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McKillop, Nadine Kylie

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The Origins of Child Sexual Abuse:
An Analysis of Developmental and Situational Factors

Nadine Kylie McKillop
BA (CCJ), BBehSc, BPsych (Hons)

School of Criminology and Criminal Justice
Arts, Education and Law
Griffith University

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ABSTRACT

Using an integrated theoretical approach, this research drew upon psychological and criminological perspectives to investigate the origins of child sexual abuse through the person-situation framework. More specifically, it investigated early attachment-related vulnerabilities that may predispose individuals towards engaging in sexually abusive behaviour, and situational factors (e.g., opportunity structures and precipitating conditions) that enable and evoke such behaviour, in a sample of convicted adult male child-sex offenders.

First, developmental factors were examined. Overall, offenders reported a higher proportion of insecure, than secure, childhood attachment. Offenders' parent-child attachment relationships were characterised by 'affectionless control', reflecting low parental care and high overprotection and control. Offenders reported significantly less secure attachment with their fathers than with their mothers. Weak to moderate continuity between childhood attachment and trait (i.e., general) adult attachment was found, with insecure attachment more stable than secure attachment. Less secure attachment to mothers, as well as trait adult attachment anxiety and avoidance were associated lower self-control. Together these findings suggest that early attachment problems may impede effective processes for social cognitive development, and in turn, intrapersonal and interpersonal functioning both during, and subsequent to, early childhood. These vulnerabilities may increase a person's proclivities towards engaging in anti-social (including sexually abusive) behaviour.

Second, a descriptive analysis was conducted on the situational dimensions of the onset sexual abuse incident. Overall, offenders reported a late offence-onset age (31 to 40 years) and offending against victims with whom they already had an existing, caretaking relationship, most commonly girls. The abuse incidents typically occurred within the realm of everyday routine activities: most incidents occurred within a

domestic setting and at times during which the victim and offender were most likely to be interacting with one another, oftentimes unsupervised. On the whole, an absence of entrenched sexual attraction to children was reported. Further, little forethought, planning and effort to engage the child in sexual activity and avoid victim disclosure were reported. These findings provide tentative support for the more proximal role of situational factors in facilitating sexually abusive behaviour and for the utility of situational crime prevention models (e.g., rational choice and routine activities approaches) for informing current prevention initiatives.

Third, conceptual ideas concerning the interaction between distal (i.e., individual-level vulnerabilities) and proximal (i.e., situational) factors in evoking sexual abusive behaviour for the first time were explored. Overall, offenders commonly reported relationship, financial and sexual problems in the weeks preceding sexual offence onset and most employed avoidance strategies (e.g., isolation, drug and alcohol abuse) in response to these problems. They typically reported feelings of loneliness and depression, as well as intoxication immediately prior to sexual contact. For offenders who were in an adult intimate relationship prior to their onset sexual offence their state adult attachment (i.e., offenders' attachment orientation in the period immediately preceding onset) was also measured. Childhood attachment problems were more clearly reflected in state rather than trait adult attachment. These offenders reported significant state increases in avoidant attachment and their onset offence was more likely to involve a female familial victim. These findings suggest that early attachment vulnerabilities may not always manifest as stable adult attachment problems, but instead emerge in the context of relationship and other life problems, and thus, indirectly support theoretical propositions that acute or transient attachment problems precipitate sexual abuse behaviour.

In light of these findings opportunities for theory advancement were considered. Applied implications were suggested from a public health model perspective including: (1) primary prevention initiatives (e.g., community education; public awareness campaigns; reducing opportunity; and creating safe environments), (2) secondary prevention initiatives (e.g., attachment-informed early intervention programs and offender support lines), and (3) tertiary prevention initiatives (e.g., risk assessment and treatment models). Finally, methodological limitations were addressed and future research directions proposed.

STATEMENT OF ORIGINALITY

This work has not previously been submitted for a degree or diploma in any university. To the best of my knowledge and belief, the thesis contains no material previously published or written by another person except where due reference is made in the thesis itself.

_____________________________   ____/____/____

Nadine McKillop   Date

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LIST OF PUBLICATIONS AND PRESENTATIONS

Findings associated with this thesis have been disseminated in the following places.

Publications

McKillop, N., Smallbone, S., Wortley, R., & Andjic, I. (under review). Offenders' attachment insecurity and sexual abuse onset: A test of theoretical propositions. Manuscript submitted for publication in *Sexual Abuse: A Journal of Treatment and Research*

Conference Presentations

McKillop, N., Smallbone, S., & Wortley, R. (2007). *Offence-related situations through the lens of attachment: Attachment insecurity in adult child-sex offenders and its implications for understanding offence onset.* Paper presented at the Australian and New Zealand Society of Criminology (ANZSOC) *Postgraduate and Early Career Researcher Conference*, 23rd September, Adelaide, Australia.

McKillop, N., Smallbone, S., & Wortley, R. (2006). *Attachment insecurity among adult male child-sex offenders and its implications for understanding offending onset.* Paper presented at the Australian and New Zealand Association for the Treatment of Sexual Abusers (ANZATSA) Conference: *Preventing Sex Crime: From evidence and explanation to policy and practice,* 31st October – 3rd November, Gold Coast, Australia.

McKillop, N., Smallbone, S., & Wortley, R. (2011). *Offenders' attachment insecurity and sexual abuse onset: A test of theoretical propositions.* Paper accepted for presentation at the Association for the Treatment of Sexual Abusers (ATSA) Conference: *Milestones: past, present, future*, 2nd November – 5th November, Toronto, Canada.

CHAPTER 1: INTRODUCTION

1.1 Rationale

Historically, theoretical and empirical work on sexual offending has been dominated by clinical concerns, primarily the clinical presentations of convicted offenders, how to predict risk of recidivism, and how to reduce this risk through psychological treatment and risk management. The central focus of these clinical research efforts has been on understanding child-sex offending as a more or less stable pattern of behaviour over time and across situations and on understanding individual variations in these patterns. The problem of how and why people begin committing child-sex offences in the first place (i.e., its onset) has been given comparatively little attention.

Whereas understanding variations in recidivism among child-sex offenders is important for responding after offenders have been detected and convicted, understanding how and why this behaviour originates is important particularly for informing primary prevention efforts. The factors that serve to maintain a pattern of offending behaviour over time may be quite different from those factors associated with its onset. As Marshall and his colleagues (e.g., Marshall, Anderson, & Fernandez, 1999) have argued, individual-level factors observed in clinical settings (e.g., cognitive distortions; deviant sexual preferences) may be consequences rather than original causes of child-sex offending and thus may be less applicable to understanding why offenders initially engage in child sexual abuse. The purpose of the current research is to try to understand how and why a potential offender comes to commit a child-sex offence for the first time. This, in turn, may assist in formulating effective interventions for preventing such offences occurring in the first place. A shift in focus to understanding the origins of sexually abusive behaviour necessitates new methodological and theoretical approaches.

Whilst developmental approaches have been applied to sexual offending this has been conducted largely for the purpose of identifying treatment targets for convicted offenders (i.e., tertiary prevention) rather than for intervening in a way that might prevent the problem from first occurring (i.e., primary prevention). Despite the methodological limitations associated with retrospective, self-report designs, these studies have identified very similar developmental problems to those documented in prospective longitudinal studies concerned with the origins of general delinquency and crime (Aguilar, Sroufe, Egeland, & Carlson, 2000; Farrington, 1995; Loeber, 1982; Patterson, DeBaryshe, & Ramsey, 1990). Childhood attachment problems, family discord, harsh and inconsistent disciplinary practices (to name a few) have all been identified prospectively as predictors of delinquent and criminal conduct, and these same factors have consistently been observed in the backgrounds of sexual offenders as well (e.g., Lang & Lagevin, 1991; Smallbone & Dadds, 1998; Tingle, Barnard, Robbins, Newman, & Hutchinson, 1986; Williams & Finkelhor, 1990). It may be that many child-sex offenders possess development-related vulnerabilities (e.g., problems with emotional self-regulation, empathy and perspective taking) common to non-sexual offenders and may not yet have established specific child-sex-offence-related dispositions (e.g., stable sexual interests in children) at the point of their very first sexual offence. This is evidenced in the criminal versatility found in sex offenders both prior to and following their engagement in sexually-oriented crimes (Broadhurst & Maller, 1992; Smallbone & Wortley, 2004a, 2004b; Soothill, Francis, Sanderson, & Ackerley, 2000). Accordingly, the application of criminological theory such as Gottfredson and Hirschi's (1990) *General Theory of Crime* may add value to existing developmental approaches by explaining the criminogenic factors associated with sexual offending that may be common to all offenders. It may be particularly pertinent

to explaining the onset of sexual offending where child-sex-offence-related motivations may not yet be well-established.

Gottfredson and Hirschi (1990) explain individual propensities for offending (and analogous) behaviour as the result of one fundamental mechanism – a lack of self-control. In essence, control theory assumes that humans are by nature prone to aggression and self-interest and proposes that positive socialisation is required to inhibit (or control) these natural antisocial desires and impulses. In turn, individuals develop a social conscience and internalise social norms. Gottfredson and Hirschi (1990) suggest that individuals with low self-control lack the capacity to exercise restraint and regulate behaviour in response to self-serving urges. Thus, control theory asserts that offenders do not necessarily learn to commit crimes, at least not initially; rather, in effect, they fail to learn not to. This represents a departure from dominant ideas that sexual aggressive and abusive behaviour is originally learned (e.g., Laws & Marshall, 1990). From this perspective the aetiology of sexual offending may be explained in the same way as non-sexual offending behaviour.

Social cognitive development, it is argued, is fundamental in shaping prosocial behaviour and in turn the acquisition of key mechanisms of self-control (e.g., emotional self-regulation, empathy, perspective-taking and moral reasoning) required to inhibit socially irresponsible behaviour. As Hirschi (1969) states, “people commit crime because it is in their nature to do so. The question that really needs an answer is why most people do *not* commit crimes” (p. 11). Adverse developmental experiences (e.g., poor parenting, inconsistent and harsh discipline, physical and sexual abuse) in particular impede the development of social and self-regulation skills from an early age. In the absence of consistent, timely and appropriate discipline, administered in the context of love and nurturance, individuals are less likely to develop socially appropriate mechanisms for self-control. One way to understand how one fails to

develop such inhibitory capacities is through the lens of attachment because it is the absence of qualities associated with positive attachment relationships (e.g., nurturance, consistent and appropriate discipline and love) that naturally perpetuates low levels of self-control (Gottfredson & Hirschi, 1990). That is, the root cause of low self-control is problematic early attachment relationships characterised by ineffective or non-responsive parenting (Gottfredson & Hirschi, 1990). In this sense, early attachment difficulties may present one developmental pathway towards both non-sexual and sexual offending behaviour, through the failure to develop key mechanisms for, and commitment to, self-control (or self-restraint). This thesis will examine the nature and extent of attachment-related vulnerabilities in a sample of child-sex offenders.

