

The comparative analysis of selected psychosocial and psychopathological factors among sexual offenders acting under or without the influence of alcohol

Dariusz Juszcak¹, Krzysztof Korzeniewski²

¹7th Navy Hospital

²Department of Epidemiology and Tropical Medicine in Gdynia, Military Institute of Medicine in Warsaw

Abstract

Introduction: The issue of the effect of alcohol on sex related offences is complex. A comprehensive theory describing the criminal behaviours committed under the influence of alcohol has not yet been developed.

Material and methods: The purpose of this paper was to evaluate and compare psychosocial and psychopathological factors characterising sexual offenders acting under or without the influence of alcohol.

The study dataset consisted of 180 court ordered psychiatric-sexuological assessments issued by forensic experts from the Mental Health Outpatient Unit between 2004 and 2012 in the 10th Military Clinic Hospital in Bydgoszcz (Poland). The assessments were done for the offenders who committed sexual offences as defined in Chapter XXV of the Criminal Code in Poland: Offences Against Sexual Freedom and Morality. This study used a specially designed questionnaire: Charter for Diagnosis of Factors Determining Criminal Activity.

Results: Relevant statistically significant differences have been observed between the study groups.

Conclusions:

1. The study confirmed the criminogenic effect of alcohol on sexual offences, especially rape, in both adults and adolescent population.
2. The alcohol induced disinhibition influencing the commission of sexual offence is characteristic for individuals with comorbid permanent personality disorders and organic personality disorders.
3. The offenders committing sexual offences under the influence of alcohol are found to exhibit low level of social functioning.

Key words: criminal sexual behaviour, alcohol influence, rape

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Introduction

Crimes of a sexual nature are influenced by multiple factors and their interactions [1, 2]. The factors affecting the risk of committing a sexual offence and the recidivism can be categorized in the following groups:

1. Distal factors: developmental and static — developmental factors including experiencing violence, rejection, difficulty in developing close interpersonal relations [3–13].
 Static factors (unchangeable factors), such as the permanency and extent of violence, psychosocial problems, prior antisocial events [14–17].
2. Proximal factors: dynamic and precipitating — dynamic factors, which can under the effect of precipitating factors trigger acute factors. Dynamic factors include sexual self regulation, offensive attitudes, level of interpersonal functioning, general problems with self regulation [18–22].

Address for correspondence: Dariusz Juszcak
 7th Navy Hospital
 Polanki 117, 80–305 Gdańsk
 tel.: +48 605 109 730
 e-mail: d.juszcak@7szmw.pl
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Precipitating factors (triggers, contextual), including the access to a victim, effect of addictions, conflict relations, lack of cooperation with the supervision after release [23–27].

3. Acute factors — including physiological arousal, thoughts and deviant fantasies, the desire for closeness, and affective states such as anger [2].

A comprehensive description of the relationship between the factors initiating sexual violence was done by Beech and Ward [2].

Several diagnostic tools have been developed for the purpose of evaluating the risk of repeated sexual offence. The most widely used include Static-99, which is an actuarial assessment instrument for use with adult male sexual offenders [28], SORAG (Sex Offender Risk Appraisal Guide) [29], MnSOST-R (Minnesota Sex Offender Screening Tool-Revised) [30], and SVR-20 (Sexual Violence Risk-20) [31].

Despite intensive research conducted to date, new factors previously not included in the widely used risk scales are being identified. The analysis of test items revealed additional risk factors positively correlated with sexual offences recidivism and violent crimes. These risk factors include past history of placement in foster care, problems with maintaining employment, school maladjustment [32].

The dynamics and complexity between the association of alcohol and criminal activity has been emphasized in literature [33, 34]. Alcohol consumption is influenced by social and cultural factors, such as the acceptance that violence is justified by the use of alcohol [35] and the issue of “social stress” [36, 37]. Pernanen [38] who studied the link between alcohol and crime identified four mechanisms. First, alcohol reduces inhibitions and triggers deviant and criminal behaviours. Secondly, alcohol changes the activity of neurotransmitters, which is linked to aggressive behaviour. Next, chronic alcoholism leads to cerebral cortex dysfunction, in particular of the temporal lobe, which also facilitates pathological behaviour. Lastly, alcohol leads to hypoglycaemia and interrupts REM, which increases irritability and aggression.

