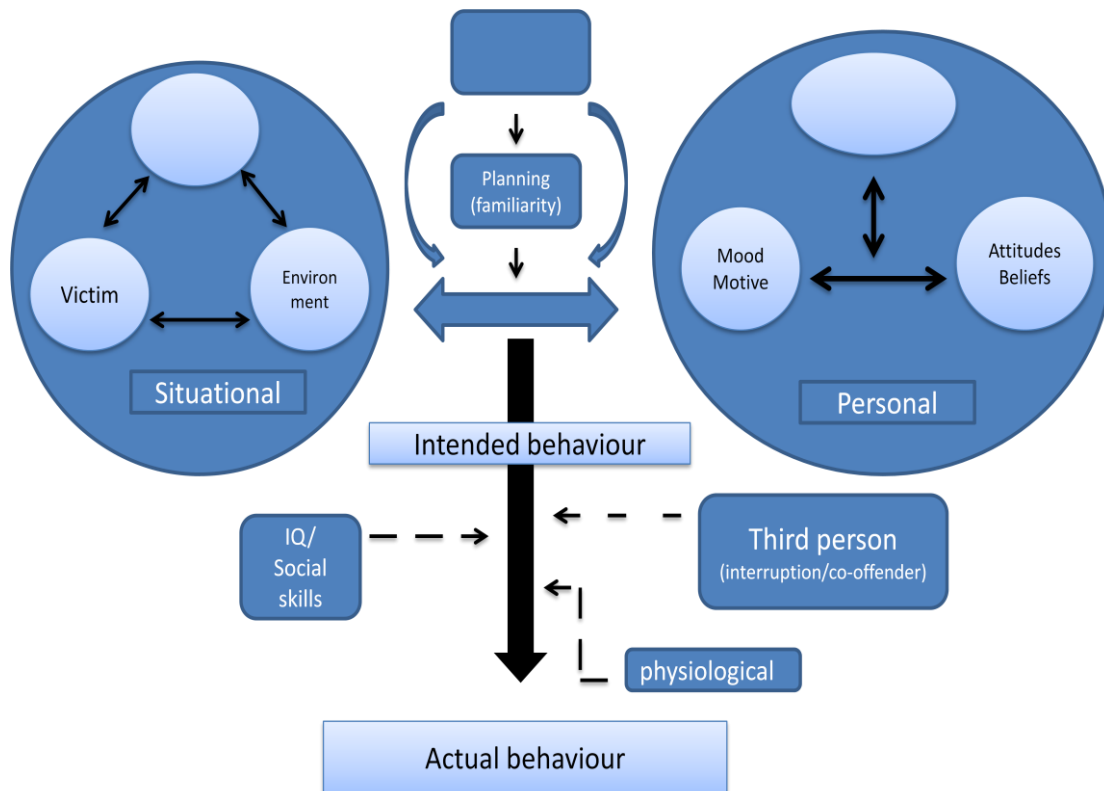


Figure 3. Model of behavioural influence within a single offence (MO) applied to a single case (N3).

*Application of model to participant N1:*

The dynamics between the situational and personal factors look different for participant N1. In this case, the triad of sexual fantasy, mood/motive and attitudes/beliefs were strongly related to his vengeful thinking and sadistic sexual interests and these heavily impacted upon his behaviour during the offence. His planning was very detailed and incorporated his previously learned skills and knowledge (for example, about the limitation of the locations, victim's characteristics, etc.). His sexual fantasies were very detailed and played an important role in the rehearsal of his offence. Therefore, this individual often implemented details of his

sexual fantasies into his behaviour at the crime scene. As described by him, the level of violence in both his sexual fantasies and his offending behaviour were escalating.

Moreover, he stated that he felt his behaviour could have culminated in him committing a sexual murder. The social network factor or employment seemed irrelevant in his case. However, this offender focused on thorough investigation of the location of his crimes which led to him altering his behaviour depending on the external circumstances.

Although, in one case he targeted a specific person, his series of crimes proved that the victim and her reactions were less likely to impact upon his crime scene behaviours. He described how he would prepare for all potential reactions from the victim (a fighting or compliant victim). Moreover, in one case where he could not offend against the victim of choice, he would select a random victim and use her to obtain his primary goals.

The mood (or motive) factor in this case impacted on his behaviour to some extent, focusing on either vengeful thinking that would aim to humiliate the victim, or the sexual desire that would mainly aim to cause the pain. However, this introduced consistency in his modus operandi, as regardless of his motivation for the offending, he would consistently aim to inflict physical and emotional pain on his victims. For this individual, the experience of his previous offending was contributing towards the modification of his crime scene behaviour (for example, after being interrupted by a third party he changed his preferred environment from outdoors to indoors).

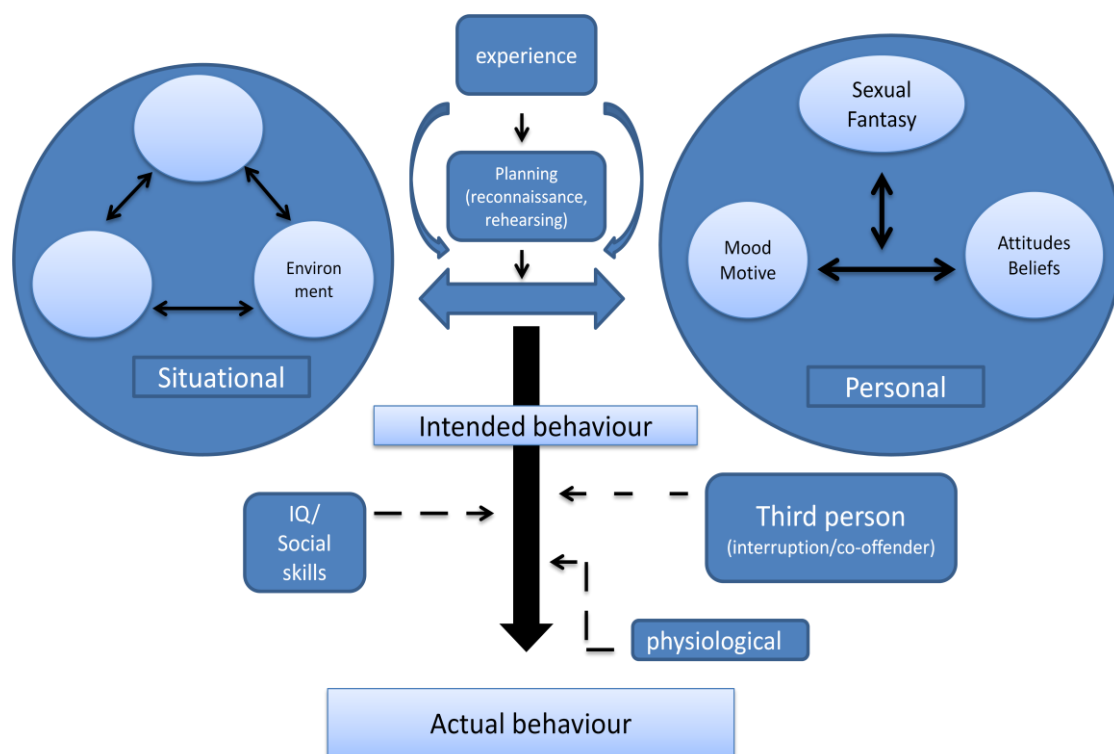


Figure 4. Model of behavioural influence within a single offence (MO) applied to a single case (N1).

**Application of model to participant N2.** In the third case (N2) the compulsivity of his offending behaviour created a pattern that emphasised the importance of certain factors for this individual that were most likely to impact upon his behaviour at the crime scene. His numerous crimes suggested that within his personal factors sexual fantasies were not influencing his behaviour at the crime scene. His preoccupation with sex, his grandiosity and feelings of entitlement often resulted in him perceiving his offences as romantic encounters. Therefore, the reaction of the victim was a crucial aspect in his behaviour (for example, in cases where his victims strongly resisted and fought back he would not carry out his offence and he would abandon the victim). Moreover, in his case his social network and his employment also seemed to be important, as most of the times these factors facilitated access to his victims. This

individual would often plan some elements of his offence (for example, the location, time, and alibi). However, he would also act on an impulse, or in an opportunistic manner (e.g., depending on the availability of a victim). Nevertheless, during all his crimes he would often engage in very similar sexual behaviour. As with participant N3, a significant change in his mood would lead to a change in his modus operandi. In offences where his motivation was more related to his anger rather than sexual desire, he would introduce elements from his experiences of his own abuse to the modus operandi.

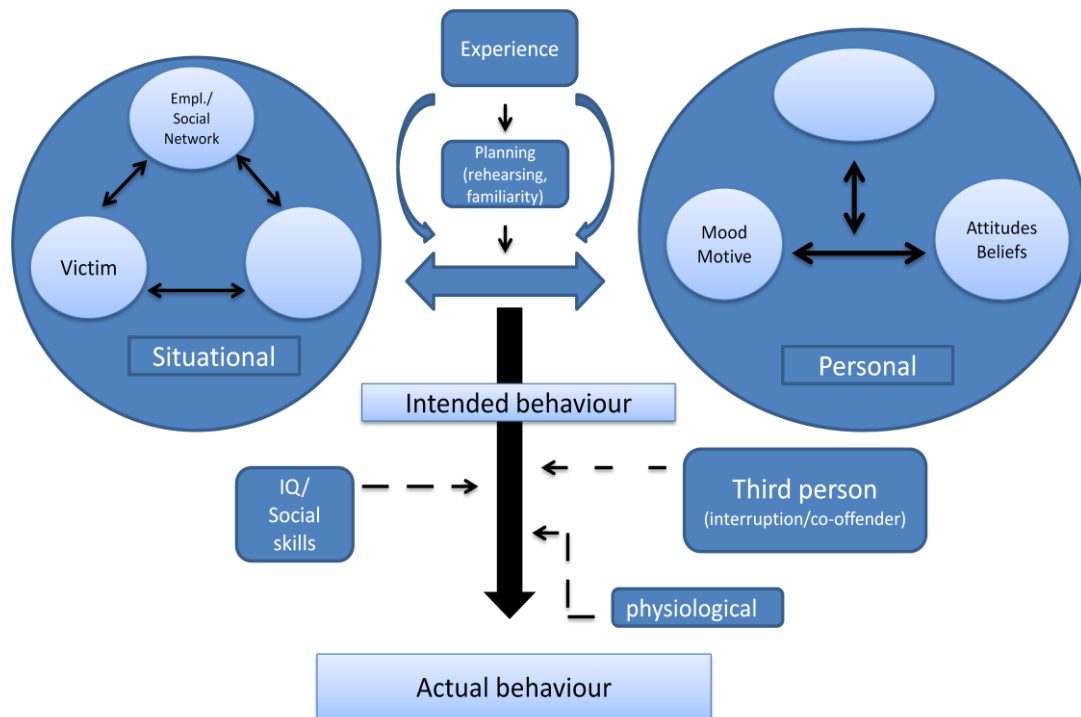


Figure 5. Model of behavioural influence within a single offence (MO) applied to a single case (N2).

