

The analysis of selected psychosocial and psychopathological factors influencing the perpetrators of rapes and pedophilia acts in the view of court-ordered forensic assessments

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Abstract

Introduction: There are multiple factors identified as potentially influencing the occurrence of rapes and pedophilia acts. There is no total theory explaining etiology and pathogenesis in these sexual offences.

Material and methods: The purpose of this paper is to evaluate and compare psychosocial and psychopathological factors characterising sexual offenders committing the rapes (adults and minors) and pedophilia acts. The study dataset consisted of 180 court ordered psychiatric-sexuological assessments issued by forensic experts from the Mental Health Outpatient Clinic in 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 perpetrators of rape of adult and underage victims are characterized by similar psychosocial and psychopathological determinants. 2. A statistically significant difference was found in the distribution of factors determining rape in the underage population of the victims compared to the perpetrators of pedophilia acts.

Key words: rapes, criminal sexual behavior, pedophilia acts

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Introduction

The evolution theories suggest that the phenomenon of rape constitutes a type of adaptation mechanism in the human species [1]. Among the animal species, sexual aggression is spontaneously generated by the force that allows domination within a given hierarchy structure and influences the process of natural selection [2].

In humans, sexual aggression is often results from poor social and interpersonal skills [3]. Marshall et al.

proposed a hypothesis that difficulty in interpersonal relations may lead to seeking emotional closeness through a sexual relation even if it is non-consensual [4]. The studies confirm also the importance of personality traits, social functioning and the degree of interaction of the victim with the perpetrator in the process of rape [5, 6].

According to Groth [7], rape is often a sexual behavior leading to fulfillment of non-sexual needs. He also differentiated types of rape based on several features.

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Biological factors influencing rape were also described, such as the polymorphism of transponder gene for serotonin is associated with impulsivity, aggression and violence [8]. Nearly half of the rape victims reported the perpetrator acting under the influence of alcohol or drugs [9].

It is believed that sexual contact between a child and an adult is a symptom of inappropriate personality development. According to Kinsey [10], such experiences were found in 24% of women; and based on Landis [11] — 30% of males and 35% of females had a history of sexual abuse as children. Before 16 year of age, twice as many females than males may be victims of sexual abuse [12]. Fisher et al. [13] shows that males with strong deviant tendencies have a significantly higher level of cognitive impairment. In addition, factors such as low self-esteem, sense of loneliness and the sense of externally located focus of control, differentiate the perpetrators of sexual molestation of children from individuals in control groups [14].

One of the commonly used classifications identifies the two categories of paedophile offenders: preferential and situational in which the offender does not have sexual preferences towards children [15]. Elliott et al. [16] report that, according to the information collected from the offenders' statements, the ongoing criminal acts had been successfully masked for an average of 6 years prior to the first arrest.

There is limited evidence that sexual violence in childhood may cause psychiatric disturbances in adulthood [17]. Theories explaining sexual violence against children are often used to explain other types of sexual violence. There are three main multifactor theories for sexual violence against children.

1. Theory by Finkelhor: suggests that sexual violence against children is influenced by four typical factors. Sexual contact with a child is emotionally satisfying for the perpetrator (sexual compatibility); the perpetrator is sexually aroused by a child (sexual arousal); the perpetrator undertakes the sexual relation with a child because of their inability to fulfill their own sexual needs through socially acceptable contacts (blockage); the perpetrator becomes disinhibited (eg through the effects of alcohol consumption, impulse control disorders, ageing, psychotic experiences, sustained stress, sustained patriarchal approach, societal approval) and engages in behavior contrary to what their normal behavior would be [18].
2. Theory by Marschall, Barbaree: assumes that sexual violence against children is the effect of interactions between distal and proximal factors. Particularly, an emphasis is placed on the role of

unfavourable events experienced by the perpetrators prior to offending, such as rigid or inconsistent parenting, physical or sexual abuse. These can result in poor social functioning and decreased self-regulation from early childhood. According to the authors, sexual drive and aggression originate from the same neural structures (hypothalamus, amygdala, corpus callosum). The hormonal spikes in adolescence in some cases may lead to a fusion of aggression and the sexual sphere especially in the absence of effective social and self regulation mechanisms. The authors view sexual violence as a dynamic model including the interaction of biological, psychological, social, cultural and situational factors [19].

3. Theory by Hall, Hirschman: based on the four components of physiological sexual arousal, cognitions that justify sexual aggression, negative affective states, and personality problems as motivational precursors that increase the probability of sexually aggressive behavior [20].