Developmental approaches focus on identifying dispositional qualities (or individual vulnerabilities) of child-sex offenders that may serve to increase their propensity to anti-social and sexually abusive behaviour. This, in turn, helps us to understand why one person may be more likely than another to offend. However, these approaches are limited in their ability to explain how these individual propensities (or vulnerabilities) result in sexually abusive behaviour at a certain time, place and within particular interpersonal contexts (Smallbone & Cale, in press). Environmental criminological perspectives with a focus on the more proximal social ecological and situational dimensions of crime may assist with explaining where, when and how sexual abuse incidents unfold at specific times and places. Whilst these perspectives have been applied to general delinquency and crime research their application to sexual offending has tended to be overlooked. In fact, historically, sex offender research has been largely unconcerned with application of broader, criminological paradigms for explaining sexual offending. Environmental (i.e., situational) models of crime shift the focus from the individual (i.e., criminality) to the criminal event as the unit of analysis. This allows theorists and researchers to align child-sex offending behaviour with other criminal,

non-sexually deviant behaviour. More can then be understood about how environmental structures facilitate child sexual abuse, thereby providing opportunities to examine general offence-related features that may be common to the majority (if not all) sexual offenders (Smallbone, 2006; Wortley & Smallbone, 2006). This can complement existing clinical interventions (e.g., creating safe individuals) by creating safe environments (Wortley & Smallbone, 2006).

Rather than positioning these developmental and situational perspectives as separate, even competing, paradigms for explaining child sexual abuse, considering how they might fit together offers a way forward in sex offender research by providing a comprehensive explanatory framework from which to explain the onset of child sexual abuse. As Wortley and Smallbone (2006) state "the probability of crime varies according to both the criminal disposition of the individual and the crime facilitating nature of the immediate setting" (p.8). Thus, in addition to understanding individual-level vulnerabilities the present research considers the contribution of situational factors in the onset of child sexual abuse and how these factors may dynamically interact with individual-level vulnerabilities to produce a sexual offence for the first time. Marshall and Barbaree's (1990) Integrated Theory and more recent iterations (e.g., Smallbone, Marshall, & Wortley, 2008; Smallbone & Cale, in press), with their emphasis on the person-situation model of human behaviour (Mischel, 1968), provides a new opportunity to explore why some men begin sexually offending against children, and where, when and how this happens, thus providing the impetus for the current research.

1.2 Aims and Objectives

This research is based on the seminal work of Marshall and Barbaree (1990) and its more recent attachment-theoretical iterations (e.g., Smallbone et al., 2008; Smallbone & Cale, in press) as well as control theory (e.g., Gottfredson & Hirschi, 1990; Hirschi, 1969) and situational crime prevention frameworks (e.g., Cohen & Felson, 1979) to

explore the origins of child sexual abuse through the person-situation framework. Integrating developmental and situational approaches to explore the origins of child sexual abuse has both intuitive appeal and explanatory power and will have implications for informing prevention initiatives should they be verified empirically. Hence, this thesis is concerned with how developmental and situational approaches may, together, explain the origins of child sexual abuse. This is addressed through three key research questions, incorporating a number of specific sub-questions.

The first research question relates to developmental factors, and so is concerned with individual "criminality". The objective here is to explore the developmental experiences of child-sex *offenders* that may increase their propensity towards engaging in sexually abusive behaviour:

(1) *Do child-sex offenders generally report attachment problems and are these associated with lower capacities for, and commitment to, self-restraint?*

1.1 Do child-sex offenders report more insecure than secure childhood attachment?

1.2 Are there differences in the extent to which child-sex offenders report insecure paternal attachment and maternal attachment?

1.3 Do child-sex offenders report more insecure than secure adult attachment generally (i.e., trait adult attachment)?

1.4 Is attachment style stable from childhood to adulthood in child-sex offenders?

1.5 Is there a relationship between attachment insecurity and low self-control?

The second objective is to examine the initial sexual abuse incident in the context of its distal (i.e., developmental) and proximal (i.e., situational) antecedents. To do this, the "crime" itself is initially examined. That is, the situational dimensions of the initial sexual abuse incident (i.e., the onset *offence*) are explored:

(2) *What are the situational dimensions of the onset sexual abuse incident?*

Then, conceptual interactions between *offender*-related and *offence*-related factors in the onset of child sexual abuse will be explored, namely, how these distal individual-level vulnerabilities may interact with proximal situational factors (opportunity structures and precipitating conditions) to produce a sexual offence for the very first time (i.e., the person-situation interaction):

(3) *How might individual attachment-related vulnerabilities interact with immediate situational factors to trigger sexually abusive behaviour?*

3.1 What is the relationship between childhood attachment relationships and attachment orientation in the period preceding sexual offence onset?

3.2 Do attachment-related vulnerabilities emerge in response to stressors present in the period immediately preceding sexual offence onset?

The analyses are divided into three phases that examine (1) the developmental experiences of child sex offenders that may theoretically predispose them to sexually abusive behaviour; (2) situational dimensions of the onset sexual abuse incident that may precipitate this behaviour; and (3) how immediate situations and circumstances may coalesce with individual-level vulnerabilities to produce sexually abusive behaviour for the first time.

1.3 Scope of the Study

This study is concerned with understanding the origins of male child-sex offending. Whilst it is acknowledged that females can, and do, sexually offend against children, both official and self-report (e.g., victimisation and personal safety surveys) data indicate that sexual assault (including child sexual abuse) is primarily a male-perpetrated crime (Australian Bureau of Statistics [ABS], 2002, 2005; Cook, David, & Grant, 2001; Kalders, Inkster, & Britt, 1997; McCloskey & Raphael, 2005; Peter, 2009; Queensland Police Service [QPS], 2010; Wyatt, Burns-Loeb, Solis, & Vargas-Carmona,

1999). For instance, in the Western world, the prevalence of female-perpetrated sexual offending is estimated to be 4% to 5% (Cortoni & Hanson, 2005), with rates of recidivism less than 3% (Cortoni, Hanson, & Coache, 2010). In 2006 females constituted 1% of the total sexual offender prison population in Queensland (Queensland Corrective Services, 2006). Biologically- and evolutionary-based theories have been previously applied in an effort to explain why males may be more predisposed than females to engaging particularly in sexual offences (e.g., Blanchard, Cantor, & Robichaud, 2006; Quinsey & Lalumiere, 1995; Stinson, Sales, & Becker, 2008). Although theoretical and empirical examination of the nature and processes of female-perpetrated child sexual abuse deserves recognition in its own right, attention is given here specifically to males who continue to be responsible for the vast majority of these crimes.

Further, this thesis is concerned with explaining the initial sexual abuse incident, which is clearly the most important incident to prevent. Although valuable efforts have been made to define typologies of sexual offenders and offending patterns (e.g., familial and nonfamilial offending), to date there exists no theory that encompasses the diverse pathways to sexual offending or variations in sexual offending behaviour. Smallbone and Cale (in press) have emphasised the theoretical importance of the onset sexual offence, not least because offender motivations, opportunity structures and precipitating conditions may all change following the onset sexual offence. Sexual offenders vary widely in their pre-arrest and post-arrest persistence, but all have by definition committed a first offence (McKillop, Smallbone, Wortley, & Andjic, under review). So, concentrating on the onset offence also allows empirical analysis of a specific offence incident rather than of the more amorphous construct of ‘offending’, which requires generalising across potentially diverse individual circumstances. This is the focus of the current research. For the purposes of this research the onset sexual offence refers to the

offender's very first sexual contact (whether or not charged, detected or disclosed) with a child. For adult-onset offences a child is defined as a person aged 16 years or younger. Adolescent-onset offences were defined as sexual contact with a child three or more years younger than the offender.

The innovation of this research lies in the attempt to explain developmental and situational factors that may together result in sexual abuse occurring for the first time. The thesis findings have, of course, given rise to questions regarding factors associated with sexually abusive behaviour beyond the initial sexual offence, particularly whether such factors change over time. However, for the purposes of this research offence progression is not directly examined. Whilst not within the scope of the current thesis, propositions regarding offence progression will be examined empirically in studies subsequent to this doctoral research.

1.4 Overview of Document

The thesis comprises five chapters. In Chapter Two current theories and empirical data on developmental and situational factors associated with child sexual abuse are reviewed. The research methods are outlined in Chapter Three. Original empirical findings of are presented in Chapter Four. The final chapter, Chapter Five, synthesises the main findings, suggests implications for theory advancement and applied prevention strategies, addresses the methodological limitations, and considers directions for future research.

CHAPTER 2: LITERATURE REVIEW

In this chapter theoretical and empirical literature that considers the developmental and situational factors associated with child sexual abuse is reviewed. Developmental factors are discussed in Section 2.1. The concepts of attachment are now relatively well known and understood by scholars in sexual offender research. This section nevertheless considers, in detail, key attachment concepts that underpin the present research forming the basis from which to explore the person-situation interaction. Section 2.1 begins with an overview of the main premises of attachment theory. Then, attachment and its relevance to human development, adaptation and functioning across the lifespan are discussed. Where appropriate, links are made specifically to attachment-related research on child-sex offenders. Here, the relationship between attachment and self-control is also considered. Finally, consideration is given to the stability of attachment throughout the life course and how attachment-behaviour may change in response to contextual factors. Section 2.2 attends to the situational dimensions of child sexual abuse. First, the limited application of situational crime prevention frameworks to sex offender research is discussed. Then, drawing on available evidence, the possible utility of these frameworks for explaining child sexual abuse is illustrated, with a focus on the role of situations in providing opportunities, and impetus, to offend. The discussion then turns to understanding how individual developmental-related vulnerabilities and situational factors may together help to explain the onset of child sexual abuse (i.e., the person-situation interaction). Chapter Two concludes by restating the research questions, and related sub-questions, that comprise the thesis in light of the findings of the literature review.

2.1 Developmental Factors

Discussed in this section are developmental factors that may increase the susceptibility (or propensity) towards engagement in inappropriate (including sexually

abusive) behaviour. This section begins with an outline of the main premises of attachment theory. Then, the relevance of early attachment relationships for human development, adaptation and functioning over the lifespan is discussed with reference made to the nature and extent of attachment problems in child-sex offenders. Links between attachment and self-control is also covered here. Finally, consideration is given to attachment stability and change.

2.1.1 Attachment theory

Definitions

Before reviewing the main premises of attachment theory three elements of attachment are delineated: (1) the attachment *bond*; (2) attachment *behaviour*; and (3) attachment *style.* Attachment is an enduring affectionate *bond* between an infant and their primary caregiver (Ainsworth, 1989; Bowlby, 1988; Shaver, & Hazan, 1988). As Bowlby (1988) states, "the propensity to make strong emotional bonds to particular individuals [is] a basic component of human nature" (p. 3). Attachment *behaviour* is the overt expression of the attachment bond and consists of physiological and interpersonal elements (e.g., crying, distress, comfort-seeking) all of which serve to keep the attachment figure in close proximity and to ensure felt-security (Bowlby, 1988). In adulthood attachment behaviour may also include intimate touch, seeking support when distressed and emotional volatility and possessiveness when romantically threatened. Thus, attachment behaviour is highly context-specific (Rich, 2006). An attachment *style* develops out of infant-caregiver attachment experiences and is dependent upon the quality of caregiver responsiveness and consistency in meeting the needs of the infant in times of distress. These attachment styles influence how one interacts within interpersonal relationships, both during and subsequent to infancy.