*Application of model to participant N4.* Finally, for the fourth participant (N4) his sexual fantasy had a fulfilling role, where he would create his different personas in order to feel accepted and desired by women. His fantasies therefore played an important role in rehearsing his offences. However, this introduced an element of diversity in his approach which meant he needed to modify the scenario for each victim (for example, offering a job opportunity, posing as a person of authority, etc.). Nevertheless, this would also produce similarities in his modus operandi relating to his planning of the approach towards the victim in order to gain her trust, or the location of the offence (i.e., isolated place). Although, in each case his victims reported the crime to the police which resulted in him being prosecuted, this did not alter his offending behaviour.

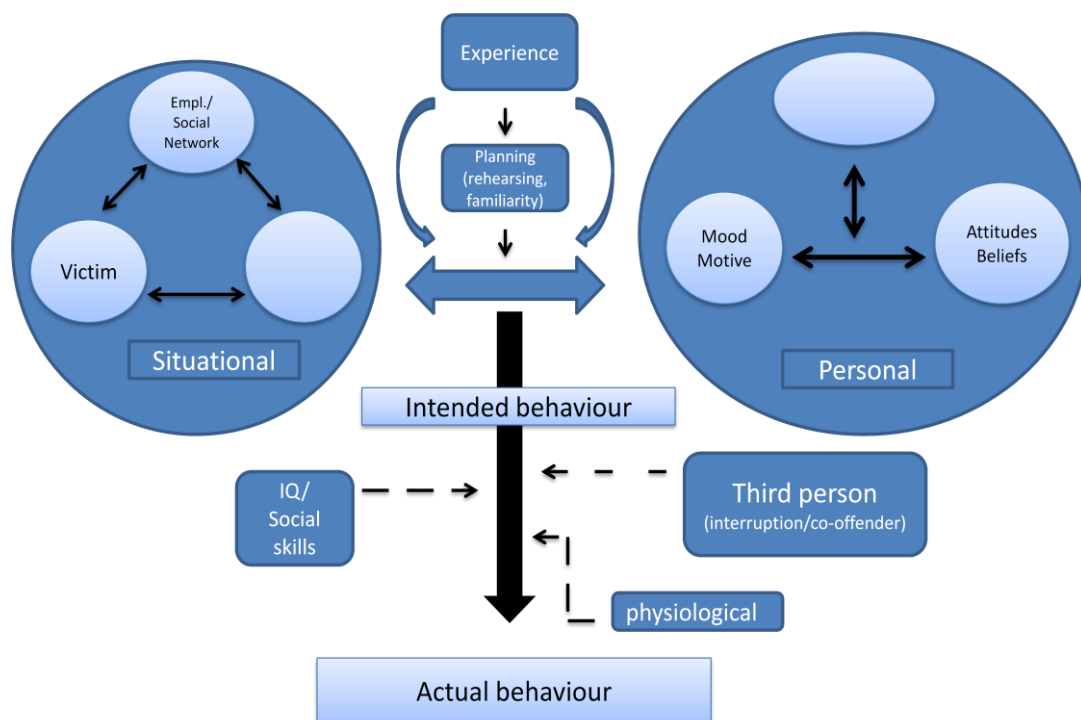


Figure 6. Model of behavioural influence within a single offence (MO) applied to a single case (N4).

*Summary of application of the model.* As illustrated in the above four cases, individual differences in personal and situational factors can potentially influence an offender's modus operandi. However, in order to fully understand the dynamic between these factors it is important to acknowledge the nature of changes that could occur across a series of sexual crimes. These changes can have either short, or long term, consequences. These are addressed in the following paragraph.

### **Escalation of the Behaviour within the Series**

The analysis within the current study identified three main reasons for an escalation in the level of violence or frequency of offending. However, this list is not exhaustive and the complexity of the evolution of behaviour would suggest great individual differences in this population (Maniglio, 2010; Sorochinski & Salfati, 2010). Nevertheless, escalation in offending behaviour was accompanied by increasingly more 'reckless' behaviour, specified as circumstances where the offender was engaging in more risky acts (Gee & Belafastov, 2009). These escalations in anger and growing confidence were closely related to attitudes or beliefs that the offender was invincible (e.g., 'they won't catch me') or he had 'nothing to lose'. Two participants described feeling very anxious at the beginning of their offending career. They also acknowledged their growing confidence with time (Sorochinski & Salfati, 2010). In two cases participants reported the presence of a co-offender during their initial offences. In both of these cases the offenders related to the confidence or diminished sense of responsibility that was present at the time of this offence.

Additionally, the evolution of a *modus operandi* was related to an offender's recognition of their personal preferences and sexual interests. The more confident and experienced they became the more likely they would include preferred behaviours (Maniglio, 2010; Sorochinski & Salfati, 2010).

**‘Evolutionary’ versus ‘reactive’ change in sex offending behaviour.** The finding of this research highlighted that the offending behaviour of serial sex offenders can be characterised by both stability and change. However, these levels of stability and change can also be influenced by various factors that can differ in each case. Moreover, it is possible to recognise two types of change that can occur within a crime series throughout time. The first one is gradual and can be associated with an offender's growing experience and knowledge, developing more specific interests and goals, and it could be referred to as ‘evolutionary’ change (Gee & Belofastov, 2007). Often these changes seem to be less radical and they would still incorporate the main features of previously displayed behaviours (for example, the offender may decide to change the location of the offence, as he has been interrupted by the third party, however he would engage in similar behaviours at the new location). The other type of behavioural change identified during this study was more acute change (‘reactive’ change) that was characterised by sudden and more radical change due to a sudden shift in their emotional state (for example, offenders would react to unexpected circumstances that have a traumatic, personal connotation for him, by introducing more violent and extreme behaviour that they did not engage in previously).

These two types also seem to have a different impact on the offender's behaviour in the long term. The evolution of this behaviour would be slower and less extreme than the reactive changes. However, according to the participants' accounts the ‘reactive’



change tended to be short lived and when the circumstances that triggered the ‘reactive’ change were no longer present the offender tended to return to behaviours consistent with his previous *modus operandi*.

## **Personality Disorders and Behavioural Stability**

All participants included in the research met the criteria for more than one personality disorder, which are characterised by pervasive and persistent patterns in cognitive-emotional functioning reflected in problematic behaviour and which affect numerous areas of individual’s life (APA, 2004). This would suggest that the pervasiveness and persistence of cognitive distortion as well as emotional functioning would produce behaviour that should be more stable and less flexible (Buschman & Beek, 2004; Nysaeter & Nordahl, 2008). The observations from the interviews supported these assumptions. Although, emotional and cognitive functioning was not solely responsible for the stability of behaviour across an offender’s series, they did seem to encourage similar acts in similar circumstances.

The question arises about the relevance of the study to the more general population of sex offenders, as the studied sample consisted of offenders detained under the Mental Health Act (1983) in high secure hospital due to their risk and diagnosis of personality disorders (APA, 2004). However, investigations of the general population of sex offenders have found a high prevalence of personality disorder (Craissati, Webb, & Keen, 2008; Jones, 2009; Ullrich & Marneros, 2004). Currently, it is unclear to what extent personality disorder is functionally related to sexual offending (Duff & Kinderman, 2008; Marshall, Marshall, Serran, & Fernandez, 2006). From the analysis of the interview transcripts attitudes were identified that corresponded with the

participants' personality disorder diagnosis (i.e., antisocial, borderline, paranoid and narcissistic). Participants' cognitions about self, the world and the offence appeared to be relatively inflexible influencing their behaviour throughout a series. Shifts in behaviour attributed to a different belief or attitude seemed to be associated with growing experience, or due to specific circumstances of an offence which activated different attitudes, potentially associated with different cognitive schema (Jones, 2009; Nysaeter & Nordahl, 2008). For example, in the case of the offender who was driven by vengeful thinking, his racist attitudes were used to justify his crime. However, when he attacked a victim who he was attracted to different attitudes were activated that related to his grandiosity and beliefs about him 'only having sex'. In the first offence his behaviour would be more forceful and he depersonalised the victim, whereas in the second event behaviours such as kissing, hugging, apologising were displayed.

All four participants scored above the UK cut-offs for the criteria for psychopathy, i.e., 25 (Olver & Wang, 2006; Semple, 2005). A high prevalence of psychopathy, within samples of detained sex offenders has been reported (Craissati et al., 2008). However, due to insufficient information (i.e., researcher was only able to obtain the general score) and complexity of this construct, the nature of the relationship between psychopathic traits and behavioural stability and change could not be investigated. Further research focusing purely on psychopathy and its influence on crime scene behaviour could be very valuable, as it has been suggested that it has an impact on the type and severity of violence (Jones, 2009; Skovran, Huss, & Scalora, 2010).

## **Participants' Presentation at the Interview**

The interviews conducted with the four participants covered sensitive and difficult topics. However, the information provided by patients was very valuable as was observation of their presentation and interaction with the interviewer.