In an effort to unify the three above theories, Beech and Ward concluded that one of the factors (precursor) may activate the others, in effect leading to sexual violence against children. The authors demonstrated how the dynamic factors interacting with contextual factors could generate the acute factors [21].

It should be noted that in the past years there is an ongoing discussion on the factors associated with sexual violence as well as the methods of risk assessment to predict the likelihood of re-offending and the advantages of each method [22–27].

Currently there are three theoretical approaches to the issues related to the assessment of risk for re-offending:

1. Nomometric (actuarial), based on the scales and psychometric tools of risk assessment such as Static-99 (includes only static factors), Rapid Risk Assessment for Sex Offence Recidivism (RRASOR), Minnesota Sex Offender Screening Tool-Revised (MnSOST-R), Sex Offender Risk Appraisal Guide (SORAG), Level of Service Inventory-Revised (LSI-R), Sex Offender Need Assessment Rating (SONAR), Multiphasic Sex Inventory (MSI), The Violence Risk Scale (VRS), Historical Clinical Risk-20 (HCR-20), Violence Risk Appraisal Guide (VRAG) [28–35].
2. Idiographic (client centered), based on empirical clinical diagnosis, describing developmental, criminogenic, dispositional, dynamic and acute factors [36–39].
3. Psychometric, based on psychometric measurements, determining the personality features, psychosexual characteristic, deviant tendencies. This

method includes the use of common psychometric tools for diagnosis of personality disorders [40, 41], (for example, psychopathic personality disorder with the use of Hare Psychopathy Checklist-Revised (PCL-R) or its screening version (PCL-SV) [42, 43], the affective states [45, 46], and sexual deviation [46–49].

It has been shown that psychometrically diagnosed sexual deviation is associated with sexual offences recidivism [50–52]. It is worth mentioning that average recidivism factor for subsequent sexual offences is low and estimated as 13.4–13.7% [53, 54].

Material and methods

The purpose of this paper is to evaluate and compare which psychosocial and psychopathological factors characterise perpetrators of rapes (adults and minors) and pedophilia acts.

The study dataset consisted of 180 court ordered psychiatric-sexuological assessments issued by forensic experts from the Mental Health Outpatient Unit in the 10th Military Clinic Hospital in Bydgoszcz (Poland). The assessments were done for offenders who committed sexual offences as defined in Chapter XXV of the Criminal Code in Poland: Offences Against Sexual Freedom and Morality. The subjects were divided into groups based on the type of sexual offence committed. The following four groups were identified: perpetrators of rape on the adult victim, perpetrators of pedophilia acts, rape of underage victims, other sexual offences.

Paraphilia (disorders of sexual preference) was recognized in 5 cases which constituted 2.8% of all offenders for whom an 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 (sociodemographics), 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 Loretta 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. Correlations with all collected variables were analyzed for subjects in the study groups (rape of the adult victim, pedophilia acts, rape of the underage victim, other sexual offences). Only the correlations for which the p-value was less than 0.05 were taken into consideration.

Results

The analysis revealed several characteristic features describing the sexual offenders in the study groups (rape of the adult victim, pedophilia acts, rape of the underage victim, other sexual offences). The findings are presented in Tables 1–3.

Discussion

In the group of sexual offenders included in the study ($n = 180$), rape of the adult and underage victims constituted 46.11% ($n = 83$) of all types of sexual offences in the study population. Almost half of these perpetrators acted under the influence of alcohol, which constitutes a higher proportion than reported in literature [9].

Data from the study confirmed the importance of several factors influencing the crime of rape, including poor social functioning and impairment interpersonal relations. Some of the more specific indicators were; prior criminal record, difficulty in finding and maintaining employment, lack of satisfaction from sexual interactions to date, early initiation to alcohol consumption, early age of sexual initiation [3–6, 55].

The significance of a low level of family social functioning and disrupted family structure have also been confirmed [55] through increased rates of parental marital conflict, poor relationship with parents, presence of parental alcoholism, upbringing in single parent families or foster institutions.