Main premises

Attachment theory focuses primarily on the infant-parent attachment bond and its potential impact on the child's emerging concept of self, the social world and their interaction (Collins & Read, 1990). Bowlby (1969, 1973) defined attachment bonds in terms of five separate, but interconnected behavioural patterns (proximity, maintenance, safe haven, separation distress, secure base), all governed by an innate behavioural system with the evolutionary function of protecting the infant from harm (Bretherton, 1992; Hazan, Campa, & Gur-Yaish, 2006). Bowlby hypothesised that infants have an innate desire to gain and maintain proximity to an attachment figure and will retreat to the attachment figure as a safe haven when an infant perceives a threat. Further, infants will display resistance to separation (separation distress) from the attachment figure for any length of time, and will use the attachment figure as a secure base from which to explore the surrounding environment (Hazan et al, 2006). In essence then, attachment is about self-regulation. For Bowlby (1969, 1973) these early attachment experiences form an *internal working model* so that attachment patterns are enduring across time and situations.

The concept of the internal working model extends Bowlby's (1969, 1973) original attachment work into the realm of social and personality development. Borrowing from control systems theory, Bowlby (1969, 1973) discussed attachment in terms *goal-corrected partnerships*. Early childhood experiences result in a cognitive representation of self in relation to other, and the environment, and thus provide the foundation from which individuals perceive and evaluate interpersonal relationships and regulate attachment-related behaviours throughout the lifespan (Bartholomew & Horowtiz, 1991; Bowlby, 1980).

For Bowlby (1980) the importance of the primary caregiver's accessibility and responsiveness to an infant's distress signals over time is paramount to the development

of a positive (secure) internal working model. In secure parent-child attachment relationships, attachment behaviour is defined by attempts by the child to influence the attachment figure's behaviour, usually based on a degree of co-operation and mutuality. Theoretically, when a representational model of one's attachment figure(s) is loving, sensitive and caring, then a complementary model of oneself is formed (e.g., I am loveable, valuable, and worthy of care). This, in turn, instils the child with the confidence and optimism necessary to explore the world, negotiate challenges and effectively manage adversity (Bowlby, 1980). Without this confidence, infants develop uncertainty (insecurity) as to whether the attachment figure will be available and respond appropriately in times of distress. These infants will instead adopt coercive and non-compliant strategies to influence the attachment figure's behaviour, as they learn from the outset that their caregivers will be inconsistently responsive or insensitive to their needs (Belsky, Steinberg, & Draper, 1991). This instils unpredictability and internal conflict within the child that, in turn, impedes skills necessary to competently negotiate subsequent stages of psychosocial development and may lead to egocentricity towards, and withdrawal from, interpersonal relationships (Belsky et al., 1991). Hence, beyond infancy the internal working model provides the foundation from which individuals evaluate interpersonal relationships throughout their life, including expectations about close relationships in general, and intimate and sexual relationships in particular.

2.1.2 Attachment and its relevance to human development, adaptation and functioning across the lifespan.

Bowlby (1979) assumed a lifespan perspective of attachment, stating "attachment behaviour characterises human beings from the cradle to the grave" (p. 129). He proposed that, whilst most critical during early years, beyond infancy the attachment system continues to be activated throughout the lifespan, as evident in

adults’ needs for intimacy, emotional and physical closeness, support and reassurance from long-term partners when distressed and to the grief experienced by the loss of such an attachment figure (Mikulincer & Goodman, 2006; Mikulincer & Shaver, 2010). Thus, adult relationships become the prototype for attachment in adulthood (Hazan et al., 2006). Central to these ideas is the concept of the internal working model (Bowlby, 1979, 1988). As aforementioned, it is assumed that the internal working model is a relatively stable, persistent template of expectations about the roles of oneself and others in relationships, formed in the context of their early attachment experiences, and is therefore the mechanism by which attachment patterns remain stable throughout the life span (Hazan & Shaver, 1987). These models not only influence the capacities to form and maintain close interpersonal relationships, but are important for the regulation and expression of negative emotions (e.g., anxiety, anger, sadness) (Mikulincer & Shaver, 2010). Thus, early attachment relationships provide the developmental foundations for human adaptation and functioning throughout the life course.

Parent-child attachment relationships

Borrowing from Bowlby’s (1969, 1973) propositions, Ainsworth, Blehar, Waters and Wall (1978) advanced attachment theory using the Strange Situation procedure. By observing attachment behaviour between infants and their mothers during reunion episodes, in both familiar and unfamiliar environments, they yielded three classifications of infant attachment behaviour reflecting the quality of the relationship between infant and parent (Fox, Kimmerly, & Schafer, 1991). In line with Bowlby’s thesis, they found attachment types to be related to the level of consistency, sensitivity and responsiveness of each mother to her infant. For securely attached infants whilst short periods of crying were observed when separated briefly from their mother, the infants were easily consoled and content to explore their surroundings upon reunion. These mothers responded appropriately, consistently and sensitively to their infant’s

signals of distress, which appeared to instil confidence and skills in their child to regulate their distress in times of separation (a secure base).

On the other hand, mothers of anxious and avoidant children provided less consistency, responsiveness and predictability and were rejecting and insensitive to their infant's distress signals. As a result, these infants appeared unable to acquire the belief that others will be available to them as a source of security and comfort in time of distress (Ainsworth et al., 1978). Inconsistent caregiver behaviour consequently resulted in high levels of infant distress and resistance behaviours that alternated between attempts to be comforted by others and proximity seeking (e.g., clinginess) to their mother upon reunion (i.e., anxious/ambivalently insecure) (Ainsworth et al., 1978). Rejecting maternal behaviour resulted in the child displaying apparent lack of distress when separated from the primary attachment figure and avoidant (e.g., ignoring) behaviours upon reunion (i.e., avoidant insecure) (Ainsworth et al., 1978). Ainsworth et al.'s three main types of childhood attachment have been clinically and empirically validated. Main and Solomon (1986), following a review of Ainsworth et al.'s data, later identified an additional insecure childhood attachment type, *disorganised,* in which attachment behaviours are manifested as a combination of avoidant and anxious/ambivalent behaviours. These individuals exhibit no coherent strategy for dealing with separation or reunion episodes with their primary attachment figure and display conflicting behaviours (e.g., combined approach-avoidance behaviours) (Main & Solomon, 1986). Parents of these children are usually harsh and unpredictable in their reactions to the child, and represent both a cause of (e.g., abuse) and solution to the child's distress (Lyons-Ruth, Repacholi, McLeod, & Silva, 1991; Lyons-Ruth, 1996). Research shows that all these unique attachment relationships have profound impacts on the adaptation and functioning of children during early and middle childhood.

Characteristics of a *secure* attachment type include having the self-confidence and autonomy to explore the surrounding environment and exhibiting positive responses to parental contact. Securely attached children tend to develop a better-balanced mind-state and thus, develop resilience and an enhanced ability to cope with stressful situations (Egeland & Sroufe, 1981; Svanberg, 1998). These individuals possess more self-confidence, display warmth towards others, and develop better social skills necessary to interact on a daily basis and to maintain effective interpersonal relationships (Grossmann & Grossmann, 1990; Shaver & Hazan, 1988; Sroufe, 1988; Svanberg, 1998). Securely attached children exhibit higher peer-related social competence as well as compliance and empathy (La Freniere & Sroufe, 1985; Sroufe, 1983; Waters, Wippman, & Sroufe, 1979; Youngblade & Belsky, 1992). During middle childhood, attachment security to both parents has been linked to greater child-, teacher- and parent-rated social competence (Diener, Isabella, Behunin, & Wong, 2008). Securely attached children are also much less likely to engage in anti-social behaviour (Grossmann & Grossmann, 1990). General population studies estimate the proportion of secure attachment to be around 55-65% (Campos, Barrett, Lamb, Goldsmith, & Stenberg, 1983; Hazan & Shaver, 1987; van Ijzendoorn & Bakermans-Kranenburg, 1996; van Ijzendoorn, Schuengel, & Bakermans-Kranenburg, 1999; Waters, Hamilton, & Weinfeld, 2000).

Conversely, insecurely attached individuals fail to acquire the skills necessary to form and maintain effective interpersonal relationships (Sroufe, 1988). First, the *anxious-ambivalent* attachment type is associated with attention-seeking behaviour and displays of neediness, impulsivity, passivity, and helplessness (Sroufe, 1988). These children also tend to have low self-esteem (NICHD Early Child Care Research Network, 2006). Second, the *avoidant* attachment type is characterised by fear of rejection and interpersonal closeness. Avoidant-attached children tend to lack of

empathy and exhibit hostility, antisocial behaviour and dysregulated emotion as well as inappropriate attention-seeking behaviour (Sroufe, 1988). Avoidant-attached children have been found to engage in aggressive and victimising peer interactions, exhibit inappropriate emotional expression and withdrawal, and have a distorted sense of competence and autonomy in self (Carlson & Sroufe, 1995). Third, children classified as *disorganised* tend to adopt controlling interpersonal strategies, have difficulties managing stress and in constraining aggression (Main & Goldwyn, 1984; Main & Solomon, 1986; Solomon, George, & DeJong, 1995). They tend to experience internalising and externalising problems (Lyons-Ruth, Easterbrooks, & Cibelli, 1997). They also have profound difficulties adjusting to school (Carlson, 1998, Granot & Mayseless, 2001)

Less is known about the nature and impact of father-infant attachment relationships. Some research indicates a high degree of concordance, even dependency, between maternal and paternal attachment relationships (Fox et al., 1991; Schoppe-Sullivan et al., 2006; van IJzendoorn & De Wolff, 1997). Other research suggests that infants establish affectionate bonds with their fathers by the end of the first year, which is independent of, and unique to, those established with their mothers (Bretherton, 2010; Lamb, 1977). Fathers' active involvement with children has been associated with the child's obedience, emotion regulation, and early academic success, and fathers' negative interactions with children have been associated with the child's attachment insecurity, problems with peers, and conduct problems (DeKlyen, Speltz, & Greenberg, 1998; Newland, Coyl, & Chen, 2011). Paternal sensitivity and fathers' own attachment status are reliable predictors of children's attachment security at age 10 and 16 (Grossmann et al., 2002; Roelofs, Meesters, & Muris, 2008). In particular, qualities such as paternal sensitivity, warm reciprocal play and appropriate encouragement are associated with infant-father attachment security and optimal toddler development (Cox,

Owen, Henderson, & Margand, 1992; Easterbrooks & Goldberg, 1984; Hazen et al, 2010). However, these findings are not consistent (e.g., Caldera, Huston, & O'Brien, 1995). While boys and girls seem to do best with secure attachment to both parents, boys' attachments to their fathers seem to be especially important for later social competence (Diener et al., 2008). Lamb and Lamb (1976) cite evidence that fathers tend to have stronger attachments to their sons than to their daughters and that these attachments become particularly salient from the second year. They suggest the nature (e.g., warmth and sensitivity) of the father-son relationship "facilitates the adoption of critical sex-appropriate behavior patterns by the boys, who are able to model, and are in addition given, training by their fathers" (Lamb & Lamb, 1976, p. 382). Further, Johnson (1987) found closeness to fathers (rather than mothers) to be a better predictor of involvement in delinquency by boys. Thus, paternal attachment bonds may be particularly important for the development of prosocial behaviour in boys.

To summarise, insecurely attached (e.g., anxious, avoidant or disorganised) children often find it difficult to form constructive relationships with others. They suffer from lower self-confidence and esteem, have poorer interpersonal skills, and display more externalising behaviours than their secure counterparts. This can create vulnerability (as opposed to resilience) diminishing the capacities to cope with daily stressors and interpersonal relationships (Marshall, 1993; Sroufe, 1988). Whilst attachment to both father and mother are important for positive childhood development, evidence indicates that these roles, and impacts, may be qualitatively different and that father-son attachments may be critical for particular developmental outcomes of boys, than mother-son attachment relationships.