All four participants tried to control the direction of the interviews (e.g., by not answering the question, or redirecting their answer to irrelevant events). Therefore, interviews had to be flexible and many prompts were used in order to focus the conversation on to the relevant topic. Participants became more open with time, when the confidentiality and potential consequences of participating in the research were clear and acknowledged. Hence the interviews involved more than one session.

Only one participant who discussed his particularly sadistic interests appeared to have insight into his offending behaviour. He was quite clear about his motivations, decision making processes, as well as open and willing to share all details of not only his offences but his sexual fantasies. The rest of the participants seemed to have limited insight into their offending and were not as willing to share their experiences. It was the interviewer's impression that they were attempting to portray themselves in more favourable light. All participants had difficulties with recognising their behavioural consistency and all of them expressed their belief that they were not engaging in repetitive acts. Their accounts indicated, however, that they did engage in consistent behaviour. The interviewer was not able to determine whether the participants were truly unaware of their behavioural consistency or if they did not wish to be portrayed as predictable. Limited insight into their behaviour, as well different understandings of certain concepts (e.g., planning) also led to inconsistencies in their accounts. For example, one participant would say that he had never planned his offences, only to state

later that he was wearing a uniform from work so he would not raise any suspicion, as well as knowing his victim, where she lived and whether or not she would be alone.

## **Limitations**

Although, it has been suggested that the small sample size was appropriate for this type of qualitative research (Marshall, 1996), the inclusion of a bigger sample would unquestionably benefit this study. This would ensure that all potentially relevant themes were identified. The research was conducted with serial sex offenders with personality disorders detained in high secure hospital. Therefore, there may be potential differences between this population and serial sex offenders who are detained in lower secure settings or are in the community. For example, offenders serving a custodial sentence may have less skills or adaptive behaviours, than offenders that have not been incarcerated. Therefore a bigger sample that included less disordered or high risk individuals would increase the chances of capturing a more comprehensive range of factors influencing serial sex offenders' behaviours.

Due to issues relating to confidentiality the analysis was conducted by only one person who had access to regular supervision. Therefore it was not possible to address inter-rater reliability of the coding scheme (Smith et al., 2009). The code and themes were however reviewed by the academic supervisor.

Another source of potential bias could be related to the participants' contribution. The of interviews as the source of data relied on offenders' self-report and depended upon participants' honesty, memory, insight into their offending behaviour, and ability to communicate their feelings/thoughts. Additionally, the issues discussed in the previous sections that related to the participants' presentation during the interviews

(engagement, insight, etc.), highlighted other potential sources of bias due to the complexity of the area under study, as well as the studied sample.

The choice of the method of analysis is associated with further limitation of this research. Although 'a priori' themes of the template analysis have many advantages, they also introduce some restrictions, for example, potential risk of missing important aspects of studied area, or biased interpretation of the research findings (King, 2010). In order to address these limitations, the choice of 'a priori' categories was preceded by careful exploration of current literature relating to the area of sexual offending that identified relevant themes. Moreover, these categories only suggested broader concepts relating to sexual offending behaviour (for example, the exploration of sexual fantasies before, during and after a or the sexual offence). During analysis, findings were not simply added to already existing categories, but where necessary, new categories were introduced so that categories were constantly reviewed and modified.

Other methods could have been employed for this research project, for example grounded theory, which is associated with more open and less directive approach towards the interviews (Corbin & Strauss, 1990). However, due to the complexity of the studied area of sexual offending, as well issues relating to the characteristics of the studied sample (for example, participants' changeable level of engagement, their variable insight, their need for control and tendency to focus on issues irrelevant to their offending behaviour), template analysis seems not only practical and appropriate, but inevitable. For example, the interviewer needed to ask about participants' offending history and crime scene behaviour, and not include issues unrelated to the research topics but eagerly explored by participants (like childhood memories, their romantic relationships, their family history, etc.).

It is also important to acknowledge alternative approaches to the analysis of the studied sample. Rather than start from a generic model that incorporates all potential factors influencing crime scene behaviours, the analyses could start with individual case studies. This would allow a better insight into the complexity of individual differences to be gained within the studied sample. However, the use of template analysis gave the initial insight into themes of factors associated with behavioural consistency and change, and provided a guide for the further development of the analysis of individual cases. The aim of this model was to illustrate the dynamics between situational and personal factors and to highlight the necessity of an individualistic approach to crime scene analysis. This approach would address the complexity and diversity of serial sex offenders.

## **Conclusion and Further Directions**

This study provided an insight into personality disordered serial sex offenders' perceptions and understanding of their crime scene behaviours, as well as factors thought to influence this. Prior to this research project, a systematic literature review uncovered a gap in the literature regarding mentally disordered sex offenders. This study provides a review of the existing knowledge on forensic patients who commit sexual crimes. Although there are limitations that need to be considered, the outcome of this analysis suggests numerous implications and suggestions for further work.

The model proposed is preliminary but may potentially have several implications for offender profiling, as well as clinical practice. It could direct the risk management and treatment plans for mentally disordered sex offenders, for example by taking into account wider context of factors that contributed, not only towards the offending

behaviour, but its escalation which could give an opportunity to identify more personalised approach to risk assessments that could be more sensitive to the dynamic between contextual and psychological nature of risk of recidivism.

The main finding that highlight the importance of an individualistic approach to an offender would suggest that the most effective method of investigating the crime scene behaviour would be a combination of methods focusing on the strictly behavioural consistency and distinctiveness, i.e., crime linking (Bennell et al., 2009; Woodhams et al., 2007b); and approaches that are more focused on individual's characteristic, and methodologically closer to profiling (Beauregard et al., 2007; Kocsis, 2007). However it is also important to acknowledge that due to a variation within the series of offences any prediction would not result in perfect accuracy. Further implication for the studies that have a potential to improve the investigative processes focuses on identifying specific behavioural tendencies, for example related to the familiarity factor in relation to employment/social network. Further exploration of this issue could provide crucial information about an offender's potential involvement in previous crimes and suggest investigative strategies for preventing future crimes. The analysis of the transcripts also suggested that offenders engaged in behaviours that they had previously applied in other types of offending they engaged in (for example, burglary). This suggests some potential for across-crime linkage using MO. Similar investigations of factors influencing crime scene behaviour could be applied to other types of serial offending, i.e., murders, burglary, in order to examine what aspects of the environment and the individual influence crime scene behaviour.

The research highlighted the impact of social and intellectual functioning on behaviour at the crime scene. Although there are numerous studies that focus on the

population of sex offenders with learning difficulties (Craig, Stringer, & Moss, 2006; Lindsay, 2002), there is a need for more studies of the general population of sex offenders that do not meet the criteria for learning difficulties in order to establish whether it is possible to identify any relationship. There is a lack of empirical research in the literature that explores the link between IQ and crime scene behaviour.

This study highlighted the heterogeneity of serial sex offenders. The complexity of factors contributing towards offending behaviour suggests that a typology approach to profiling is problematic. A better understanding of the dynamic nature between all situational and personal factors and ability to apply this to individual crime would result in a unique profile of the offender that would help to understand the complexity of the crime scene behaviour and which may assist in making connections across series of offences. Better understanding of these factors and the offenders' insights into these could improve the understanding of the offender's profile and his crime scene behaviour, as well as improve investigators' predictive abilities. Moreover, this study highlighted the complexity of offenders' sexual fantasies and their inconsistent role in offending behaviour. It seems that this complexity needs to be better understood as this could improve the treatment plans, as well as identification of risk and protective factors.

This chapter examined the nature of the behaviour displayed at the crime scene by mentally disordered serial sex offenders. Numerous factors were identified that could potentially play a crucial role in reinforcing certain aspects of offending behaviour and changing others. Among them, sexual fantasy has been identified as possibly one of the most important elements that not only motivates and maintains, but also improves and could potentially change or reinforce modus operandi (Bartels & Gannon, 2011;



Maniglio, 2010). The previous chapters highlighted the need for further research that could help to understand the role of sexual fantasy in sex offending behaviour. The influential nature of these fantasies is unclear and often seems to be indirect, potentially contributing to only a few aspects of the offence cycle (Carabellese et al., 2011; Gee et al., 2004). The measurement of sexual fantasy is very problematic and relies on the self reports. The next chapter looks into Wilson Sex Fantasy Questionnaire, one of the psychometric tests that were designed to measure sexual fantasy (Wilson, 1978). Its background has been discussed along with its psychometric properties.

## **Chapter 4**

### **Critique of a psychometric measure:**

#### **Wilson Sex Fantasy Questionnaire (1978)**

## **Introduction**

The research and literature presented in previous chapters (1 and 2) highlighted the complex and dynamic relationship between numerous factors that have a potential to influence sex offenders' behaviours at a crime scene. One of these factors is sexual fantasy, which is believed to encourage sexual conduct, maintain arousal and preoccupation with sexual offending, as well as facilitate planning or rehearsing the offence (Carabellese et al., 2011; Maniglio, 2010). Therefore, it is important to further investigate the role of sexual fantasies in the offending behaviour, as well as their relationship with other aspects influencing sex offenders' conduct. Consequently it is crucial to identify relevant and appropriate measure that would facilitate further development of this area. This review looks into the Sex Fantasy Questionnaire (WSFQ), a psychometric assessment constructed by Wilson in 1978 (see Appendix VI). The author's aim was to create a standardised measure of sexual fantasy. It is a difficult task to explain the concept of sexual fantasy in a sufficient, clear and concise manner. Therefore, before presenting the Wilson's questionnaire and its use in research projects and clinical practise, it is important to explore issues related to the concept of sex fantasies and difficulties that could be related to their measurement.