The results did not support the hypothesis that the proportion of divorced males in the population was the strongest prognostic factor for rape [56]. The divorced constituted 4.9% of the perpetrators convicted of a rape of adult victims, and 9.5% for perpetrators of the underage rape victim group. Important information from the study reveals the analysis of an emotional state of the perpetrators prior to the committed offence. W.D. Pithers et al. [57] report that 88% of all rapists prior to committing of the crime experienced anger, whereas

Table 1. The comparative analysis of factors characterizing offenders based on the type of sexual offence committed (rape of the adult victim, pedophilia acts, rape of the underage victim, other sexual offences), regarding psychosocial factors (Pearson's Chi Square, $p < 0.05$)

Analyzed factor	Rape of an adult victim (N = 41)	Pedophilia acts (N = 89)	Rape of the underage victim (N = 42)	Other sexual offences (N = 8)
Crime committed under the influence of alcohol	68.3%	32.6%	57.1%	87.5%
Crime committed under the influence of other psychoactive substances excluding alcohol	0.0%	0.0%	9.5%	0.0%
Prior criminal record	46.3%	28.1%	40.5%	0.0%
Age of the offender (years old):				
< 18	4.9%	0.0%	2.4%	0.0%
19–35	56.1%	40.4%	21.4%	12.5%
36–50	29.3%	41.6%	64.3%	25%
> 51	9.7%	17.9%	11.9%	62.5%
Marital status:				
never married	46.3%	33.7%	31.0%	12.5%
married	36.6%	36.0%	47.6%	62.5%
divorced	4.9%	12.4%	9.5%	0.0%
other (widower, separated. common law)	12.2%	17.9%	12.0%	25.0%
Employment status:				
full time	31.7%	43.8%	38.1%	25%
part time	17.1%	16.9%	31.0%	0.0%
unemployed	36.6%	18.0%	11.9%	12.5%
disability benefits	14.6%	18.0%	16.7%	12.5%
Psychomotor development in childhood				
normal	87.8%	86.5%	100.0%	100.0%
delayed	12.2%	13.5%	0.0%	0.0%
Parental marital relationship				
normal	51.2%	74.2%	50.0%	87.5%
conflict	43.9%	25.8%	35.7%	12.5%

Groth [58] suggests rape as an act of enmity against women. The above findings are congruent with the data obtained through the study. In the study group, 31.7% of the perpetrators of rape of the adult victim and 40.5% of the perpetrators of rape of the underage victim did not experience sexual satisfaction from their sexual experiences prior to the committed offence and were sexually active rarely or never, 39.0% and 33.3% respectively for the above mentioned study groups.

In regards to pedophilic sexual offences, data gathered by the study confirmed some of the elements of all three main multi-factor theories of sexual violence against children. For the theory by Finkelhor [18], the dis-inhibition from the use of alcohol — 32.6% perpetrators of pedophilia acts were under the influence of alcohol, with the number increasing to 57.1% among the perpetrators of rape. The impulse control disorders which can be linked to organic personality disorders were diagnosed in 13.5% of perpetrators of pedophilia acts and in 31.0% among the perpetrators of rape of the underage victim.

For the theory of Marshall, Barbaree [19], poor family functioning in early childhood, elements of inconsistent parenting, parental alcoholism, as well as probable past history of perpetrators' own sexual abuse in childhood were found in 24.7% of perpetrators of pedophilia acts and 54.8% of perpetrators of rape of the underage victim.

For the theory of Hall, Hirshmann [20], the manifestations of negative affective states which may be caused by organic changes within the CNS were found in 15.7% of perpetrators of pedophilia acts and 40.5% of perpetrators of rape of the underage victim. The prevalence of personality disorders in the above groups of perpetrators was 49.5% and 69.1% respectively.

In conclusion, we may assume that the above three theories are complementary and constitute a dynamic model for a variety of factors and their interactions, which may lead to the act of sexual offence as discussed by Beech and Ward [21].

It is also suggested that the presence of psychopathologic disorders may lead to impaired inhibition in the

Table 2. The comparative analysis of factors characterizing offenders based on the type of sexual offence committed (rape of the adult victim, pedophilia acts, rape of the underage victim, other sexual offences), regarding sexual development (Pearson's Chi Square, $p < 0.05$)