Sexual offenders' parent-child attachment experiences

Many empirical studies have found a high (but by no means universal) prevalence of adverse developmental experiences in the backgrounds of sexual

offenders and much of this work implicates attachment-related problems (e.g., abuse and neglect; low nurturance and affection; parental rejection). Studies more directly examining attachment in sexual offenders have similarly found a high (but not universal) prevalence of attachment problems among different types of sexual offenders although this finding is not consistent. Most studies have indicated that insecure childhood attachment is more prevalent in sexual offenders than in nonsexual offenders and non-offenders (Craisatti, McClurg, & Browne, 2002; Marsa et al., 2004; McCarthy, 2004; Smallbone & Dadds, 1998). Other studies (e.g., Marshall, Serran & Cortoni, 2000) have found no differences in attachment insecurity between sexual and non-sexual offenders. Although Smallbone and McCabe (2003) found higher proportions of secure rather than insecure attachment in their sample of child-sex offenders, overall, these rates were lower than those reported in the general population. Some studies have found that sexual offenders are more likely to report attachment problems with their fathers than with their mothers (Davidson, 1983; Dwyer & Amberson, 1989; Smallbone & Dadds, 1998; Smallbone & Wortley, 2000), but it is not yet clear whether maternal and paternal attachment play different roles in the development of sexual abuse and other coercive sexual behaviour (Smallbone & Dadds, 2000, 2001). These adverse developmental experiences have also been linked to several risk factors for non-sexual and sexual offending, including lack of empathy and perspective taking (e.g., Bumby & Hansen, 1997; Hudson & Ward, 1997; Jamieson & Marshall, 2000; Marsa et al., 2004; Marshall & Mazzucco, 1995; McCormack, Hudson, & Ward, 2002; Smallbone & Dadds, 1998, 2000, 2001) and emotion regulation problems (Marshall, 1993).

Overall the literature highlights that for many (but not all) child-sex offenders, childhood attachment relationships tend to be problematic. For many child-sex offenders these early attachment problems appear to be a developmental antecedent for later sexual offending. This may manifest itself first by engaging in emotionally

detached, personally risky or socially irresponsible behaviour (Smallbone et al., 2008). Evidence points to the possible role of paternal attachment insecurity, particularly avoidant attachment, in later coercive sexual behaviour, although these findings remain tenuous. These developmental experiences may therefore result in the individual-level vulnerabilities that increase the propensity to engage in antisocial (and for some sexually abusive) behaviour.

Adult attachment

Adolescence is an important transitional period whereby the child becomes less dependent on their primary attachment figures and more reliant on peer attachment relationships, which often challenges their own definitions and concept of the world. This is also a time where the capacity to form and maintain intimate relationships is especially important. Despite being a transitional period some studies (e.g., Hamilton, 2000) have found significant stability in attachment styles during this time. Secure attachment has been linked to psychological wellbeing and self-esteem, social competence, effective communication and enhanced resilience in response to stressful life events at this age (Allen, Moore, Kupermine, & Bell, 1998; Armsden & Greenberg, 1987; Feeney & Noller, 1990; Patterson & Moran, 1988). Insecure attachment, particularly to fathers, has been found to predict anti-social and delinquent behaviour in both adolescent boys and girls (e.g., Marcus & Betzer, 1996). Insecure attachment has also been associated with substance abuse problems, behavioural problems and problematic peer relations during adolescence (Elgar, Knight, Worrall, & Sherman, 2003).

During late adolescence and adulthood the primary attachment figure shifts to a romantic partner. There has been considerable theoretical and empirical attention to understanding adult attachment relationships, the impact of childhood attachments experiences on the development of adult attachment orientation and behaviour, and the

stability of these attachment patterns. Hazan and Shaver's (1987) theoretical approach to adult love relationships is perhaps the most comprehensive, concentrating on the continuity of affectionate bonds between childhood and adulthood. These authors made three important discoveries about adult attachment: (1) there were similar prevalence rates between the three adult attachment styles to those identified in infancy, (2) experiences of love differed according to the three kinds of adult attachment, and (3) childhood attachment patterns and consequent mental models of self and other (e.g., internal working model) predicted adult romantic orientation (Hazan & Shaver, 1987).

This interest in developmental implications of attachment through to adulthood has led to the development and testing of several adult attachment measures. Examples include the clinical Adult Attachment Interview (AAI) (George, Kaplan, & Main, 1984), the Relationship Questionnaire (Bartholomew & Horowitz, 1991) and more recently, the Experiences in Close Relationships Inventory (Brennan, Clark, & Shaver, 1998), with dimensional measures now advocated as the most useful for conceptualising and examining attachment orientations (Mikulincer & Shaver, 2010). Using Bowlby's original conceptualisations, Bartholomew (1990; see also Bartholomew & Horowitz, 1991) developed a model of adult attachment based on dichotomising beliefs about self and other as either positive or negative, resulting in four adult attachment prototypes that parallel childhood attachment styles. These are presented in Table 2.1.

Securely attached adults tend to have a positive sense of self-worth and expect that others will perceive them positively and therefore accept them and respond to their needs appropriately (Bartholomew & Horowitz, 1991). These individuals are likely to be socially confident, autonomous, freely share feelings and seek support appropriately. Similarly, other studies have found adults who report early childhood attachment security to have higher self-esteem, less anxiety and self-doubt, and are more capable of sustaining emotionally fulfilling relationships (including friendships), compared to

those from early insecure attachment backgrounds (Feeney & Noller, 1990; Kirkpatrick & Davis, 1994).

Table 2.1

Adult Attachment Types

Model of Other (Avoidance)	Model of Self (Dependence) Positive (Low)	Model of Self (Dependence) Negative (High)
Positive (Low)	Secure	Preoccupied Anxious
Negative (High)	Dismissing Avoidant	Fearful Avoidant

Note. Adapted from Bartholomew & Horowitz (1991).

Hazan and Shaver (1987) found secure adult attachment orientation to be characterised by more enduring, accepting and supportive adult intimate relationships. On the other hand, Hazan and Shaver (1987) found insecure adult attachment has been characterised by brief, intermittent relationships typified by obsession, emotional instability, and extreme sexual attraction and jealousy (anxious) and a pervasive fear of intimacy and rejection, emotional volatility and jealousy (avoidance).

More specifically, *fearful-avoidant* types lack self-worth and feel undeserved of love and support by others. They have difficulties sharing feelings and thoughts with others (Bartholomew & Horowitz, 1991). They are socially avoidant due to fears of rejection by others, despite their desire for such closeness. They are therefore fearful and avoidant of intimacy with adult partners, often engaging in superficial intimate relationships. *Dismissing-avoidant* types view themselves positively, yet are negatively disposed to others. As such, they deny their need for social connection in order to protect themselves against such disappointment (Bartholomew, 1990). Their social

behaviour is somewhat detached and aloof to counter any sense of dependency and foster feelings of invulnerability to others. They are therefore indifferent to intimacy with others. Finally, *preoccupied-anxious* types experience chaotic and contradictory expectations of themselves, and the need for acceptance from those they perceive as important. These experiences result in them becoming highly preoccupied with relationships, exhibiting high levels of neediness and control (Bartholomew & Horowitz, 1991). Their intimate behaviour fluctuates according to these expectations.

The dimensions of the model also indicate levels of avoidance and dependency on others (indicated in parentheses in Table 2.1), so that for *secure* types a positive regard for self and others means they are comfortable with interpersonal closeness and intimacy. Whilst the *dismissing-avoidant* and *fearful-avoidant* types both avoid intimacy, *fearful* types do so for fear of rejection, whereas *dismissive* types do so because they view others negatively. *Preoccupied-anxious* and *fearful-avoidant* types both depend on others to maintain feelings of self-worth, but whilst *preoccupied-anxious* types seek to manipulate relationships to do this, *fearful-avoidant* types avoid such interpersonal closeness for fear of later disappointment (Bartholomew & Horowitz, 1991). Not only do these early childhood experiences have later implications for the adult attachment orientation and behaviour, they may also shape the development and functionality of adult attachment-related behaviours - attachment, caregiving and sexual behaviour (Smallbone et al., 2008).

Attachment, caregiving and sex

An important premise of attachment theory is the functional independence of the attachment, caregiving and sexual behaviour systems. These innate human behavioural systems together promote species survival (Bowlby, 1969, 1973). All three also uniquely contribute to intimacy in adult partnerships (Farrugia & Hohaus, 1998). The effective integration of these systems is influenced by an individual's attachment history

(Hazan & Shaver, 1987). Bowlby (1973, 1982) postulated that if an individual is securely attached, he/she will have functional independence of these three systems. From Bowlby's attachment perspective, adult romantic love and relationships are influenced by each partner's innate needs and capacities for attachment, caregiving and sex (Mikulincer & Goodman, 2006).

The attachment system is considered the primary behavioural system (Bowlby, 1969; 1973). This system adapts to the primary caregiver environment (Farrugia & Hohaus, 1998). The nature, characteristics and function of the attachment system are essentially the same in both childhood and adulthood. However, in childhood the behaviours are typically unidirectional, and in adulthood these relationships are reciprocal. Shaver and Hazan (1988) contend that because this behavioural system is the first to develop, and is highly influenced by the social interaction between infant and caregiver, the form that it takes will in turn affect the formation of the caregiving and sexual systems. The attachment system and associated behaviour are highly situationally responsive (Marshall, Hudson, & Hodkinson, 1993).

The caregiving behavioural system's main function is the provision of care, protection and support. It also promotes the welfare of others who are dependent or in need, whether temporarily or permanently, with the goal to alleviate stress of another (e.g., providing *a safe haven*) or promote growth (e.g., provision of a *secure base*) (Kunce & Shaver, 1994; Mikulincer & Goodman, 2006). Like attachment behaviour, caregiving behaviour is evident in both parent-child and adult romantic relationships (Farrugia & Hohaus, 1998). In parent-child relationships the parent provides caregiving behaviour in response to a child's signal of distress without the expectation of reciprocity. In adult relationships, especially stable, long-term relationships, caregiving behaviour is more mutual, with one partner providing essential support, guidance and promotion of safety in times where the other person is in distress and vice versa (Hazan

et al., 2006). Therefore, in adult relationships failure to provide timely and empathic responses to a partner's signals is more likely to lead to frustration and relationship tension. According to Shaver and Hazan (1988) a securely attached individual will have developed a functional caregiving behavioural system and therefore will be able to provide appropriate caregiving responses to their partner in times of distress. In contrast, insecurely attached individuals find it more difficult to provide the required sensitivity and timely response required when faced with such situations.