### **The Definition of Sexual Fantasy**

It has been reported that sexual fantasies are very common and the majority of the population will experience some form of sexual fantasy (Leitenberg & Henning, 1995). The literature search highlights the existence of many descriptions of what sexual fantasy can involve. Some sources indicate that they are different kinds of mental images that are sexually arousing or erotic to the individual (Ward, Polaschek, & Beech,

2006). Sexual fantasies are also described as either mental representation of past experiences, or images that did not take place (Leitenberg & Henning, 1995). Some authors highlight that the fantasy can take various forms: an extended story, a fleeting thought, or unwanted images and memories that can involve either unusual imaginary, or have realistic elements (Wilson, 1978; Wilson, 1988). For example, they can involve memories, future plans, personal experiences, knowledge and ideas from films, photos, pictures, or books, etc. (Leitenberg & Henning, 1995).

Various studies show that experiencing fantasies is a part of healthy sexual functioning (Carlstedt, Bood, & Norlander, 2011). In the past, theorists like Freud, believed that only unsatisfied people experienced sexual fantasies (Leitenberg & Henning, 1995). Currently it is possible to refute that view. Moreover, it has been suggested that it is unhealthy not to have any sexual fantasies (American Psychiatric Association, 2000; Vanhoeck, Van Daele, & Gykiere, 2011).

The complexity of sexual fantasies depends on the creativity and experience of an individual. The variety and subjectivity of fantasies, as well as the fact that they are very private make it difficult to measure them and compare them in an objective, unbiased way (Hersen, 2004; Wilson, 1988).

The difficulty with defining the concept of sexual fantasy is also related to the distinction between the deviant and non deviant nature of the fantasy. There are many issues around the approach towards the understanding of what exactly are deviant sexual arousal and deviant sexual fantasy; and their relationship with offence related fantasies, as well as their role in offending behaviour (Bartels & Gannon, 2011; Vanhoeck et al., 2011). Deviant fantasies are associated in the literature with paraphilic interests which are referred to as being rather uncommon and generally perceived by the

wider society as unacceptable, as they could involve bizarre and illegal (e.g., non-consensual) elements and be potentially harmful (Gee, Devilly, & Ward, 2004; Leitenberg & Henning, 1995; Williams et al., 2009; Williams, Cooper, Howell, Yuille, & Paulhus, 2009). In order to be classified as paraphilic these interests should also be identified as causing significant distress or dysfunction (American Psychiatric Association, 2000). Therefore, deviant fantasies include acts of sexual assault and rape (Williams et al., 2009).

### **The Importance of Sexual Fantasies and Their Role in Offending Behaviour**

Regardless of the difficulties relating to the understanding of the complexity of sex fantasy, it seems that gaining better knowledge of this concept, as well as sexual functioning in general, could improve risk assessments and clinical work related to sex offending. Our knowledge about the functional link between fantasy and behaviour is still not satisfactory. Not only do sexual offenders seem to experience deviant sexual fantasy but a significant part of the non-offending population (Bartels & Gannon, 2011). Moreover, among those who do offend there is an inconsistency between sexual arousal patterns and their offences (Vanhoeck, et al., 2011).

Nevertheless, many studies recognised that sexual fantasy plays an important role in sexual preferences and behaviour (Bartels & Gannon, 2011). There is a growing body of research which suggests that deviant sexual fantasies promote corresponding behaviours (Williams et al., 2009). It seems that sex offenders who are frequently fantasising about deviant activity are characterised by a higher risk of sexual re-offending (Bartels & Gannon, 2011). It would also appear that these fantasies stimulate development of more deviant behaviour, as well as playing a crucial role in the offence

chain (Ward et al., 2006). There is also research that strongly supports the opinion that deviant sexual preference and deviant sexual fantasies are connected (Schlesinger et al., 2010). Although, it remains unclear to what extent and in which cases fantasies have a potential to be replaced with action, or in which cases they play a role in preparation for later action.

It is crucial to explore the fantasies of an individual who exhibits more unusual behaviour. The nature of an individual's fantasy life may indicate the presence of a paraphilia that could suggest the need for further assessment of the frequency and level of intensity of the sexual fantasies, and potential escalation towards acting out (Baker & White, 2002). The assessments of sexual fantasy should also examine the role of it in reduction of behavioural inhibition, coping mechanism, stimulating grandiosity, as those features could imply the potential link between deviant fantasies and future offending behaviour (Carabellese et al., 2011). Therefore, work with offenders that would focus on identification of deviant sexual fantasies, raising awareness of their link with the offending behaviour and modification or management of those fantasies, is proposed to be a crucial part of sex offenders' treatment (Thakker et al., 2008). At present, most sexual offender programmes recognise this and they include the techniques of modifying deviant fantasies (Carabellese et al., 2011).

### **The Introduction of the Wilson Sexual Fantasy Questionnaire**

The above paragraphs highlight the role of sexual fantasies in the theory of sex offending behaviour. Due to the nature of the fantasy it is difficult to empirically observe it. Therefore, methods that rely on self reports are used in the assessment of sexual fantasy (Leitenberg & Henning, 1995). According to its author, The Wilson

Sexual Fantasy Questionnaire (WSFQ, 1988) measures frequency and variety of sexual fantasies (Wilson, 1988). The measure can be used for the assessment of both men and women (Hunsley & Mash, 2008).

The questionnaire includes 40 items that assess 4 types of sexual fantasies: Exploratory, Intimate, Impersonal, and Sadomasochistic (includes 10 items per each type). During the assessment, using the Likert scale from 0 (never) to 5 (regularly), respondents may indicate how often they have a particular sexual fantasy. The exploratory fantasies include seeking excitation and sexual variety (e.g., ‘having sex with more than one partner’); intimate fantasies are associated with more romantic activities with partner (e.g., ‘having sex with a loved partner’), impersonal fantasies cover interests in fetishes, and disregarding feelings and personality (e.g., ‘sex with a stranger’, ‘watching others’), whereas sadomasochistic fantasies would involve pain, tying up one’s partner or being tied up, etc. (Sierra, Ortega, & Zubeidat, 2006; Wilson, 1988). This is repeated for five conditions: “daytime fantasies”, “fantasies during intercourse”, “during masturbation”, “dreams while asleep”, “have done in reality” and “would like to do in reality” (Baumgartner et al., 2002). It was designed to represent a range of sexual themes, (i.e., the normal, harmless, deviant and potentially dangerous; Wilson, 1988). The sum of all 40 items is presented as a total fantasy score that could indicate the “overall sex drive” (Baumgartner et al., 2002). For each sub-scale, scores range from 0 to 50, allowing the total score to range from 0 to 200, with higher scores indicating more frequent fantasising (Wilson, 1988). The measurement introduced by Wilson was introduced as a tool that allows us to measure, in a standardised way, sexual interests, desires and activities.

The author of WSFQ explained that the design of this tool involved the survey of the relevant literature and examination of popular sex magazines (e.g., 'Forum') (Wilson, 1988). However more detailed description of this process is difficult to access. In 1980 Wilson and Gosselin introduced the means for WSFQ control groups which suggested the score of 16.9 for intimate scale, 8.1 for exploratory, for impersonal 7.6 and for sadomasochistic 2.3; whereas the mean score for general score total 34.9. 'Fantasy-Fluency' (Gosselin & Wilson, 1980; Salter, 1988, p.298). These score were introduced to guide the interpretation of the results of WSFQ.

It seems that although The Wilson Sex Fantasy Questionnaire is used in clinical practice, there are a very small number of empirical research studies that have employed the WSFQ. The psychometric has been used in studies of general population studies (e.g., using the Spanish version of WSFQ: Sierra, Ortega & Zubeidat, 2006), as well as being applied to an offending population (e.g., Baumgartner et al., 2002, Skovran et al., 2010).

## **Psychometric Properties**

It has been established that essential components of any good psychometric measurement are its reliability, validity and appropriate norms (Field, 2009; Kline, 1986).

The reliability reflects the accuracy of the scores and it can be observed in consistency of the scores obtained by a respondent across time and different circumstances (Howitt & Cramer, 2005). The reliability incorporates test-retest reliability (repeated measurement should produce consistent results), internal consistency (correlation, measured as Cronbach's Alpha between items within the same



scale), and inter-rater reliability (the degree of similarity between different raters' scores) (Field, 2009; Kline, 1986).

Validity, on the other hand is the reflection of the measurement's accuracy and relevance to the construct (i.e., the extent to which a test measures what it was designed to measure; Field, 2009). Validity can relate to the format, design and structure of the measurement (face validity and content validity), the link between measurement items and the theory behind its concepts (construct validity), potential application of the measurement abilities for example to predict future events (criterion validity with its concurrent and predictive subtypes) (Howitt & Cramer, 2005; Sartori, 2010; Trochim & Donnelly, 2008). One of the methods that could be used to evaluate the validity is factor analysis (Trompenaars, Masthoff, Van Heck, Hodiament, & De Vries, 2005).

**Wilson's Sex Fantasy Questionnaire's Reliability.** When introducing the WSFQ, Wilson (1988) did not provide any information regarding the reliability of the measurement (O'Donohue et al., 1997). More recently a few studies did attempt to test the reliability of the test for the purpose of their studies. For example, Skovran and his colleagues reported that for their study all scales had acceptable, good or exceptional internal reliability (exploratory  $\alpha=0.84$ , intimate  $\alpha=0.92$ , impersonal  $\alpha=0.77$ , and sadomasochistic  $\alpha=0.81$ ) (Skovran, Huss, & Scalora, 2010). An exceptional internal reliability of the WSFQ was also reported by Carlstedt, Bood and Norlander (2011). However, this level of internal reliability was only identified by them for 'Fantasy-Fluency' scale (Wilson, 1988), which was represented by the sum of the score on all four scales ( $\alpha=0.91$ ). Although these studies support to some extent the assumption of the internal reliability of the WSFQ, more evidence is needed. The complex and

sensitive nature of the sexual fantasy is associated with the potential biases that could influence respondents' answers (i.e., social desirability) it would be important to assess whether the test-retest, or inter-rater reliability show the same results (Meston, Heiman, Trapnell, & Paulhus, 1998; Trochim & Donnelly, 2008).

