

Female Sex Offenders:

WHO ARE THEY AND HOW DO WE TREAT THEM?

Stephanie Pitkin, Quality Assurance Specialist

Dana Hufford, Community Corrections Specialist, Sex Offender Treatment

Cathi Harris, Director



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 individual into theoretically useful categories that will assist to understand 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

Current Classifications

- ▶ 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 than those who offend independently, suggesting that women who co-offend are more prone toward general criminality
 - ▶ There are two schools 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

Recidivism in Women Sex Offenders

- ▶ 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; Russel, 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

Take home message continued

- ▶ Gender informed, relational-based approach is currently the best practice.
- ▶ Coordinated and integrated services are best practice for successful reintegration



▶ Questions???