The sexual behavioural system's main evolutionary function is copulation and procreation and becomes fully developed by early adulthood (Farrugia & Hohaus, 1998). In order to achieve these goals individuals must select an appropriate (and fertile) partner of the opposite sex, persuade that person and then engage in a sexual act (Mikulincer & Goodman, 2006). Its secondary function is to maintain satisfaction in long-term relationships (Mikulincer & Goodman, 2006). Adult attachments may be sexual in nature in the sense of sexual attraction and behaviour (Hazan et al., 2006; Shaver & Hazan, 1988). So, when there is a dysfunctional sexual system in one or both partners this can lead to conflict, self-doubt about their partners love and insecurity about the stability of the relationship (Mikulincer & Goodman, 2006). Further, in the course of a relationship, ongoing sexual relations between two individuals tend to be accompanied by gradual and reciprocal attachment and caregiving components, whereby sex becomes an integral part of attachment as an individual enters adulthood (Farrugia & Hohaus, 1998). Farrugia and Hohaus (1998) found that the level of intimacy within adult pair-bonds is significantly predicted by the behavioural systems of attachment, caregiving and sexuality. Thus, adult relationships, by nature, involve attachment and caregiving components as well as sexual components (Hazen et al., 2006).

Bowlby (1969, 1973) proposed that in addition to the sub-cortical, neural structures that operate within an individual, there are also cognitive-behavioural mechanisms at play. This is evident from one's ability to engage in a cost-benefit analysis, and to correct and adjust behavioural responses according to environmental contexts and demands in order to achieve one's goal more effectively (Mikulincer & Goodman, 2006). Bowlby (1973) accords that early interpersonal transactions stored in the internal working model subsequently organise the functionality of the three behavioural systems and guide an individual's behaviour in order to attain the systems' goals in future contexts (Mikulincer & Goodman, 2006). Although these systems are affected by each other (e.g., the caregiving and attachment systems are often perceived to complement one another) and are goal-corrected, in an optimally functioning individual they are conceptually distinct from one another (Belsky, 1999; Mikulincer & Goodman, 2006). When these systems are functioning optimally the consequent behaviours contribute positively to human survival (Ainsworth, 1989; Bowlby, 1969, 1973; Mikulincer & Goodman, 2006). So, the functionality of these systems has consequences for individual functioning and quality of life. For example, they govern the development and maintenance of stable and mutually fulfilling primary relationship bonds, whilst a malfunction in these systems may lead to relationship conflict and dissolution (Hazan & Shaver, 1987; Mikulincer & Goodman, 2006; Shaver & Hazan, 1988). Pertinent to this thesis, many behaviours associated with the sexual behaviour system are commonly engaged in, in the context of attachment (care-seeking) and caregiving (e.g., sitting close, hugging, holding hands, kissing) (Shaver & Hazan, 1988). These behaviours are also commonly found in infant-parent dyads (Hazan & Zeifman, 1994) so that, in those with less functioning behavioural systems (i.e., insecure adults), boundaries between such behaviours may be compromised thereby increasing the risk of engagement in inappropriate sexual contact.

Sexual offenders' adult attachment experiences

Compared to non-offenders, sexual offenders are more likely to report insecure adult attachment, particularly fearful-avoidant and preoccupied-anxious attachment styles (Baker & Beech, 2004; Lyn & Burton, 2004; Marsa et al., 2004; Sawle & Kear-Colwell, 2001; Smallbone & Dadds, 1998; Stirpe, Abracen, Stermac, & Wilson, 2006; Ward, Hudson, & Marshall, 1996). They also report more disorganised attachment-related behaviours than non-offenders (Baker & Beech, 2004). However, differences have not been consistently found between different types of sexual offenders (e.g., adult-victim and child-victim offenders), or between sexual and nonsexual offenders (e.g., Jamieson & Marshall, 2000; Marshall, Serran, & Cortoni, 2000; Smallbone & Dadds, 1998; Smallbone & Wortley, 2000; Ward et al., 1996). Others have found no differences in attachment insecurity between sexual or non-sexual offenders (Abracaen, Looman, Fazio, Kelly, & Stirpe, 2006). Furthermore, whilst insecure adult attachment has been linked to coercive sexual behaviour, the role of attachment types in differentiating offence patterns also remains unclear (Smallbone & Dadds, 2000, 2001). Sexual offenders also report more intimacy deficits, emotional loneliness and lower self-esteem than nonsexual or community samples (Bumby & Hansen, 1997; Marshall & Mazzucco, 1995). Child-sex offenders in particular tend to be most deficient in intimacy among sex offender samples (Seidman, Marshall, Hudson, & Robertson, 1994). They also lack self-confidence and do not possess the necessary skills to establish close intimate relationships (Marshall, Hudson, & Hodkinson, 1993) leading researchers to conclude that child-sex offenders may, because of early parental rejection, seek out children to fulfil their intimacy needs with whom they feel less vulnerable, and from whom they are less likely to fear rejection. Thus, adult attachment problems seem to be characteristic of this offender group.

2.1.3 Attachment and self-restraint

The dispositional qualities of insecurely attached individuals in many ways reflect attributes of individuals with low self-restraint (e.g. low empathy, impulsivity, self-regulation problems). One of the aims of the current research is to explore theoretical links between attachment insecurity, self-restraint and sexual offending behaviour. In the general criminological literature self-restraint is often used interchangeably with the terms self-regulation and self-control. In the current research the term 'self-restraint' is used for two reasons. First, the term self-control typically relates to an individual's capacities to exercise self-control, with little regard to their commitment to exercise it. Tittle, Ward and Grasmick (2004) propose that "people who simultaneously lack the capacity for strong self-control and who possess little desire to control themselves may be especially prone to criminal behavior" (p. 147). In this thesis a similar approach is taken with self-restraint conceptualised as a two-dimensional construct comprising the *capacity for*, and *commitment to*, self-control. Second, sexual offending may be "poorly or highly controlled but it always involves an absence of restraint, even if only momentarily" (Smallbone & Cale, in press, p. 20). In this thesis the term self-restraint is used accordingly. However, in this section several references are made to studies examining the links between attachment and self-control. In these instances, the term self-control is used.

Contemporary ideas regarding attachment and self-restraint can be traced back to Bowlby's (1944) original clinical work with young offenders in pre-war London. He proposed that the 'affectionless character' of his young offender clients (e.g., lack of concern for others; the inability to form relationships) could be traced to disrupted maternal attachment (Bowlby, 1944). From these ideas, two lines of research emerged: a psychological approach concerned with the effects of early parent-child attachment on the development of empathy and perspective-taking, moral reasoning, and self-

regulation of aggression and violence (e.g., Fonagy et al., 1997; van Ijzendoorn, 1997); and a sociological approach concerned with the development of positive social attachments as a critical aspect of informal social control (e.g., Hirschi, 1969; Gottfredson & Hirschi, 1990; Sampson & Laub, 1990). Although they involve different levels of analysis and somewhat different conceptions of human attachment, these two approaches can be reconciled under the general rubric of control theory (Hirschi, 1969). That is, attachment relationships are important for shaping prosocial behaviour by providing the developmental foundations for: (1) acquiring key capacities for self-restraint (e.g., empathy, moral reasoning and self-regulation) (i.e., Bowlby, 1979) and (2) for cultivating a commitment to self-restraint by fostering connections and bonds to wider (pro) social institutions and mores, which also act as informal inhibitors of anti-social behaviour (i.e., Hirschi, 1969).

Current evidence suggests a relationship exists between attachment and capacities for self-restraint. Secure attachment has been linked to higher levels of self-control (Tangey, Baumeister, Boone, & Luzio, 2004). Individuals with high self-control tend to have fewer impulse control problems, an increased capacity for empathy and perspective-taking, effective emotion regulation strategies and posses more moral responsibility than those with low self-control (Fonagy et al., 1997; Greenberg, 1999; Tangey et al., 2008). It appears attachment relationships play a role in the development of key capacities for self-restraint, which are, in turn, necessary for effective emotional and behavioural self-regulation. As Tangey and colleagues (2004) conclude, "self-control strengthens and is strengthened by good, stable relationships" (p.301) so that one develops the "ability to regulate the self strategically in response to goals, priorities and environmental demands" (p.314). It appears that positive developmental experiences and attachment relationships serve to increase one's resilience and serve as a protective barrier against later adverse life circumstances, whilst negative

developmental experiences and attachment relationships create individual-level vulnerabilities, particularly a reduced capacity to effectively organise and regulate emotions and behaviours in the face of adversity.

According to Gottfredson and Hirschi (1990) there are six key characteristics of individuals with low self-control: (1) they require immediate (rather than delayed) gratification as they essentially live in the "here-and-now", resulting in impulsivity; (2) they prefer simple, unskilled tasks over arduous endeavours that require commitment and tenacity; (3) they are more likely to engage in personally risky and thrill-seeking activities; (4) they do not see the long-term value in investing in social institutions so that they are less likely to commit long-term to relationships, jobs and friends; (5) they are often unskilled and embark upon tasks that require little planning; and (6) they are insensitive, self-centred and lack empathy towards others. It is suggested that this constellation of traits is developed by age eight and remains relatively stable thereafter (Gottfredson & Hirschi, 1990). Individual differences in the propensity for crime thus become a function of an individual's level of self-control. Low self-control manifests itself in a multitude of non-criminal behaviours and other imprudent behaviours through the life course (e.g., excessive drinking, smoking, gambling, sexual promiscuity) (Burton et al., 1999; Cleary, 2004; Tremblay, Boulerice, Arseneault & Niscale, 1995), and has been linked to property and violent crime (Baron, 2003), higher rates of delinquency (LaGrange & Silverman, 1999; Tremblay et al., 1995) and sexual offending (Cleary, 2004). Empirically, low self-control has been found to be one of the strongest correlates of crime (Pratt & Cullen, 2000).

With regard specifically to sexual offending, Marshall and Barbaree's (1990) ideas regarding the formation of criminal dispositions as a result of adverse developmental experiences in many respects parallel the main tenets of control theory (Gottfredson & Hirschi, 1990). Essentially, Marshall and Barbaree (1990) proposed that

positive socialisation is required to inhibit the universal biologically-based propensity for self interest and sexual aggression, particularly for adolescent and adult males. Early attachment problems are understood to lead to later problems managing physical and emotional intimacy, increasing the risk for sexual behaviour to be expressed in impersonal circumstances or with less threatening sexual partners, such as children. Subsequent to Marshall and Barbaree (1990) there have been numerous other conceptual models proposed for the role of offenders' attachment problems in sexual offending. Some have concentrated on more or less direct developmental links between attachment problems and sexual offending (e.g., Beech & Mitchell, 2005; Smallbone & Dadds, 1998; Ward, Hudson, Marshall, & Siegert, 1995). However, they do not adequately explain how distal developmental factors, such as childhood attachment problems, could be responsible for a specific behavioural outcome, such as sexual offending. Others have retained a central focus on the proximal interactions between these general developmental vulnerabilities and situational factors to explain the distal effects of early attachment problems (e.g., Burk & Burkhart, 2003; Mitchell & Beech, 2011; Smallbone, 2005, 2006; Smallbone & Cale, in press; Smallbone et al., 2008; Ward & Beech, 2006). In particular Smallbone et al.'s (2008) theoretical links between early attachment problems and reduced functionality of the adult attachment, caregiving and sexual behavioural systems may be useful in understanding the more specific links between early attachment problems, problems with self-restraint and later sexually abusive behaviour. In sum, the literature suggests that early attachment experiences may influence the developmental pathway of offenders, with adverse developmental relationships and poor quality parenting resulting in lowered capacities for, and consequently commitment to, self-restraint. This may increase one's susceptibility not only to socially inappropriate, but also sexually inappropriate behaviour and particularly so in the context of caregiving and attachment.