### **Validity of Wilson's Sex Fantasy Questionnaire.**

**Face Validity.** Face validity reflects the degree to which the measurement appears to measure what it was design to test (Sartori, 2010). Therefore it relies on subjective judgement (e.g., judgment can be made by panel of experts) (Hunsley & Mash, 2008). It seems that items of WSFQ have face validity, as they appeared to be relevant and address different types of sexual fantasy. The various examples of different types of sexual fantasies could indicate the specific sexual tendencies or sexual interest, as well as provide some insight into the individual's sexual functioning like behaviour and his/hers desires.

**Content Validity.** Content Validity is a non-statistical validity that focuses on the measurement's content in order to establish if it covers all crucial and relevant aspects of the measured concept (Anastasi & Urbina, 1997; Tavernier, Totten, & Beck, 2011). The items of the Wilson Sex Fantasy Questionnaire were identified by a survey of clinical, scientific and popular magazines (Baumgartner, Mario J. Scalora and Matthew T. Huss, 2002), hence it has been limited by the level of availability or acceptability of relevant material at the time (for example limited access to more deviant or rare sexual interest/fantasies). It is not clear how thorough, specific, or broad this survey was. There is also no information about whether the items were assessed by a panel of experts which could confirm or question its content validity. Weaknesses of WSFQ also relate

to small number of statements included per scale that aim to assess the nature of individual's sexual fantasies (i.e., only 10 statements per scale) which seems to be not enough to reflect the full complexity of each subtype of fantasy (O'Donohue et al., 1997; Tavernier et al., 2011). Also given that only one item addresses the paedophilic fantasy, it would be difficult to use this measure to assess the population of sex offenders adequately (Hersen, 2004).

More careful analysis of the questionnaire's individual items raises further questions. The four categories that are introduced by Wilson (1988) separate sexual fantasies into exploratory, intimate, impersonal and sadomasochistic. There are unclear criteria for each type. The author did not link these particular types with theory or empirical research. O'Donohue et al. for example identified seven fantasy scales which covered normal, bondage, masochism, rape, child and other paraphilias (1997). Therefore the content validity of WSFQ appears to be questionable.

**Construct Validity.** Whereas the content validity focuses on inclusion of all relevant aspects of the concept, the construct validity is concerned with the theory behind the concept and the degree to which the measure's items relate to this theoretical and conceptual understanding of, in this case, sexual fantasy (Trompenaars et al., 2005). The issues described in previous paragraphs also impact on the construct validity. Insufficiently researched, undefined types of different sexual fantasies and ambiguous statements (reflecting overlapping concepts) included in a measure can result in misinterpretation of the outcomes, which then lack the relationship with the theoretical background of the nature and functions of the fantasy.

The WSFQ was designed to measure sexual desires, preferences and activities, as well as libido (Wilson 1978). Unfortunately there are a limited number of studies that

have assessed WSFQ's construct validity, by focusing for example on the type, frequency (libido) and behaviour.

***Predictive and concurrent Validity.*** The WSFQ was introduced not only as a standard quantification of sexual desires, preferences and activities, but also a tool to explore sexual preferences and measure libido.

Within criterion validity it is important to discuss both Predictive (ability to predict the future event evaluated by the correlation between the results of the measurement and the future events) and concurrent validity (Howitt & Cramer, 2005). It is difficult to state the level of concurrent validity. Although there are similar measures to the WSFQ, there are no studies that compare scores on the Wilson Sex Fantasy Questionnaire to another measure. The research conducted by Skovran, Huss and Scalora (2010) attempted to evaluate the predictive abilities of the WSFQ by measuring its ability to predict psychopathy. Although they did find a tendency (individuals with higher scores on psychopathy test had higher scores on WSFQ) the results were not significant and the authors recommended further research (Skovran et al., 2010). Similarly there is little information regarding the capability to discriminate between different types of offenders. Baumgartner et al. 2002 examined differences between child molesters and nonsexual offenders on the WSFQ. Results of the study suggested that child offenders reported higher scores on the Exploratory and Intimate sub scales, as well as overall fantasy. Scores on the Impersonal and Sadomasochistic sub scales were not significantly different. Authors recommended further studies to examine these relationships, as the results were inconclusive (Baumgartner et al., 2002).

**Summary of Validity.** The limited number of accessible studies that involved the WSFQ, as well as information provided by the author of the psychometric test suggests that the Wilson Sex Fantasy Questionnaire has questionable validity. Although the measure had a good face validity, it seems that further research is needed to compare its results with other measures, assess its concurrent and predictive validity, as well as content validity.

It is possible to identify the tests' features that can impact on the validity of the test. For example, it should include the definition of a child, as a subjective understanding may lead to different ways of scoring. Also highlighted by O'Donohue et al. (1997), some of the statements introduce further complications with the interpretation of results. For example "having sex with someone much younger" can be perceived differently depending on the age of the respondent, or his/hers personal attitudes. Some items are open to misinterpretation due to the context in which they could be placed. For example, the circumstances in which someone is "taking someone's clothes off" may change the initial 'Intimate' fantasy type, to 'sadoomasochistic' (if the taking 'the clothes off' took place without this person's consent), or impersonal (e.g., if the person fantasises about 'taking clothes off' a dead person or a doll).

**Scoring System and Appropriate Norms.** The literature suggests that data should be at least an interval level in order to meet the criteria for a good measurement (Kline, 1986). The WSFQ uses the Likert scale which in this case includes scores from 0 (Never) to 5 (Regularly). This type of scale is usually referred to as an ordinal scale.

However, in this case it can be considered as interval-level data due to its symmetric and central characteristic (Carifio & Perla, 2007).

Appropriate norms are a crucial aspect of any appropriately standardised measurement (Kline, 1993). In 1980, Wilson and Gosselin introduced the WSFQ control groups which suggested the cut-off score of 16.9 for intimate scale, 8.1 for exploratory, for impersonal 7.6 and for sadomasochistic 2.3; whereas the mean score for general score total (the 'Fantasy-Fluency') 34.9 (Gosselin & Wilson, 1980; Salter, 1988, p.298). These cut off scores introduced by Gosselin and Wilson (1980), and Salter (1988), however, lack additional information regarding the process in which these scores were obtained (for example, the characteristic of the examined samples, or control groups, etc.). It has been suggested, by the authors, that these scores should be used in order to identify individuals with results 'above the norm' (i.e., individuals with score above the 'cut off value' could be characterised as experiencing the specific types of fantasy more frequently, than the general population) (Gosselin & Wilson, 1980).

Nevertheless, the author of WSFQ (Wilson, 1978) did not provide any information regarding appropriate norms that could more accurately support the interpretation of WSFQ's results. It seems that there is a need for further research that could generate these norms and validate the use of these on general (e.g., men, women), as well as the offending population. These norms and the standard deviation are needed to improve the accuracy of the estimation how individual's score would relate to the scores of the rest of the population (Field, 2009).

## **Alternative Measures of Sexual Fantasies**

In order to evaluate the measure it is important to place it within a bigger context of the existing literature, as well as with other developed measures. In addition to the WSFQ, there are other methods of measuring sexual fantasies. It is possible to categorise them into three approaches: checklists of fantasies which are given to the participants, open-ended questionnaires, where respondents are able to describe in narrative form their fantasies, and by asking respondents to record the fantasies they have with use of either checklists or open-ended diaries (Flak et al., 2007; Leitenberg & Henning, 1995). The paragraphs below briefly list some of them:

**Clinical interview.** The clinical interview is a sufficient method of assessment of an individual's sexual fantasy and it is considered to be the most important part of any assessment (Craissati, 1998).

**The Multiphasic Sex Inventory.** This is a commonly used questionnaire that also assesses deviant fantasies is the Multiphasic Sex Inventory (O'Donohue et al., 1997). However, where the WSFQ was developed to measure sex fantasy in both offending and non offending populations, The Multiphasic Sex Inventory was created specifically to look into psychosexual characteristics in sexual offenders (O'Donohue et al., 1997). The MSI contains scales that include atypical sexual outlets (e.g., fetishes, bondage, sadomasochism, etc.), as well as sexual dysfunction (sexual inadequacies, or impotence) (Flak et al., 2007). Some of the scales have also been reported to be useful for the assessment of stable dynamic risk domains (Thornton, 2002), especially the Sexual Obsessions and the Justifications Scales. However, when using this tool for the purposes of assessing sexual fantasies, only a few specific scales (e.g., paraphilias) that are relevant, as the whole measurement looks into many aspects of sexual functioning

(Flak et al., 2007). The ability of MSI to differentiate between sexual offenders and non offenders has been reported, but not to identify specific types of deviant sexual interests and behaviours within different categories of offenders (Holland et al., 2000).

**The Sexual History Questionnaire.** Another tool that could be also used in place of the WSFQ is, for example, the Clarke Sexual History Questionnaire (Langevin, Lang, & Curnoe, 2000). This questionnaire was developed to reflect erotic desire towards specific sexual behaviours. Although the measure seems to distinguish between different types of offenders, it has been reported that it was not very useful in predicting future risk of reoffending (Hersen, 2004). Nevertheless, various strengths of this measure highlighted by its authors (Langevin, Lang, & Curnoe, 2000), also emphasise the differences between this tool and the WSFQ. The initial version of the SHQ consisted of 225 items relating to the frequency and type of erotic outlet. In total, 27 clusters of items were derived, 17 heterosexual and 10 homosexual. The items of the SHQ have been developed and modified over a 10-year period of clinical practice with sex offenders and sexually deviant persons. The present SHQ (2002) represents the outcome and validation of this work.

The SHQ introduced numerous scales with more specific items that reflect the complexity of the sexual preferences, as well as actual outlet (e.g., pedophilia, masturbation fantasies, voyeurism, obscene telephone calls, exhibitionism, frotteurism, rape). Moreover, the tool seems to be supported by extensive information regarding its strong validity and reliability (Langevin & Paitich, 2002), which unfortunately is not available for the WSFQ.

