Female Sex Offenders:

WHO ARE THEY AND HOW DO WE TREAT THEM?

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Overview

- What do we know about female sex offenders
- Typologies and classification
- Similarities and differences
- Recidivism
- Gender matters
- What to treat/How to treat
- Take home messages
What do we know about female offender characteristics:

Demographics

- Average female offender is between 26 and 32 years of age.
- 85% are Caucasian
- Approximately 33.3% are married
What do we know about female offender characteristics:

**Early Development**

- More than 60% come from single parent or dysfunctional families
- Majority had a history of physical abuse 50-90%, neglect, sexual abuse 60-100%, and substance abuse by a parent(s)
- Reported feelings of worthlessness as a human being
- Alcohol and substance abuse began in early adolescence
- IQ between 95 and 100
What do we know about female offender characteristics:

**Adult Experiences**

- Of those married - 85% reported marrying as a teenager to escape their family home
- Described as socially isolated and few friends
- Reported as suffering from depression and suicidal ideation, post traumatic stress disorders, anxiety disorders, cognitive and personality disorders
- 40% reported as unemployed or having an unstable work history
- 80% experienced physical abuse later in life by a male partner or have been threatened with physical abuse
Understanding Prevalence

- Historical prevalence
- How do we determine prevalence
  - Victim studies
  - Studies of known offenders
- Confounding factors in establishing prevalence
- So what is real????
Prevalence

- Assumption – female sexual offending is MORE underreported
  - Cortoni et.al. meta-analysis
- Female offender comprise about 5% of the sexual offender population
Typologies

- Purpose is to classify individuals into theoretically useful categories that will assist in understanding their behavior, in order to inform treatment and interventions.
  - Offender characteristics
    - Age, history of abuse, substance abuse, presence of co-offender
Typologies continued...

- **Offense characteristics**
  - Location of offense, motivation, recidivism, general criminal history
- **Victim Type**
  - Age, gender, and relationship
Historical Typologies

- Criminally-limited hebephiles; Heterosexual nurturers; Teacher/lover
- Criminally-prone hebephiles
- Young adult child molesters; Young adult child exploiters
- Older non habituated offenders
- High-risk chronic offender
Historical Typologies continued….

- Homosexual child molester
- Aggressive homosexual offenders
- Male-coerced or directed avoidant
Currently there are four Classifications which have combined some of the previous studies classification.

- Women who abuse adolescent boys
- Women who sexually abuse their own or other young children
- Women who co-offend with a man
- Women who sexually assault or coerce adults
Women who abuse adolescent boys

- Exclusively abuse male adolescents
- Distortion: Victim is a willing participant in a consensual relationship
- Access to victim usually comes from position of power achieved through her role in the victim’s life and age difference
- Initial sexual offense is often not premeditated, later offending is more calculated.
- This offender is the least likely of the four types to have been previously a victim of sexual abuse
Women who abuse young children

- Previously referred to as ‘Predisposed’ offenders (Mathews et al, 1989)
- Offender acts alone, victimizing their own children or those known to them
- Usually experienced severe childhood trauma or long histories of sexual abuse
- Adult intimate relationships are frequently unhealthy or abusive
- Low self-esteem, extreme anger
Women who have co-offenders

- Largest number of female sexual offenders
- Motivation is self-preservation—fear of punishment, abandonment
- Female offender is non-assertive and emotionally dependent
  - Subscribe to traditional gender roles particularly those that endorse a man’s dominance over a woman
- Female offender may directly participate in offense, facilitate securing a victim or coerce victims into sexual activity
More about women who have co-offenders

- Greater number of arrests for non-sexual crimes that those who offend independently, suggesting that women who co-offend are more prone toward general criminality
  - There are two school of thought as to why this occurs
    - This group engage in a versatile range of criminal acts
    - These women are dependent personalities that will engage in a range of criminal acts through coercion
Women who abuse adults

- Smallest identified group of female offenders
- Oldest offender age
- 88% have exclusively female victims
- Less likely to come to the attention of authorities as abuse may occur in context of relationship
Similarities between male and female offenders

- Men and women general offenders have low recidivism rates as compared to other types of offenses.
- In sex offenders, most frequent type of offending for both genders is genital groping. (Peter, 2009)
- Both use coercion to obtain participation in sexual offending.
- Both engage in cognitive distortions.
Differences between male and female offender

**Male**
- Victim is more likely to be stepchild or distant relative
- Larger range of victim age
- More oral genital contact and anal rape of the victim
- Use gifts and bribes

**Female**
- Less discriminating of victim gender
- More likely to offend biological children or children whom they provide care
- Victim age is typically under 15 years old
- Foreign objects used in offense
More differences...