Addictions are thought to be one of the precipitating factors (triggers, contextual) for criminal sexual behaviour [24–27]. Among the sexual offender population, the use of alcohol and psychoactive substances is common [39, 40]. Alcohol abuse is characteristic of 30% of offenders regardless of the presence of the diagnosis of paraphilia [41]. In 60% of persons committing paedophilia, there is documented abuse of psychoactive substances [42]. In sexual offenders with paraphilia, there is a comorbid overuse of alcohol and generalized anxiety disorder [43].

Over half of rape victims claimed the perpetrator was under the influence of alcohol or drugs during the crime [44]. Among sexual offenders, the authors underlined the co-existing overuse of psychoactive substances with personality disorders and low social functioning [45–51]. It is estimated that alcohol consumption is a direct cause of 50% of all homicides [50].

Material and methods

The objective of this paper is to examine the question which psychosocial and psychopathological factors are characteristic of sexual offenders acting under the influence of alcohol and which factors are characteristic for sexual offenders who acted without the influence of alcohol.

The study dataset consisted of 180 court ordered psychiatric-sexuological assessments issued by forensic experts from the Mental Health Outpatient Unit between 2004 and 2012 in the 10th Military Clinic Hospital in Bydgoszcz (Poland). The assessments were conducted for offenders who committed sexual offences as defined in Chapter XXV of the Criminal Code in Poland: Offences Against Sexual Freedom and Morality. Paraphilia (disorders of sexual preference) was recognized in 5 cases which constituted 2.8% of all offenders for whom expert opinion was issued. This study used a specially designed questionnaire: Charter for Diagnosis of Factors Determining Criminal Activity. This questionnaire was constructed based on clinical interviews and clinical knowledge. It included data regarding; characteristics of the committed offence (based on the relevant categories from the 1997 Polish Criminal Code), prior criminal and regulatory offenses, sociological features (socio-demographics), psychomotor development during childhood and adolescence, relationship status of the offender at the time of the offense, upbringing, school records, military service, relationship to alcohol and other addictions, somatic diseases, psychiatric and sexuological treatments and clinical diagnoses according to ICD-10. The psychological assessment included the following diagnostic tests: a visuo-motor gestalt test (by Lauretta Bender), the Benton visual retention test and the Minnesota Multiphasic Personality Inventory. The questionnaire was completed by the researcher based on the opinion of the forensic experts. The data from the questionnaire was entered into a spreadsheet and all statistical calculations were done through Excel. To answer the questions posed in this paper, the chi-Pearson test was used. Only the correlations for which the p-value was less than 0.05 were taken into consideration.

Table 1. Summary of psychosocial factors characterizing sexual offenders acting under and without the influence of alcohol

Analyzed factor	Sexual offence under the influence of alcohol (n = 88)	Sexual offence without the influence of alcohol (n = 92)
Type of the offence:		
rape of the adult victim (n = 41)	68.3%	31.7%
sexual contact with the underaged partner (n = 89)	32.6%	67.4%
rape of the underage victim (n = 42)	57.1%	42.9%
other (n = 8)	87.5%	12.5%
Prior criminal record	43.2%	25.0%
Age of the perpetrator:		
< 18 years old	0.0%	3.3%
19–35	45.5%	31.5%
36–50	39.8%	46.7%
51–65	8.0%	17.4%
> 60	6.8%	1.1%
Marital status:		
single	45.5%	25.0%
married	33.0%	46.7%
divorced	2.3%	16.3%
widower	6.8%	0.0%
separated	3.4%	3.3%
common law	9.1%	8.7%
Level of education completed:		
elementary	43.2%	19.6%
special needs elementary	4.5%	8.7%
vocational	19.3%	33.7%
high school	18.1%	20.7%
university	3.4%	14.1%
Occupational status:		
employed full time	26.1%	51.1%
employed intermittently	28.4%	10.9%
unemployed	20.5%	20.7%
disability benefits	15.9%	17.4%

p-value < 0.05 for chi square pearson's test

Results

Based on the acquired results, characteristics of sexual offenders were identified with and without the influence of alcohol as shown in the following Tables 1–3.