Whereas WSFQ focuses entirely on the assessment of sexual fantasy, the SHQ incorporates measures that aim to assess different categories of sexual behaviour (e.g., childhood and adolescent sexual experiences, sexual dysfunction, etc.). This tool, however, appears to provide more in-depth exploration of various aspects of sexual preferences and fantasies than very brief scales of WSFQ.



**The Sexual Fantasy Questionnaire.** The Sexual Fantasy Questionnaire (SFQ) was introduced by O'Donohue and his colleagues (1997) in order to address some of the weaknesses of the WSFQ and to provide an alternative measure for the assessment of sexual fantasy. Similarly to the previously described SHQ, The SFQ includes more items than the WSFQ (155 items) that describe different sexual acts about which an individual may fantasise. The scale includes three options: never, sometimes or frequently, which is similar to the scale used by the WSFQ. However, the authors of this tool provided a clear description of each option (e.g., sometimes means at least once in my life but less than once a week, etc.) (O'Donohue et al., 1997). This measure included the scales that addressed both normal and deviant sexual fantasy, that allowed to assess the presence of offence related fantasies (for example, sadism scale, rape scale, child scale), as well as these preferences that could provide a better insight into the nature of the risk that an individual could presents (e.g., frotteurism, exhibitionism, scatologia, necrophilia, zoophilia, fetishism) (O'Donohue et al., 1997). The authors argued that they constructed the test that has better reliability and validity than the WSFQ. However, the interval between initial test and re-test was only 1 week, which could influence the test-retest scores (O'Donohue et al., 1997). Authors of this tool reported acceptable reliability and convergent validity (O'Donohue; Hersen, 2004), as they observed the difference between the group of child molesters who reported higher number of fantasies that include children than the control group (i.e., students).

This list of the measures is not conclusive but is intended to highlight the variability of accessible tools that could be used to assess sexual fantasies. The advantages of the above measures are often associated with their more contemporary

approaches to the field; additionally they are embedded in more empirical research than the WSFQ.

It is essential for the effective clinical practice to choose the most appropriate measures, in order to identify client's treatment needs, as well as more accurately assess his risk. This helps to formulate the problem and plan the most suitable treatment (Andrews & Bonta, 2006). There are many aspects of the nature of sexual fantasy, as well as its role in the offending behaviour that remain unclear (Bartels & Gannon, 2011). Therefore its assessments should be careful and thorough, moreover conducted with an awareness of potential limitations. Considering the limitations of above measures, it seems that the most efficient assessment, which allows to incorporate all important contextual factors, as well as individual differences (e.g., individual's ability and willingness to explore his sexual fantasies, their development and evolution, and their role in offending behaviour, etc.), is clinical interview. Similar to other assessments, it has its limitations (e.g., it is open to biases, misinterpretation, as it relies on self report, etc.). However, in circumstances where the assessor has a sufficient amount of time (and access to collateral information), this approach allows to gain a much better insight into individual's sexual fantasies, than any other tool.

The clinical interview should be supported by other measures (e.g., any tool introduced in previous paragraphs). This allows to explore various areas related to the sexual fantasy quicker, and could potentially highlight these aspects of individual's functioning that could be omitted during the interview. However, not every service has similar access to all existing measures of sex fantasy (for example, not every service has access to various questionnaires, or trained professionals and equipment to conduct the Penile plethysmography, the PPG test, etc.).

## Discussion

The Wilson Sex Fantasy Questionnaire has been used by professionals for over three decades. It has been reported that the measure has a good internal reliability (Carlstedt et al., 2011; Skovran et al., 2010). However further research is needed to evaluate the inter-rater and test–retest reliability. Even more attention is needed to evaluate the WSFQ’s validity. The restricted number of studies and inconsistency of findings suggest that the WSFQ validity is questionable. Moreover, the measure does not have validated norms that are one of the required psychometric properties crucial for the appropriate use of the tool, interpretation of scores, as well as linking the results with the theoretical background (Kline, 1986).

The WSFQ, as other measures of sex fantasies, relies on self reports. Some authors, for example reported the tendency of offenders to underreport their sexual fantasy (Baumgartner et al., 2002). This suggests that the comparison of non offending individuals with offenders may lead to biased results. To some extent the good face validity of this measure provides a clear explanation of the assessment’s aims to individuals who are being assessed. Therefore, it is possible for these persons who do not wish to disclose the content of their sex fantasy to falsify their answers (Herson, 2004). However, this is also the weakness of other questionnaires. The questionnaires involving sensitive material (sexual preferences, fantasies) are even more likely to trigger socially desirable responding (Williams et al, 2009). Nevertheless, this limitation could be addressed by accessing other sources of information, if possible (viewing medical notes, talking to the clinician in order to confirm the consistency of an individual’s account).

The strength of the WSFQ lies in its simplicity. The questionnaire is easy and quick to administer and it provides the method for the assessment of one of the most important factors associated with sexual offending (Carabellese et al., 2011; Vanhoeck et al., 2011). There is a need for a tool that could assess those fantasies in a standardised way and The Wilson Sexual Fantasy Questionnaire was designed to do not only that, but attempted to record an individual's sexual preferences, past behaviours and libido (Wilson, 1978). However, the use of this tool in clinical settings or for research purposes should be done with the acknowledgement of the numerous limitations of the tool. It seems that the WSFQ could be used as a screening tool that could indicate certain tendencies or suggests individual's preoccupation with sex. In order to address some biases the assessment should clarify the link between theory and the measurement's features and generate appropriate norms. The measure should also be revised in light of a more contemporary understanding and knowledge about sexual fantasies. Further testing of its reliability could also highlight other weaknesses of the test.

Within this chapter the psychometric properties of the Wilson Sex Fantasy Questionnaire have been discussed. It appears that overall reliability and validity are not confirmed, producing mixed results. Therefore, for research and clinical purposes the WSFQ should be used with caution and preferably with the assistance of other measures (e.g., clinical interview). The next chapter provides a summary of all the chapters and attempts to knit together the findings relating to the population of mentally disordered sex offenders.

## **Chapter 5**

### **Discussion**

This Chapter is a summary of previous parts of this thesis. The aim of this thesis was to explore the population of mentally disordered sex offenders. Each chapter is briefly described and the findings are summarised.

#### **Summary of Findings**

The literature review in Chapter 2 explored the available empirical studies in order to evaluate contemporary understanding of the inevitably complex population of mentally disordered sex offenders. Unfortunately, only a limited number of research studies investigating issues relating to this area were identified during the systematic search. Moreover, those studies that were identified were focused on diverse topics and used various definitions (e.g., psychopathy, legal age of consent) and measures. Additionally, researchers generally excluded psychotic participants from their studies. Therefore the need for further studies was suggested in order to improve our understanding of this subgroup of sex offenders.

Nevertheless, the review did identify findings that provided some insight into the characteristics of this population. A high prevalence of mental disorders among sex offenders was recognised, as well as comorbidity of different mental disorders (Hoyer et al., 2001; Leue et al., 2004; Stinson et al., 2005). The results of the systematic review suggested that mentally disordered offenders were a very diverse group and were likely to be involved in different types of offending, not only sexually motivated (Olver & Wong, 2006; Porter et al., 2009; Stinson et al., 2005). The variability of their offending

patterns was also suggested by studies, as a mixed offender type was identified (indicating different motivations for the offences, different goals, various modus operandi, victim and location choice depending on the type of offence, etc.).

The limited number of studies available prevents the production of any generalised statements that could apply to the general population of mentally disordered sex offenders. However it seems that there might be a difference between patients with schizophrenia or psychotic illnesses, and offenders with other mental disorders (e.g., personality disorders, psychopathy, paraphilia, affective disorders, etc.). For example, Alish et al. (2007) suggested that sex offenders with schizophrenia were less diverse (hence, they would be more behaviourally consistent across their series of crimes). This division could be seen as supporting the assumption that mentally ill patients have more inflexible behavioural patterns and less adaptable strategies than non mentally sex offenders (Drake & Pathe, 2004).

Chapter 3 presented a qualitative study that explored the crime scene behaviours of mentally disordered serial sex offenders and factors associated with their behavioural stability and change over time. This study attempted to address an existing gap in the literature relating to this population of sex offenders. All four participants that took part in this study met the criteria for personality disorder diagnosis (APA, 2004). In-depth semi-structured interviews were conducted and the data collected was analysed according to existing guidelines for template analysis (King, 2010). The results identified a number of labels that fall under two higher order themes (i.e., situational and personal factors). The heterogeneity of serial sex offenders, as well as the complexity of factors contributing towards offending behaviour (for example, sexual fantasies and their inconsistent role in offending behaviour) was recognised. A

preliminary model of behavioural influence within a single offence was proposed that illustrated the influential abilities of the dynamic relationship between personal and situational factors.

Chapter 4 was a critique of the Wilson Sex Fantasy Questionnaire (Wilson, 1978) and described its psychometric properties. The Wilson Sex Fantasy Questionnaire (WSFQ) has been used by professionals for over three decades. It has been reported that the measure has a good internal reliability (Carlstedt et al., 2011; Skovran et al., 2010). However, the critique identified that further research was needed to evaluate the inter-rater and test–retest reliability of this questionnaire. Even more attention is needed to evaluate the WSFQ’s validity. The restricted number of studies and inconsistency of findings suggest that the WSFQ validity is questionable. Moreover, the measure has no appropriate norms. This critique identified that this measure had several limitations and suggested that clinicians and researchers should use this tool with caution and if it is implemented.

## **Practical and Theoretical Implications**

There are several suggestions that could be made on the basis of this thesis. This thesis identified that the population of mentally disordered sex offenders appeared to be a very heterogeneous population. For example, this heterogeneity relates to various types of crime they commit, different motivation behind their crime, factors that influence their offending behaviour at the crime scene, or individual differences that also characterise the relationship between their mental disorder and offending behaviour. As such, an individualised approach to risk assessments, planning and implementation of the therapeutic interventions should be promoted.