2.1.4 Attachment stability and change

Most of the research on attachment problems in sexual offenders has been based on conceptions of attachment style as a stable, trait-like characteristic. Meanwhile, in the broader field of attachment research a consensus has emerged that childhood and adult attachment styles are less stable than had originally been assumed and thus only probabilistically lead to certain outcomes (Belsky, Campbell, Cohn, & Moore, 1996; Lewis, Feiring, & Rosenthal, 2000; Smallbone & Dadds, 2000; Sroufe, 2005; Thompson, 2000). Whilst stability rates of between 60% and 70% have been found over periods of up to four years (Kirkpatrick & Hazan, 1994; Scharfe & Bartholomew, 1994), attachment style change is also evident (Davila, Burge, & Hammen, 1997; Fuller & Fincham, 1995) particularly when later relationships do not reflect early developmental mental representations (Main, Kaplan, & Cassidy, 1985). For example, changes in caregiver environments and stressful life events (e.g., severe illness, parental illness, divorce) have been shown to alter attachment patterns from infancy, through childhood and adolescence, to adulthood (Belsky, Spritz, & Crnic, 1996; Waters, Hamilton, & Weinfield, 2000). This suggests that even in securely attached individuals insecure attachment behaviour may be precipitated by adverse interpersonal circumstances (e.g., perceived or real unresponsiveness by an intimate partner). Davila, Karney, & Bradbury (1999) found changes in relational schemas in response to situational events and circumstances to affect attachment style change. In response, the application of the person-situation framework to attachment theory has been more recently endorsed (Noftle & Gillath, 2009).

These findings suggest that early attachment experiences may generally shape an individual's expectations of (and therefore behaviour in) later interpersonal relationships. However, new relationship experiences or environmental disruption may modify these expectations (and behaviour) and even counteract the impact of stable,

secure attachments in childhood (Lewis et al., 2000; Vaughn, Egeland, Sroufe, & Waters, 1979; Weinfield, Sroufe, & Egeland, 2000). Conversely, the involvement in long-standing, nurturing intimate adult relationships characterised by care, warmth and responsiveness, may remediate early insecure attachments. Attachment (care-seeking) behaviour itself is highly situation-dependent (Ainsworth et al., 1978; Smallbone, 2006): individuals with a generally secure attachment style may nevertheless behave in avoidant, fearful, or anxious ways in certain circumstances, if only temporarily or momentarily. Hence, whilst conceptually attachment is regarded as a "single global orientation toward close relationships, it is actually rooted in a complex network of cognitive and affective processes and mental representations, which includes many episodic, context-related, and relationship-specific as well as general attachment representations" (Mikulincer & Shaver, 2010, p. 4). From this perspective child-sex offenders (like all other individuals) may become more or less secure at different times over the life course in response to individual circumstances.

2.1.5 Summary of developmental factors

One objective of this thesis is to investigate developmental links to the onset of child sexual abuse. In sum, current research suggests that normal and maladaptive patterns of human social behaviour result from early socialisation experiences, the quality of which depends on the effectiveness of parenting practices. From an attachment perspective it is the quality of the parent-child attachment bond that affects the quality of child-rearing practices. Thus, the developmental foundations for pro-social behaviour are connected to the quality of the parent-child attachment relationship. When these early parent-child attachment relationships are characterised by sensitivity, love, acceptance, consistency and appropriate discipline children acquire the key capacities for effective intra- and inter-personal functioning, including the capacity for, and commitment to, self-restraint. They therefore learn to regulate their behaviour in a

socially acceptable way. In turn, these children are likely to embark upon life's challenges with confidence and resilience as well as actively seek out, form and maintain strong attachment relationships with their peers throughout the life span.

Insecure parent-child attachments instead tend to lead to more chronic developmental vulnerabilities as a result of poor-quality socialisation, characterised by harsh and inconsistent discipline and lack of parental investment to recognise, respond to inappropriate behaviour and consequently shape prosocial behaviour. Parenting practices are also likely to model ineffective strategies for managing stress and emotion. These qualities together create intrapersonal deficits in the capacities for, and commitment to, self-restraint and interpersonal deficits in the capacity to effectively establish and maintain appropriate interpersonal relationships. Early disruption to the attachment behavioural system may also impede the development and systematic functioning of the adult attachment, caregiving and sexual behaviour systems increasing the risk of sexual motivations and behaviours being activated in the pursuit of attachment needs.

According to the literature an individual's early mental representation of the responsiveness and sensitivity of others and value of self (i.e., the internal working model) is likely to be enduring as their developmental pathway unfolds leading to relative stable patterns of attachment-related social behaviour over time. However, this path is not immutable. It has been established that life events and circumstances can profoundly influence attachment behaviour so that change may also occur, even if only temporarily, at different times during the life course. Early attachment relationships nevertheless generally influence intrapersonal and interpersonal functioning throughout the lifespan.

For many child-sex offenders their early developmental experiences are characterised by insecure parent-child attachment relationships. Nonetheless, some also

report secure attachments. Many also report involvement in antisocial and criminal behaviours prior to engaging in sexually abusive behaviour, but this too is not universal. This suggests, for some offenders at least, that these early attachment relationships may represent one etiological pathway to a repertoire of socially (including sexually) inappropriate behaviours. For others, changes in life may alter their orientation to later attachment relationships thereby increasing their susceptibility to meeting attachment needs in socially inappropriate ways. More specifically, evidence indicates that father-son attachment may be important for the development of self-regulatory skills. Thus, investigating the nature, extent and stability of these individual attachment-related vulnerabilities may be useful in understanding early developmental pathways to the onset of sexually abusive behaviour, and how, for some, life events and circumstances may alter the direction of this pathway leading to the sexual abuse of a child for the first time. The next section will shift the focus from these developmental links, and indeed from the offender, to the offence itself and situational features of child sexual abuse incidents.

2.2 Situational Factors

The preceding section concentrated on offender development and the notion of "criminality". From a developmental perspective, attachment-related vulnerabilities, arising out of early problematic parent-child relationships, may increase an individual's propensity to sexually offend against a child. This section shifts the focus from the dispositional characteristics of the *offender* to the child sexual *offence.* The focus here is on understanding situational factors that may facilitate the onset of child sexual abuse. This section begins by briefly outlining current limitations in the application of situational crime prevention frameworks to the area of child sexual abuse. Then, using available evidence, it illustrates the potential utility of situational crime prevention frameworks for explaining how such events unfold.

2.2.1 Current limitations

As mentioned in Chapter One, despite the successful application of situational crime prevention perspectives to crime and delinquency more generally, concerted efforts to understand child-sex offending behaviour, both theoretically and empirically, tend still to focus more or less exclusively on the dispositional characteristics of the offender. This largely clinical focus has led to child sexual abuse being conceptualised within the realm of other non-criminal, but sexually deviant behaviours (e.g., fetishism/cross dressing) rather than non-sexual criminal behaviours. This has resulted in an emphasis on qualities within the individual that purportedly sets them apart from the rest of society, including other types of offenders (Marshall, Serran, & Marshall, 2006), and has led to the situational and interpersonal context within which these offences occur and by which they are defined to be inadvertently overlooked (Smallbone et al., 2008; Wortley & Smallbone, 2006). Even where conceptual models have acknowledged the role of situational factors in sexual offending (e.g., Finkelhor, 1984; Marshall & Barbaree, 1990; Smallbone et al., 2008; Pithers et al., 1983), these dimensions have been subjected to little empirical scrutiny. This may be because historically situational crime prevention has focussed on property crimes and public domains. Child sexual abuse, on the other hand, is a personal crime occurring predominantly within the private domain.

Whilst not directly examining the role of situational factors in the commission of sexual abuse, current findings strongly suggest that the environmental factors present within situations preceding child sexual abuse provide both the opportunity and the impetus to offend (e.g., Wortley & Smallbone, 2006). The failure to consider the crime-facilitating nature of these situations may have, in turn, impeded the overall capacity to recognise, intervene and advance prevention efforts in this area (Marshall, Serran, & Marshall, 2006; Wortley & Smallbone, 2006). In particular, existing findings indicate

that rational choice and routine activities approaches (e.g., Cohen & Felson, 1979; Cornish & Clarke, 1986; Wortley, 1997, 2008), which inform situational crime prevention may be useful for explaining the unfolding of child sexual abuse incidents.

2.2.2 Situational dimensions of child sexual abuse onset

Situational crime prevention consists of two predominant schools of thought, rational choice theory (Cornish & Clarke, 1986) and the routine activities approach (including lifestyle exposure theories) (Cohen & Felson, 1979; Hindelang, Gottfredson, & Garofalo, 1978). Both frameworks can be used to explain how factors present within pre-offence and offence settings can influence the onset of child-sex offending behaviour. The main premise of these conventional situational crime prevention models and strategies is essentially the reduction of opportunities to commit crime in the social ecologies and routines of everyday living (Clarke, 1992, 2008; Cornish & Clarke, 2003). In its essence, these strategies: (1) are directed at highly specific forms of crime, (2) involve the management, design or manipulation of the immediate environment in as systematic and permanent way as possible, (3) so as to increase the effort and risks of crime and reduce the rewards as perceived by a wide range of offenders (Clarke,1992, p.4). More recently, Wortley (1997, 2008) introduced the ‘crime precipitators’ model to account for the more dynamic nature of situations in evoking criminal conduct. Tenets of each model are incorporated, to some extent, in more recent integrated theories (e.g., Smallbone et al., 2008) to explain the onset of child sexual abuse.

Empirical features of onset child sexual offence

There are several key empirical features of child sexual abuse that point to the importance of considering the role of situations in influencing the onset of such behaviour namely offence-onset age, victim-relatedness and offence-onset settings. Each of these dimensions is examined in turn.

There tends to be a bi-modal distribution regarding offence-onset age, peaking once in adolescence in line with other non-sexual delinquent and offending behaviour, and then again in the early to middle 30's (Canadian Centre for Justice Statistics, 1999, cited in Smallbone et al., 2008; Hanson, 2002; Smallbone & Wortley, 2004a). Adult onset in particular is typical of child-sex offenders (Smallbone & Cale, in press). Despite there being two discrete onset ages the nature of the offender's relationship to the victim is very similar in both contexts. That is, usually a well-established relationship exists between the child and offender, often existing for more than a year prior to sexual contact (Elliot, Browne, & Kilcoyne, 1995; Smallbone & Wortley, 2000). For adult-onset offending, this is also often the time when offenders have assumed a caretaking role (e.g., father or step-father) or are entrusted with quasi-parental responsibilities, for example, as an uncle, teacher or sporting coach. For adolescent-onset offending, more often than not, the offender is also given caretaking responsibilities (e.g., offender is an older cousin or sibling) (Smallbone, 2005; Smallbone et al., 2008). At the same time, the children with whom offenders have contact are also likely to be entering the peak risk period for victimisation ([e.g., 10 to 12 years], Andrews, Gould, & Corry, 2002; Goldman & Padayachi, 1997). For both adolescent- and adult-onset incidents the victims and offenders are likely to regularly interact with one another, unsupervised, in context of everyday routine activities.