Analyzed factor	Rape of an adult victim (N = 41)	Pedophilia acts (N = 89)	Rape of the underage victim (N = 42)	Other sexual offences (N = 8)
Reported sexual dissatisfaction	31.7%	5.6%	23.8%	0.0%
Weak or neutral emotional bond with parents	56.0%	27.0%	42.9%	25.0%
Source of sexual education:				
parents	2.4%	3.4%	7.1%	0.0%
peers	87.8%	79.8%	85.7%	50.0%
media	4.9%	10.1%	7.1%	50.0%
Recollection of own sexual experience from childhood	26.8%	24.7%	54.8%	12.5%
Age of sexual initiation (years old):				
10–15	9.8%	7.9%	11.9%	25.0%
16–18	61.0%	24.7%	40.5%	12.5%
> 18	24.4%	59.6%	42.9%	62.5%
Frequency of sexual contacts (in marital and common law relationships):				
daily	4.9%	0.0%	0.0%	0.0%
weekly	19.5%	30.3%	26.2%	25.0%
monthly	36.6%	24.7%	40.5%	0.0%
none	39.0%	44.9%	33.3%	75.0%
History of parental alcoholism	41.5%	20.2%	31.0%	0.0%
Upbringing (family structure):				
both parents present	63.4%	87.6%	64.3%	50.0%
single parent family	31.7%	6.7%	23.8%	50.0%
foster care	2.4%	5.6%	11.9%	0.0%
Sexual preference disturbances	0.0%	5.6%	4.8%	25.0%

Table 3. The comparative analysis of factors characterizing offenders based on the type of sexual offence committed (rape of the adult victim, pedophilia acts, rape of the underage victim, other sexual offences), regarding psychobiological factors (Pearson's Chi Square, $p < 0.05$)

Analyzed factor	Rape of an adult victim (N = 41)	Pedophilia acts (N = 89)	Rape of the underage victim (N = 42)	Other sexual offences (N = 8)
Learning difficulties at school	61.0%	50.6%	31.0%	25.0%
Behavioral problems at school	63.4%	28.1%	50.0%	0.0%
Age of first alcohol consumption (years of age)				
< 15	58.5%	34.9%	42.8%	62.5%
16–18	36.6%	60.7%	31.0%	25.0%
> 18	4.9%	4.5%	26.2%	12.5%
Treatment for alcohol addiction	17.1%	5.6%	16.7%	0.0%
Use of psychoactive substances	17.1%	13.5%	2.4%	0.0%
Psychiatric treatment				
sporadic	19.5%	9.0%	23.8%	12.5%
regular	17.1%	11.2%	0.0%	12.5%
Organic personality disorder	14.6%	13.5%	31.0%	50.0%
Organic changes in CNS	19.5%	15.7%	40.5%	87.5%
Clinical assessment of the alcohol use:				
overuse/abuse	2.4%	4.5%	11.9%	0.0%
addiction syndromme	26.8%	9.0%	16.7%	0.0%
Developmental disability	14.6%	9.0%	0.0%	0.0%
Personality disorder:				
antisocial PD	39.0%	32.6%	40.5%	0.0%
personality disorder not otherwise specified	43.9%	16.9%	28.6%	62.5%

situation where sexual arousal occurs. Such inhibition would be naturally present in persons without the co-existing psychopathologic disorders [55].

The study was able to confirm the data that the majority of perpetrators of sexual offences against children were married [59] — 36% of perpetrators of pedophilia acts and 47.6% of perpetrators of rape of the underage victim. The studies to date [60] indicate that the perpetrators of sexual offences against children have difficulty in initiating and maintaining satisfying relationships with adults, which may motivate them to seek relations with children. Dreznick [61] describes this phenomenon as the inability to have competent interactions with the opposite sex. The study confirm this finding only in respect to the perpetrators of rape of an underage victim — lack of satisfaction from sexual relationships in 23.8% of the perpetrators compared to 5.6% of perpetrators of pedophilia acts. The study was able to confirm the common coexistence of personality disorders among the perpetrators of sexual offences against children [62] — 49.5% of perpetrators of pedophilia acts and 69.1% of perpetrators of rape of the underage victim.

The main limitation of the study is the lack of characteristics of other sexual offences due to their under-representation in the study group. As the study consisted mostly of subjects without paraphilia, it was unable to verify some of the hypotheses proposed in the literature, such as whether males with strong deviant tendencies do indeed have an increased level of cognitive disturbances [13].

The suggestions for future research include studies focusing on comparing the results, characteristic for perpetrators of sexual offences against children without deviant tendencies (without diagnosed paraphilia) with the perpetrators presenting with paraphilia.

Conclusions

1. The perpetrators of rape of adults and underage victims are characterized by similar psychosocial and psychopathological determinants.
2. A statistically significant difference was found in the distribution of factors determining rape in the underage population of the victims compared to the perpetrators of pedophilia acts.

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