### **Implications related to investigative processes**

In relation to crime linking and the investigative work of the police, it seems that placing the assumptions of crime linking techniques (Bennell et al., 2009; Woodhams et al., 2007b) in the context of a more individualised profiling approach (Beauregard et al., 2007; Kocsis, 2007) would potentially result in more effective practice. Additionally, the insight into processes responsible for change in offending behaviour may improve the understanding of any sudden shifts in the behavioural patterns of serial sex offenders. It seems that these changes can have either short or long term consequences (i.e., affecting either the modus operandi of a single crime, or the rest of the series). Some acute changes can occur suddenly and be associated with previous traumatic experiences, other gradual changes in the modus operandi can be associated with learning, or different motives. Therefore, the ability to recognise distinctions between these variations could help to improve the process of identifying different crimes committed by the same offender. This includes offences that are not sexually motivated such as acquisitive or violent offences. The findings of this thesis suggest some potential for across-crime linkage using MO. It seems that serial sex offenders often engage in other types of crimes and at least some of them consistently use their previous offending experience at the crime scene. However, more research is needed in order to support this implication, where analysis on higher volumes of offenders could provide further insight into this possibility.

The process of analysing crime scene behaviour should also acknowledge individual differences amongst serial sex offenders that can be less or more flexible and/or willing to change their behaviour. The understanding of the nature of behavioural change and the ability of sex offenders to change (hopefully assessed by the variance in



his modus operandi across his crime series) could help identify other crimes he has committed.

The overall conclusion of this thesis highlights how extremely difficult is to propose a general portrayal of the population of mentally disordered sex offenders. However, although this population is characterised by a great level of variability (i.e., numerous factors that can contribute towards both stability and change in crime scene behaviour), on an individual level it is possible to identify some regularities and consistencies related to their modus operandi (e.g., reflected in an individual's constellation of the most influential personal and situational factors and the dynamic between them). These findings are also consistent with crime linkage literature that suggests that sex offenders are consistent and distinctive in their behaviour (Woodhams & Labuschagne, 2011).

The complexity of the general population of mentally disordered sex offenders also indicates that it is impossible to identify distinctive types of sex offenders that would not overlap (e.g., the occurrence of mixed offenders suggests that some offenders are motivated by various goals in their criminal career).

### **Implication for treatment and risk assessment of mentally disordered serial sex offenders**

Correspondingly, it seems that in order to address the complex treatment needs of sex offenders with mental disorders and accurately assess their risk, as well as protective factors, an individualised approach to their treatments should be followed. This suggestion is consistent with the current literature and empirical evidence that supports clinical practice (e.g., Andrews & Bonta, 2006; Ward & Beech, 2006). A better understanding of an offender's sexual fantasy, paraphilias and their role in maintaining

certain behaviours within the offence cycle, could improve the assessment of his risk of recidivism and improve the prevention plans. This has potential to identify a more effective way of reducing the risk of recidivism among serial sex offenders, as well as support the development of more appropriate interventions that would address their needs and responsivity.

## **Strengths and Limitations of the Study**

It is important to review the findings of this study in the context of its strengths and limitations. The extensive length of the interview's sessions were result of careful planning of each session that took into the consideration individual differences of participants, sensitive nature of the study, as well as more broader ethical issues related to this research project. These aspects could be identified as strengths of this study. The potential biases were addressed during numerous supervisions. This included issues relating to inter-rater reliability of the coding scheme (Smith et al., 2009). The a priori codes, as well as themes were reviewed by the academic supervisor in order to ensure impartiality of the researcher. Moreover, a wide and detailed exploration of current literature relating to the area of sexual offending has been conducted prior to identification of potential a priori codes.

However, there are number of limitations, for example related to the qualitative method of Template Analysis (e.g., relying on the self report, introducing a priori codes). Moreover, the interviews focused on very sensitive and difficult areas. The confidentiality has been explained to each participant and they understood that there were circumstances when this would not apply. This, along with other issues associated with disclosing sensitive information could prevent them from being entirely open and

honest about their offending past. Additionally, the interviewer relied on offenders' memory, insight into their offending behaviour, and ability to communicate their feelings/thoughts.

Other limitation relate to the relatively small sample size (which was, however, appropriate for this type of qualitative research; Marshall, 1996), or very specific population (i.e., serial sex offenders with personality disorders detained in high secure hospital). Therefore, it introduced the question whether these findings could be applied to the general population (e.g., there may be potential differences between this population and serial sex offenders who are detained in lower secure settings, or are in the community). More detailed description of these limitation were provided in the Chapter 3 (p 136).

## **Further Research**

One of the main findings of this thesis related to the discovery of the lack of empirical evidence that could provide an explanation of offending behaviour of mentally disordered sex offenders. More research is needed that would further investigate the relationship between mental disorders and sex offending. Although there is literature dedicated to the treatment and risk assessment of mentally disordered sex offenders (Garrett & Thomas-Peter, 2009; Jones, 2009), only a few empirical studies investigated this population (i.e., prevalence of mental disorders among sex offenders, comorbidity of disorders, the relationship between the symptoms and offending behaviour or consistency and change of behaviour at the crime scene) (Alish et al.,

2007; Dunsie et al., 2004; Greenall & West, 2007). This particular knowledge would improve our understanding of their motives, etiology of sex offending, behavioural patterns and variability in their sex offending, as well as the extent to which various symptoms can influence their modus operandi.

The findings of this thesis suggest that there is some potential for across-crime linkage using MO. However, further research is needed in order to explore the extent to which factors influencing crime scene behaviour could be applied to other types of serial offending (i.e., murders, burglary).

Moreover, further evaluation of the factors that influence crime scene behaviour is needed. Future studies should involve a bigger sample, as well as include participants who are not mentally disordered as a control group. It would be also beneficial to explore the population of nonsexual serial offenders in order to identify any factors that could help with understanding their behaviours at a crime scene and providing valuable data that could be compared with those of this study. Additionally, the model presented in the third chapter is based on the offenders' accounts. It would be beneficial to examine whether it is possible to identify the evidence of patterns associated with internal processes that relate to 'personal' and 'situational' factors from the crime scene behaviours (for example, study that would include conducting both crime linking analysis and in-depth interviews). The outcome of this thesis also suggested the need for further research on psychotic sex offenders, as well as other mental illnesses (including sex offenders diagnosed with paraphilias) and psychopathy, as there is no sufficient empirical evidence that would provide an insight into the relationship between them and the sexual offending.

Moreover, further research on a population of mixed offenders would provide the opportunity to gain a better understanding of the level of their behavioural consistency and change, and their motivation for offending (providing data that would allow comparison of potential differences and similarities across the crime types). This insight could improve the assessment of their risk, potentially identify factors that could reduce the rates of recidivism, as well as improve the investigative processes of the police.

Finally, this research suggested the impact of the social and intellectual functioning of sexual offenders on their behaviour at a crime scene. Although there are numerous studies that focus on the population of sex offenders with learning difficulties (Craig, Stringer, & Moss, 2006; Lindsay, 2002), there is a need for more studies of the general population of sex offenders that do not meet the criteria for learning difficulties in order to establish whether it is possible to identify any relationship between them.

This thesis looked into relatively unexplored area, and potentially contributes to the understanding of crime scene actions for the complex subgroup of mentally disordered sex offenders. At present it is unclear how symptoms of mental disorder could influence the stability of sexual offending behaviour, and what factors maintain the offence cycle, or introduce the change. Moreover, the chapter of this thesis that systematically reviewed the current literature highlighted the significant gap in the literature regarding the population of mentally disordered sex offenders in general.

Therefore, this study aimed to provide further insight into the complexity of factors underlying the sex offending behaviour of the mentally disordered population, and review the existing knowledge. Essentially, the results of this research only highlighted the complex relationship between factors that could influence the behaviour

at the crime scene. Nevertheless, the findings of this thesis have potentially important implications. For example, it seems that although similar factors playing role in maintaining of some behavioural patterns (or influencing the change) could characterise all offenders; it was possible to observe individual differences within constellations of these factors associated with either stability or change. In other words, it was possible to identify in different participants distinctive combinations of situational and personal factors that were associated with either change or stability in their modus operandi.

This thesis proved to be an attempt to explore some aspects of heterogeneity of serial sex offenders. A better understanding of the dynamic nature between all situational and personal factors is still needed, and ability to apply this knowledge to individual crime would result in a unique profile of the offender that would help to understand the complexity of the crime scene behaviour and which may assist in making connections across series of offences.

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## Appendix I Extraction tables

<i>Data to be extracted</i>	
<i>Title of study</i>	
<i>Author/s</i>	
<i>Year of Publication</i>	
<i>Country of study</i>	
<i>Participants/Population</i>	
<i>Study Objective</i>	
<i>Location/Setting</i>	
<i>Methodology</i>	<i>Participants Selection:</i> <i>Instruments:</i> <i>Study design:</i> <i>Definitions:</i>
<i>Results</i>	
<i>Authors' conclusions</i>	
<i>Strengths &amp; Weaknesses</i>	

## **Appendix II - Semi-structured Interview**

Due to individual differences within the population of serial sexual offending the interview will be adapted to each case and will be flexible to participants' responses.

The semi-structured interview will cover following topics:

### **- Participant's account of events before the first offence**

This part of the interview will focus on the participant's personal life (e.g., questions regarding his relationships, work situation, problems and possibly any significant incident that preceded the offence), sexual fantasies (e.g., questions about the nature of his sexual fantasies, preoccupation with sex, any potential relationship between sexual fantasies and life situations), planning of the offence (what planning was involved, for example the location, approaching the victim, taking control over the victim, etc.), his mental health state (e.g., presence of any symptoms [if relevant for a participant], use of medication, and alcohol/drug abuse).

Exemplar questions:

Can you recall events occurring in your life before the first (sexual) offence you committed?

Can you describe your relationships with other people in your life prior to the first (sexual) offence you committed?

Were you involved in any intimate relationships at the time?

Can you recall any thoughts about offending prior to the first (sexual) offence you committed?