Discussion

In the group of sexual offenders studied (n = 180), 88 cases were identified as being committed under the influence of alcohol which is 48.9%. The largest proportion of offenders acting under the influence of alcohol was among the offenders committing rape for adults (68.3%) and under-aged individuals (57.1%). The results are significantly higher than expected [44]. Despite the fact that alcohol appears to be the strongest correlating factor with criminal sexual activity [23–27], its effect was highest on the group with previously diagnosed personality disorders. In the research, personality disorders were diagnosed among 73.9% of offenders acting under the influence of alcohol. The proportion was greater for antisocial personality

disorder (42.1%) than other personality disorders not otherwise specified (31.8%). Characteristic was also the coexistence of organic changes in the central nervous system (34.1%), and their clinical sequelae in a form of organic personality disorders (25%). It needs to be pointed out that 20.5% of individuals in the study group were diagnosed with alcohol addiction, and 11.4% were diagnosed with alcohol overuse. This suggests that the committing of the offence under the effect of alcohol can be a consequence of either chronic or intermittent alcohol consumption. In addition, the results indicate that sexual offenders acting under the influence of alcohol are characterized by low level of social functioning, coexisting relationship conflicts, past criminal record, low education, early age of sexual initiation, low frequency of sexual activity in the relationships, alcohol overuse and a high prevalence of alcohol addiction.

The main limitation of the study is the lack of comparison between sexual offenders committing crime under the influence of alcohol with and without paraphilia. The presence of comorbid paraphilia was

Table 2. Summary of factors characterizing personal history of sexual development among the sexual offenders acting under and without the influence of alcohol

Analysed factor	Sexual offence under the influence of alcohol (n = 88)	Sexual offence without the influence of alcohol (n = 92)
Current relationship conflict (marital, common law)	40.9%	22.8%
Emotional bond with parents:		
strong	47.7%	63.0%
weak	36.4%	15.25%
Source of sexual education:		
parents	3.4%	4.3%
peers	78.4%	84.8%
media	17.0%	3.3%
Age of sexual initiation:		
10–15 years old	13.6%	6.5%
16–18 years old	43.2%	29.3%
> 18 years old	40.9%	54.3%
Masturbation	53.4%	79.3%
Number of intimate relationships to date:		
multiple (> 5)	17.0%	16.3%
low (< 5)	83.0%	71.7%
Frequency of sexual contacts (in marital and common law relationships):		
daily	2.3%	0.0%
weekly	19.3%	33.7%
monthly	27.3%	32.6%
none	51.1%	33.7%
Relationship conflict among parents	35.2%	20.7%
Upbringing (family structure):		
both parents present	63.6%	85.9%
single parent family	26.1%	10.9%
foster care	10.2%	2.2%

p-value < 0.05 for chi square pearson's test

Table 3. Summary of psycho-biological factors characterizing sexual offenders acting under and without the influence of alcohol

Analysed factors	Sexual offence under the influence of alcohol (n = 88)	Sexual offence without the influence of alcohol (n = 92)
Amnesia regarding the committed offence	21.6%	3.3%
Alcohol use:		
overuse/abuse	27.3%	12.0%
moderate use	70.5%	84.8%
abstinence	2.3%	3.3%
Organic personality disorder	25.0%	14.1%
Organic changes in CNS	34.1%	17.4%
Clinical assessment of the alcohol use:		
overuse/abuse	11.4%	0.0%
addiction syndrome	20.5%	8.7%
Adaptation disorder	0.0%	5.4%
Personality disorder:		
antisocial PD	42.1%	27.2%
personality disorder not otherwise specified	31.8%	23.9%

p-value < 0.05 for chi square pearson's test

identified among only 5 offenders (2.8% of the study group), therefore, we need to assume the results of the study are characteristic for sexual offenders without coexisting paraphilia.

Suggestions for future studies include the need for research exploring the issue of criminal offences under the influence of alcohol in the view of cultural aspects [35], biological [38], and psychological factors, among

which of particular interest is the theory of „alcohol short sightedness“ [50] and coexistence of psychopathological disorders among the sexual offenders.

Conclusions

1. The study confirmed the criminogenic effect of alcohol on the sexual offences, especially rape, in both adults and adolescent population.
2. The alcohol induced disinhibition influencing the commission of sexual offence is characteristic for individuals with comorbid permanent personality disorders and organic personality disorders.
3. The offenders committing sexual offences under the influence of alcohol are found to exhibit low level of social functioning.

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