Whilst three general offence settings have been identified in the research (i.e., domestic, institutional and public settings), the most common appears to be the domestic setting (Smallbone & Wortley, 2001; see also Kaufman Mosher, Carter, & Estes, 2006). Again these settings typically involve relationships with children that are primarily authoritative or caretaking, and for adolescent offenders involve frequent interactions with younger victims, often unsupervised (Smallbone & Cale, in press). Usually conceived of as a place of protection and nurturance, the domestic setting is

also the setting that provides opportunity structures conducive to sexually abusive behaviour. In institutional settings (e.g., schools, sports centres) potential victims are also likely to be exposed to offenders who assume temporary, caretaking roles that, at times, involve unsupervised contact. The most easily controlled setting, and incidentally the most atypical of child sexual abuse, is the public setting (e.g., public toilets, shopping centres) (Smallbone & Wortley, 2001). Thus, by all accounts it seems child sexual abuse belongs primarily to the domain of 'domestic' crime. Yet, situational crime prevention initiatives have largely ignored these "internal" threats, focussing instead on threats "external" to the home, for example burglaries (Smallbone, 2011).

In sum, research suggests that sexual offending onset often arises later in life, and often at a time when men are assuming caretaking roles, which brings them into regular unsupervised contact with children who are also likely to be entering this peak risk period for victimisation. Those who offend tend to do so against children well-known to them and with whom they have had a long-term, close relationship. These offences also occur most commonly in the context of domestic and routine activities. These factors point to three important issues that require further investigation: (1) for the most part, the late offence-onset age and the utilisation of typical domestic routine interactions and settings by which to offend suggest opportunistic offending and perhaps the absence of well-established sexually-deviant motivations prior to sexual offence onset, (2) at the time of onset exposure and access to at-risk children and therefore opportunities to offend increase dramatically, and (3) for both adolescent- and adult-onset sexual offences the nature of the relationship between the offender and the victim prior to sexual contact seems to create conditions conducive to sexual offending. As all of these factors occur within the social ecologies of potential victims and offenders, further explanation of social ecology theory is required.

The social ecology of child sexual abuse

From an ecosystemic perspective the likelihood of child sexual abuse occurring depends on the systematic risk and protective factors present in the social and physical environments of offenders and victims immediately preceding the abuse incident (Smallbone et al., 2008). These social ecosystems range temporally and spatially on a proximal-distal continuum (Brofenbrenner, 1979). Individuals interact actively with their environment and are influenced by, as well as influence it, such that more proximal systems (e.g., situations and families) are said to have more influence on individual behaviour than are more distal systems (e.g., developmental experiences and neighbourhoods) (Brofenbrenner, 1979). According to Smallbone et al. (2008) ecosystems: (1) impart the social and cultural norms by which individuals are expected to conform, (2) influence the availability of formal and informal resources for effective child protection, and (3) demarcate the routine activities of potential victims and offenders, thereby presenting or restricting opportunity structures for sexual abuse to transpire. Situational factors present the most proximal factor and thus exert the most direct and powerful influence on individual's behaviour (Marshall & Barbaree, 1990; Smallbone et al., 2008).

According to situational models, situations not only influence criminal behaviour by providing opportunities (e.g., lapse in supervision, Clarke, 1997), they also can play a more dynamic role in offending by presenting behavioural cues, social pressures, and environmental stressors that precipitate a criminal response (Wortley, 2008). Whilst the former focuses primarily on opportunity structures present within the immediate offence setting, the latter concentrates more closely on how proximal factors (i.e., situational precipitators) within pre-offence and offence settings interact with more distal factors (i.e., individual developmental vulnerabilities) to evoke sexually abusive behaviour for the first time.

Situations as opportunities

The first way that situations can affect the onset of child sexual abuse is simply by the presence of opportunity. One situational model that attends to the interpersonal context and settings within which these offences first occur is the routine activities approach. Originally proposed by Cohen and Felson (1979), this approach assumes that for a criminal act to occur the offence setting must contain a potential offender and a potential victim, together in the absence of a capable guardian. All three elements must converge together in time and space. The research suggests that, for the most part, many child-sex offenders may not actively seek out opportunities to exploit children sexually, at least not initially (e.g., Smallbone & Wortley, 2000). Instead they may take advantage of opportunities arising in the context of everyday routine activities (Smallbone, 2006). An examination of how child sexual abuse arises out of common adult-child interactions and routine activities, particularly established care-giving relationships, may be important to explaining the onset of child sexual abuse (Smallbone, 2006; Smallbone et al., 2008).

Offenders' exposure to potential victims is shaped more generally by lifestyle factors of the individuals (Hindelang et al, 1978; Kaufman et al., 2006). For many (potential) offenders their existing relationship with the victim means they often share the same ecological space increasing their exposure to (potential) victims (Smallbone & Cale, in press). This is particularly so in the case of familial sexual abuse. The most typical place of ordinary routine activities is the domestic setting which, as has been indicated in the literature, is also where these offences predominately occur. To reiterate, whilst domestic settings are often perceived (and commonly are) the safe haven for children, they also present the most opportune offence structure. This is not only because the domestic setting is where most daily routines are carried out but also because the victim-offender relationship, by nature, results in these interactions

occurring frequently in the absence of other capable guardians who would otherwise protect or discourage such behaviour (Felson, 2008). For Finkelhor (1984; see also Finkelhor & Baron, 1986) lapses in supervision of children (e.g., parental absences, sickness, poor parent-child attachment) are fundamental disinhibitors for sexual abuse. For Cleary (2004) it is the physical proximity of victims combined with lack of capable guardianship that contribute significantly to the likelihood of sexual abuse occurring.

In addition to providing opportunities the immediate environment provides information about the likely risks and rewards of committing such an act. From a cost-benefit analysis, the domestic setting is also the setting that represents the least amount of risk, and least amount of effort, in order to receive the desired outcome (Clarke & Cornish, 1985; Cornish & Clark, 1986; Wortley & Smallbone, 2006). Accordingly, offences occurring outside the domestic setting (i.e., institutional settings and public settings) occur less frequently because of the increased effort and risk associated with sexual abuse in such settings. Taking the available evidence and theoretical propositions into account it would seem that victim selection, offence locations and timing would not, in most cases, deviate far from routine activities where opportunities to offend are profuse and there is less risk and effort involved.

From a situational perspective then, it may be suggested that the later age often associated with child-sex offence onset is a function of the opportunity structures that present themselves in line with men assuming caretaking roles in their life, thereby increasing their exposure and access to children, often unsupervised. These role changes bring with them a new context in which to offend, and by nature ample opportunity to do so. Thus, many child sexual abuse incidents may be expected to arise out of established caretaking relationships. In terms of the victim-offender relationships, available research indicates that this tends to be the case, but that girls are more likely to be abused by a family member and boys by a family friend (Gold, Elhai, Lucenko,

Swingle, & Hughes, 1988; Kendall-Tackett & Simon, 1992). For girls the perpetrator is most often their stepfather or father (Kendall-Tackett & Simon, 1992). Further, younger children tend to be at greater risk of familial abuse and older children of nonfamilial abuse (Fisher & McDonald, 1998; Smallbone et al., 2008).

In summary, from a situational perspective even the most highly-motivated offender will not engage in a criminal act unless there is an available victim and opportunity to commit the crime. Offenders must rely on external factors that influence the crime opportunity structure, and thus increase or decrease the risk of committing a potential criminal act. The existing evidence does suggest that sexual offence onset most often occurs in middle adulthood (although they also occur in adolescence) and involve victims well known to the offender, oftentimes within a caretaking role, and within settings of usual routines and domestic activity. These findings suggest the importance of applying situational crime prevention models to child sexual abuse incidents.

Situational precipitators of child sexual abuse

The dynamic role of situations in precipitating behaviour has been proposed as another way that situations influence sexual abusive behaviour (Wortley, 2001, 2008), and may be especially pertinent to understanding the onset sexual offence, particularly those cases where stable, sexually-deviant motivations may not yet be well-established (Smallbone & Cale, in press). Wortley and Smallbone (2006) suggest that, in addition to providing the opportunity to offend, situations can actively influence offending by presenting behavioural cues, social pressures and environmental stressors that precipitate a criminal response. Thus, situations contain dynamic properties that act directly on offender's motivations and provide impetus to offend. Smallbone et al. (2008) propose that factors within the immediate environment may precipitate sexual abuse in four explicit ways: Situations can (1) present cues that prompt an individual to

perform a criminal behaviour, (2) exert social pressure on an individual to offend, (3) weaken moral constraints and so permit potential offenders to commit illegal acts, and (4) produce emotional arousal that provokes a criminal response (p.40).

First, in cases where an individual has low self-restraint, situations themselves may simply cue sexually abusive behaviour (e.g., working in a child care centre). In terms of prevention then eliminating situations that cue such behaviour (e.g., not working with children) limits opportunities to act on such inappropriate sexual desires (Wortley, 2008). Similarly, seeing a child naked or viewing pornography may prompt underlying (possibly even dormant) sexual arousal towards children, which, given the opportunity may result in sexual abuse. Smallbone (2006) and Wortley (2008) suggest routine adult-child interactions, particularly typical care-taking activities (e.g., bathing, comforting, putting child to bed), arising in the context of existing long-term relationships with children can precipitate inappropriate sexual responses by prompting or provoking sexually inappropriate motivations and behaviour, even in a previously unmotivated offender (Wortley, 2001).

Second, adverse and dysfunctional childhood experiences (e.g., insecure attachment relationships) may impede the development of later social bonds, which induce social pressures for conformity and law abidance. These weakened bonds in turn weaken common social mores not to sexually offend. Third, factors within the immediate environment may serve to induce individual's disinhibitions (e.g., intoxication), impeding consequential thinking and moral reasoning and, in doing so, permit anti-social and illegal behaviour (including sexual abuse) to transpire that would ordinarily not be undertaken (Wortley, 1997).

Fourth, the immediate behavioural setting may psychologically "ready" the individual to perform sexually abusive acts (Wortley, 1997). These factors are often of a non-sexual form, and can be both negative (e.g., frustration, anger, distress) and positive

(e.g., need for love and affection from non-threatening source) (Wortley, 1997). In line with these ideas research has found that transitory situational factors, such as job loss, relationship breakdown, and emotional states (e.g., anxiety, stress) often precipitate child sexual abuse (Elliot et al., 1995; Marshall et al., 2006). In fact many sexual abuse incidents do not occur until a sudden change in life circumstance (e.g., marital breakdown, death of partner) that may in turn lead to sexually deviant ideation (Marshall et al., 2006). From this perspective situational factors may be powerful enough to cue sexually exploitative behaviour (provoke a transitory disposition), even in men with no discernible vulnerabilities (Smallbone et al., 2008). This also suggests that it is not only external cues leading up to and immediately preceding sexual offence onset, but an individual's internal cues (i.e., emotional state) at the time that may contribute to a breakdown in ordinary self-restraint.

Rather than viewing all offender decision-making as a conscious and deliberate process, Wortley (2008) contends that thought processes and behaviour associated with sexual offending can be sub-cognitive and involuntary. Thus, "immediate environments may influence people at a sub-cognitive level in ways that they may not be aware of to perform behaviours they would not otherwise perform" (Smallbone & Wortley, 2006, p.10). This line of thinking implies that not all men who sexually offend are necessarily highly motivated to sexually abuse children and harbour entrenched sexual attraction towards children, at least not at first. Instead it presents the possibility that sexual deviance may in fact be a consequence, rather than (in all cases) an instigator of sexual offence onset. From this perspective, whilst self-serving (including sexual) urges are for the most part kept in check by personal and social constraints, situational precipitators can weaken such controls (Wortley & Smallbone, 2006). When this coincides with opportunity to offend the risk of sexually abusive behaviour increases.