Prompt: What in your opinion triggered these?

How often would you think about this?

#### -Participant's account of the first offence

This part of the interview will involve eliciting a description of the offence (with a focus on the decision making process, questions around what went according to plan, what went 'wrong', feeling, thoughts during the offence, etc.)

Exemplar questions:

In your own words, could you describe to me how you recall the first offence?

What were your expectations of what would happen?

Prompt: What did you feel went according to your plan?

#### -Participant's account of what occurred after the offence

This part of the interview will focus on how the offence affected the participant, how he modulated his planning process, when he started to think about reoffending, etc. (i.e., questions about feelings, thoughts, any potential change in his sexual fantasies and, if they occurred, questions about the reason for changes in fantasy, his mental state, symptoms, substance misuse, etc.)

Exemplar questions:

Could you describe how you felt after your first offence?

Did you think a lot about what had happened?

Prompt: Could you describe what you were thinking about?

The same types of questions will be asked regarding the offender's subsequent sexual offences to enable us to establish if there was stability or change in his offending behaviour.

## **Appendix III- Final template of themes**

### **Theme I**

#### **1.0 Situational Factors**

- 1.01 Victim
  - 1.01.1 Victim's behaviour
  - 1.01.2 Victim's characteristics
- 1.02 Physical Environment
- 1.03 Employment
- 1.04 Social Network
- 1.05 Presence of Co-Offender
- 1.06 Third Party Interruption

### **Theme II**

#### **2.0 Personal Factors**

- 2.01 Sexual fantasy
- 2.02 Motive/Mood
  - 2.02.1 Anger
  - 2.02.2 Desire
  - 2.02.3 Boredom/excitement



- 2.02.4 Anxiousness
- 2.03 Experience
  - 2.03.1 Being abused
  - 2.03.2 Offending against others
  - 2.03.3 Observational learning
- 2.04 Physiological
- 2.05 Planning/preparation
  - 2.05.1 Reconnaissance
  - 2.05.2 Rehearsing
  - 2.05.3 Familiarity
- 2.06 Attitudes/Beliefs
  - 2.06.1 About Himself
  - 2.06.2 About the Victim
  - 2.06.3 About the Offending
  - 2.06.4 About the Police/Justice System
  - 2.06.5 About the World
  - 2.06.6 Attitudes/Beliefs associated with Personality Disorders

## **Appendix IV - Participation information sheet**

### **Participation Information Sheet**

#### **Study title**

**Exploring stability and change in the sexual offending behaviour of individuals  
detained in a high security hospital.**

#### **Invitation paragraph**

You are being invited to take part in a research study.

Before you decide if you want to take part it is important for you to understand why the research is being done and what it will involve. Please

take time to read the following information carefully. Talk to others about the study if you wish.

This sheet tells you the purpose of this study and what will happen to you if you take part.

Please feel free to ask us if there is anything that is not clear or if you would like more information. It is also possible to contact us on extension xxxx should you have any further questions you wish to ask us. Take time to decide whether or not you wish to take part.

### **What is the purpose of the study?**

To examine stability and change in the offending behaviour of patients detained in a high security hospital across the series of crimes they committed. To explore the nature and circumstances of changes and stability within their offending behaviour.

### **Why have I been chosen?**

You have been chosen as your history of offending behaviour is relevant to the study purpose. The research aims to explore your recollection of your

past offending, which could lead to reviewing your possible treatment needs.

### **Do I have to take part?**

It is up to you to decide whether or not to take part. If you do, you will be given a consent form to sign stating that you fully understand everything that is expected.

You are still free to withdraw at any time and without giving a reason. A decision to withdraw at any time, or a decision not to take part, will not affect the standard of care you receive.

### **What will happen to me if I take part?**

If you consent to take part **your case file information, specifically details of your past offences, will be accessed and collated to meet the aims of the study.**

You may also be asked if you will be willing to participate in a one-to-one interview discussing your past offending behaviour. The interview will be

audio recorded to make full use of your responses and analysed for the purposes of the research. You can also request feedback once the research is completed to give you information about the general findings of the study.

### **What are the possible disadvantages and risks of taking part?**

If you consent to the use of your case file information you may be concerned about the confidentiality of your data. Please refer to the section below regarding confidentiality.

If you consent to participating in the interview you will be asked questions about past offences which may cause some distress. You do not have to participate in the interview and you have the right to withdraw at anytime with no impact on the current treatment you receive. If you are asked any questions during the interview that you do not wish to answer you do not have to. A researcher will offer you a debrief session to discuss any issues you have and provide you with contact details for any future queries.

### **What are the possible benefits of taking part?**

We cannot promise the study will have immediate benefits. However the information we receive from participants may provide useful information in terms of the care we provide to ensure it is relevant to you as an individual and has the maximum benefit. In addition if you would like to receive feedback from the interview, as to your individual treatment needs this may be helpful for further interventions you choose to engage in.

### **What happens when the research study stops?**

All information will be stored safely. The study will be written up for publication with all identifiable information removed to ensure your participation remains anonymous and confidential. Specific feedback will be given to you if you request it.

### **Will my taking part in the study be kept confidential?**

Yes. All the information about your participation in this study will be kept confidential. The procedures for handling, processing, storage and destruction of data are compliant with the Data Protection Act 1998.

Data will be collected with only a participation number to identify it. Information linking participation numbers and patient names will be locked away and only researchers will have access to this for the purpose of collecting file data (patient files are recognised through identification numbers). Data will be stored securely for 10 years at xxxxx.

The only time that confidentiality may be breached is if you discuss any issues that indicate a specific risk to yourself or others. This can include risk of self-harm, violence or disclosures of abuse. If this occurs it is part of our duty of care to forward this information to your clinical team to ensure your safety and the safety of others.

### **Contact Details:**

If you should wish to contact us regarding the research please ask a member of nursing staff to contact Kinga Komarzynska in xxxxxx.

If the above information has interested you and you are considering participation, please continue to read the additional information before making any decision.

### **What will happen if I don't want to carry on with the study?**

If you choose to withdraw from the study up until the point your information is anonymised any information you have given will be

withdrawn from the study. Once your data has been anonymised, and you can not be identified from it, it will not be possible to withdraw from the study.

As stated previously, your decision to withdraw from the study will not affect your treatment in Hospital.

### **What if there is a problem?**


If you have a concern about any aspect of this study, you should ask to speak with the researchers who will do their best to answer your questions. If you remain unhappy and wish to complain formally, you can do this through the NHS Complaints Procedure. Details can be obtained from the hospital nursing staff.

### **What will happen to the results of the research study?**

It is intended that the research will be written up for a doctoral thesis and published in an academic journal. No personal data or aggregated information that could identify you would be included in any publications used to disseminate the results.



**Who has reviewed the study?**

This study was given a favourable ethical opinion for conduct in the NHS (or private sector) by 



**Thank you for considering taking part or taking time to read this sheet.**

## Appendix V – Participant consent form

### PARTICIPANT CONSENT

**Exploring stability and change in the sexual offending behaviour of individuals  
detained in a high security hospital.**

This study aims to explore the nature and stability of offending behaviours. It aims to identify treatment needs, risk and protective factors for patients with this type of offence in high security.

We would like to ask you to participate in our study. If you decide not to take part this will not affect your treatment at xxxxxx.

Please ***initial*** the relevant box:

**I have read and understand the information sheet**

☐

**I wish to take part in the interview**

☐☐

**I consent to the interview being recorded**

**I consent to the use of my case file information for  
the purpose of the study**

☐

**I do NOT wish to take part in the study**

☐

**I would like more information**

☐

**I would like feedback from the study once completed**

☐

*Participant*

**Full name (print)** .....

**Signed** .....

**Date** .....

*Researcher*

**Full name (print)** .....

**Signed** .....

**Date** .....

## Appendix VI Wilson Sex Fantasy Questionnaire

Please indicate how often you fantasise about the themes below at various times, how often you do them, and how often you would like to do them if given the opportunity.

In each column put a number between 0 and 5 to indicate your frequency as follows:

Never = 0; Seldom = 1; Occasionally = 2; Sometimes = 3; Often = 4; Regularly = 5

	Daytime fantasies	Fantasies during intercourse or masturbation	Dreams while asleep	Have done in reality	Would like to do in reality
1. Making love outdoors in a romantic setting eg. field of flowers, beach at night.					
2. Having intercourse with a loved partner.					
3. Intercourse with someone you know but have not had sex with.					
4. Intercourse with an anonymous stranger.					
5. Sex with two other people.					
6. Participating in an orgy					
7. Being forced to do something					
8. Forcing someone to do something					
9. Homosexual activity					
10. Receiving oral sex					
11. Giving oral sex					

	Daytime fantasies	Fantasies during intercourse or masturbation	Dreams while asleep	Have done in reality	Would like to do in reality
12. Watching others having sex					
13. Sex with an animal					
14. Whipping or spanking someone					
15. Being whipped or spanked					
16. Taking someone's clothes off					
17. Having your clothes taken off					
18. Making love else than bedroom (eg. kitchen, bathroom)					
19. Being excited by material or clothing(e.g., rubber, leather, underwear)					
20. Hurting a partner.					
21. Being hurt by a partner.					
22. Mate-swapping.					
27. Exposing yourself provocatively.					
28. Transvestism (wearing clothes of the opposite sex)					
29. Being promiscuous.					
30. Having sex with someone much younger than yourself.					
31. Having sex with someone much older than yourself.					

	Daytime fantasies	Fantasies during intercourse or masturbation	Dreams while asleep	Have done in reality	Would like to do in reality
32. Being much sought after by the opposite sex.					
33. Being seduced as an 'innocent'					
34. Seducing an 'innocent'					
35. Being embarrassed by failure of sexual performance.					
36. Having sex with someone of different race.					
37. Using objects for stimulation (eg. vibrators, candles, etc)					
38. Being masturbated to orgasm by a partner.					
39. Looking at obscene pictures or films.					
40. Kissing passionately.					