**Male**
- Motivation for use of coercion

**Female**
- Exploit victims by permitting others to abuse
- More likely to co-offend, which accounts for the majority of female sex offenses
- Motivation for use of coercion
The rate of sexual recidivism among women is extremely low as opposed to 13% in males. Note: beware of pseudo-recidivism – offenses that occur prior to the initial arrest do not count.

Promoting Prostitution (not prostitution) has a higher rate, 12.6%. 
If Recidivism is so Low, Why Treat Women Sex Offenders?

Impact on the Community
  Potential general recidivism
  Mental Health issues
    ▶ Borderline Personality Disorder/PTSD
If Recidivism is so Low, Why Treat Women Sex Offenders?

Family reunification and future children
- 60% of incarcerated women have children under 16
- Women who have sexually abused children in their care often have engaged in other maltreatment Community Reintegration
- Stigma of “Sex Offender” is worse for women than for men
Gender Matters

Static factors differ between men and women

- Age, - has no validity in hands on offenses but the older the woman, the more likely she is to reoffend in Promoting Prostitution
- Women who have non-sexual child abuse histories are more likely to gain a sexual offense (no correlation in men)

Dynamic factors also differ:

- Women’s dynamic factors may include cognitions supportive of criminal behaviors, relationships with antisocial associates, poor familial relationships, problematic community functioning and substance abuse problems.
- Linking these problems to a potential for recidivism will overestimate the woman’s actual risk of recidivism
Appropriate Assessment for Women Sex Offenders

- **Actuarial Risk Assessment Tool:** None
  
  Re-offense is so low, difficult to collect a viable sample

  - Given recidivism is so much lower for women than men, using a male validated tool will skew the results assigning the women at a much higher potential for risk than a true risk potential.

  - Many factors assessed will have nothing to do with female recidivism rates and factors which may be present will not be represented.
Instruments Validated for Women
(Cortoni, 2018)

- Adverse Childhood Experiences scale (ACE; Centers for Disease Control and Prevention, 2013)
- Early Trauma Inventory (STI Self-Report version; Bremner, Bolus & Mayer, 2007)
- Alcohol Use Disorders Identification Test, World Health Organization (AUDIT; Saunders, Aasland, Babor, DeLaFuente & Grant, 1993)
- Drug Abuse Screening Test (DAST; 10; Skinner, 1982)
Instruments Validated for Women con’t

(Cortoni, 2018)

- Miller’s Social Intimacy Scale (MIS; Miller & Lefcourt, 1982)
- Revised UCLA Loneliness Scale (LS; Russell, Peplau, & Cutrona, 1980)
- Levenson Locus of Control Scale (Levenson, 1975)
- Coping Inventory for Stressful Situations (CISS; Endler & Parker, 1999)
- Parent Nurturance Scale (PNR; Buri, 1989)
Treatment Approach

- Structured professional judgment approach
  - Domains to be addressed:
    - Intimacy and relationship issues
    - Cognitive processes
    - Emotional processes
    - Sexual dynamics
    - Social functioning
Treatment Dos:

- Therapist conveys caring, empathy, genuineness, acceptance and rapport. Same applies to Probation Officers.
- Supportive feminine community/role models focus on:
  - 1) Cognitive processes,
  - 2) Emotional processes,
  - 3) Intimacy and relationship issues,
  - 4) Sexual dynamics and
  - 5) Psychosocial functioning and increase coping strategies.
More Dos:

- Trauma informed interventions
  - Encourage development of recovery, wellness and resilience
  - Address interrelationships among trauma and unhealthy relationship patterns
  - Address substance abuse, mental health problems
More Dos:

The Risk Needs Responsivity (RNR) principle works well for both genders

- **Risk** - high risk offenders receive more intense treatment than low risk

- **Needs** - if high, focusing on reducing needs rather than risk can reduce future criminality

- **Responsivity** - Focus on the learning style of the particular offender, to include cognitive ability and motivation for treatment
More Dos:

CBT can be an effective approach with women. The client learns the connections between her cognitions, emotions, and behavior.

**A General Treatment Approach to Cognitive Change**

- Help the client identify and correct distortions regarding herself and others.
Treatment Don’ts:

- Mixed gender treatment
- Confrontational approaches
- Use of assessment tools validated only on men
Management in the Community

- Mental health symptoms and issues must be managed
- Reunification with children and families
- Working alliance is important for successful integration
Take home message

- Myth – female sexual offending is rare
- Myth – Women offend because they are mentally disturbed
- Myth – women sexually offend because they are coerced by their male partners.
- No validated instrument to assess risk of sexual recidivism
Gender informed, relational-based approach is currently the best practice.

Coordinated and integrated services are best practice for successful reintegration.
Questions???