Nevertheless, many of these men have histories of other anti-social and non-sexual offending behaviour prior to their onset sexual offence (Smallbone & Wortley, 2000). Under normal circumstances most men would not even recognise such situations as opportunities in which to offend; others may recognise it, but defy any temptations might they occur (Wortley & Smallbone, 2006). Hence, some offenders may already be disposed to rule-breaking and exploiting opportunities for their own gain, but may not yet have established sexual motivations; whilst others will have formed general or victim-specific ideation to sexually offend, and still others, who by all accounts are law-abiding may respond more or less impulsively to cues present within onset situation itself (Smallbone & Cale, in press). It becomes evident at this point that child sexual abuse onset may be best understood as an interaction between the person and the situation. As Wortley and Smallbone (2006) state, “all behaviour is the result of the interaction between characteristics of the actor and the circumstances in which the act is performed” (p.8). One way to explain the onset of child sexual abuse is to view sexually abusive behaviour as the coalescence of opportunity structures and precipitating conditions, with individual-level vulnerabilities or dispositions, as depicted in Figure 2.1.

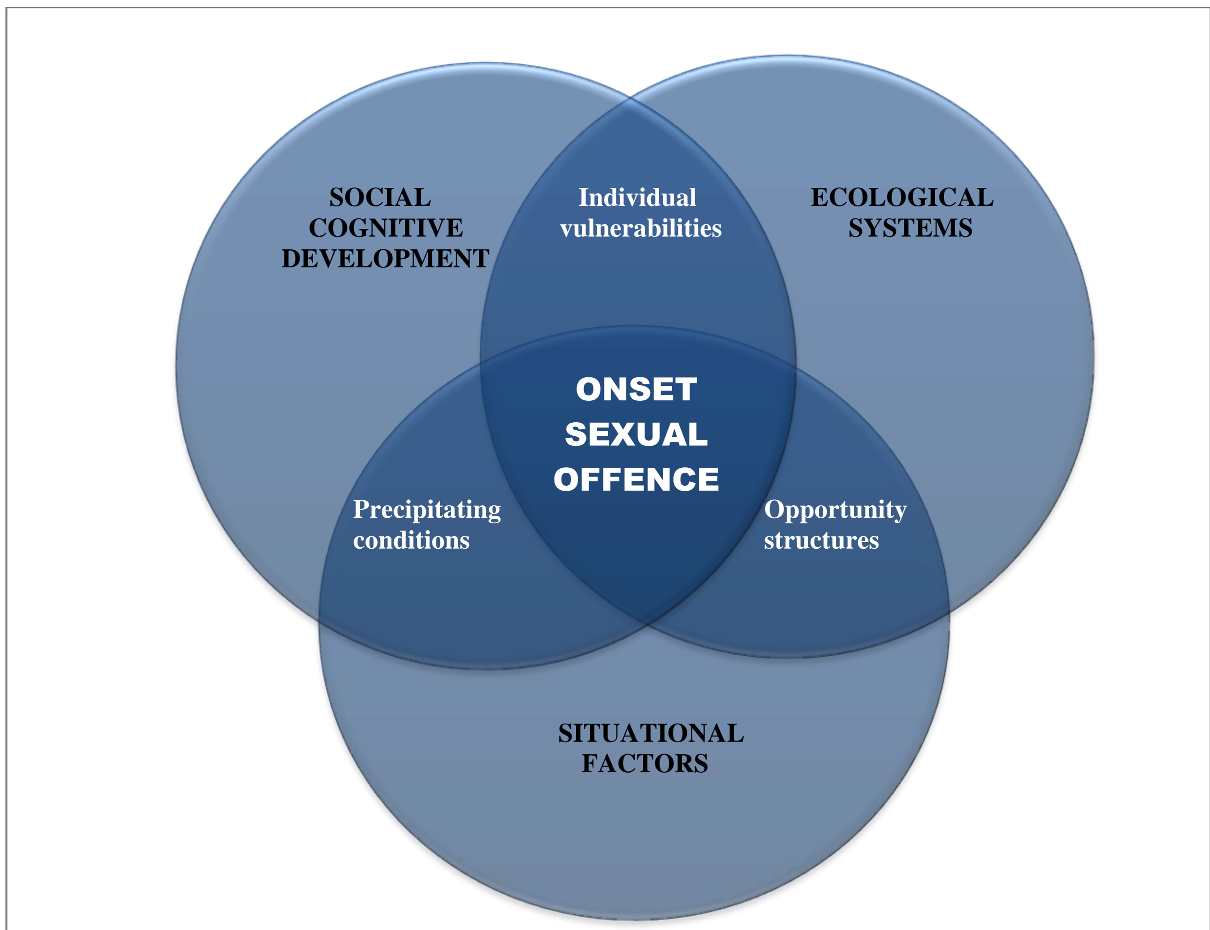

Figure 2.1. The onset sexual offence through the person-situation framework.

From a control theory perspective, individual propensities towards antisocial (including child sexual abuse) behaviour are shaped through early social cognitive development. Adverse early developmental experiences may serve compromise the development of individuals' capacities for self-restraint (e.g., empathic concern, emotional self-regulation, and moral reasoning). This may then impede the development of, and commitment to, wider (pro) social attachments such as peers, neighbours, social institutions and norms. Insecure personal attachments and weak social attachments in turn lead to lower capacities for, and commitment to, self-restraint. Determining the extent to which such individual-level vulnerabilities exist within this offender population constitutes the first phase of the thesis.

In order to understand how individual-level vulnerabilities manifest in sexually abusive behaviour it is also necessary to understand the context in which the event unfolds. Sexually abusive behaviour results from a complex interaction between innate and developmental propensities and environmental and situational factors (Rich, 2006). Hence, understanding what the person brings to the situation and how the situation influences the person's behaviour may be important for explaining the onset of child sexual abuse. Individual-level vulnerabilities (low capacity for, and commitment to, self-restraint) are thought to interact with immediate situational factors (opportunity structures and precipitating conditions) to produce a sexual offence. From this perspective, immediate situations present various opportunity structures that enable or restrict the enactment of sexually abusive behaviour, but may also play a more dynamic role by interacting with individual-level vulnerabilities to precipitate sexually abusive motivations and behaviour. Thus, understanding the interpersonal context and the role of environmental and situational factors in precipitating the onset of child sexual abuse constitutes the second phase of this thesis.

From the person-situation perspective, problematic early attachment relationships may also result in poorly integrated (and even disorganised) adult attachment, caregiving, and sexual behaviour systems, leading to reduced functional separation between these three systems (Smallbone, 2005). Each of these behavioural systems shares certain biological foundations, are shaped by developmental experiences, influenced by sociocultural standards, and all are highly responsive to situations (Smallbone et al., 2008). Because of these commonalities problematic childhood attachment relationships may increase the risk of chronic, and sometimes acute, disorganised attachment-related behaviour. This means that sexual motivations and behaviour may be precipitated not only by sexual cues (e.g., visual and tactile stimuli), but also by attachment (e.g., emotional distress) and nurturing cues (e.g.,

presence of vulnerable others, including children) present within the immediate behavioural setting. An acute disorganised state is more likely when the (potential) offender fails to exercise self-restraint, which in turn is more likely when his developmental experiences have led to enduring problems with emotional self-regulation, empathy and perspective taking (Smallbone et al., 2008). Thus, as Rich (2006) states

> attachment difficulties may serve as an early developmental vulnerability that is exacerbated, amplified and triggered into later sexualised behaviours by other risk factors including other subjective experiences, personal abilities and skills and social environment, life events, which for some individuals coalesce to form the crucible from which sexually abusive behaviours emerge. (p.17)

Accordingly, the third phase of this thesis is concerned with understanding these conceptual interactions between the person and the situation at sexual abuse onset.

2.3 Summary

The purpose of this chapter was to review current theoretical and empirical literature on the developmental and situational factors associated with the sexual abuse of children and to provide a context for examining the origins of child sexual abuse through the person-situation framework. First, developmental factors were reviewed with a focus on early parent-child attachment relationships and its implications for human adaptation and functioning, with reference to the nature and extent of attachment problems in child-sex offenders. Second, situational dimensions of sexual abuse incidents were discussed, illustrating the potential utility of applying the situational models to this area. Third, current ideas regarding the person-situation interaction were explored. Here consideration was given to the dynamic interaction between the person (i.e., individual-level vulnerabilities) and situational factors (i.e., precipitating conditions and opportunity structures) that may produce sexually abusive behaviour for the first time. Several research questions and testable predictions can be derived from this literature review and applied specifically to the onset of child sexual abuse.

Offender development

(1) Do child-sex offenders generally report attachment problems and are these associated with lower capacities for, and commitment to, self-restraint?

1.1 Do child-sex offenders report more insecure than secure childhood attachment?

1.2 Are there differences in the extent to which child-sex offenders report insecure paternal attachment and maternal attachment?

1.3 Do child-sex offenders report more insecure than secure adult attachment generally (i.e., trait adult attachment)?

1.4 Is attachment style stable from childhood to adulthood in child-sex offenders?

1.5 Is there a relationship between attachment insecurity and low self-control?

Situational dimensions of the onset sexual offence

(2) What are the situational dimensions of the onset sexual abuse incident?

The person-situation interaction

(3) How might individual attachment-related vulnerabilities interact with immediate situational factors to trigger sexually abusive behaviour?

3.1 What is the relationship between childhood attachment relationships and attachment orientation in the period preceding sexual offence onset?

3.2 Do attachment-related vulnerabilities emerge in response to stressors present in the period immediately preceding sexual offence onset?

Before empirically examining these research questions, the next chapter provides an overview of the methodology employed.

CHAPTER 3: METHOD

3.1 Participants

Incarcerated adult male child-sex offenders (*n* = 121) were recruited from two Correctional Centres in Queensland, Australia, and invited to provide confidential self-report information regarding their sexual offending. Official demographic and offence history data were also collected on these participants[1]. The age of offenders at the time of their current sentence ranged from 18 to 80 years (*M* = 42.01 years, *SD* = 12.54). Mean sentence length was 108 months (*SD* = 79.25). Two-thirds (67%) had a previous criminal history: 25.2% had a history of sexual offences, 11.8% had a history non-sexual violent offences; 50.4% had a history of nonsexual nonviolent offences. Of those offenders with previous convictions, their first conviction was 2.7 times more likely to be for a nonsexual (73%) than sexual (27%) offence. The majority of participants (72%) identified as Non-Indigenous Australian, 10% identified as Aboriginal and Torres Strait Islander (ASTI) and 18% identified as 'Other' descent.

A small percentage (11.6%, *n* = 14) of participants denied having sexually offended against a child. In these cases participants completed sections of the questionnaire that were not related to sexual offending. They were labelled as 'deniers' in the database. All other participants were labelled 'admitters'. The only difference between 'admitters' and 'deniers' was that 'deniers' scored significantly higher (*M* = 7.50, *SD* = 1.77) on social desirability than 'admitters' (*M* = 5.84, *SD* = 2.23, *t* (105) = -2.06, *p* = 0.04). The magnitude in difference between the means was small (eta squared = 0.04). The differences in social desirability scores found between 'deniers' and 'admitters' suggests that these men may have not wanted to openly admit to or discuss their offending behaviour personally with the researcher, but were still amenable to discussing other experiences in their life. Despite scoring higher, the deniers' scores

[1] See appendix A

were comparable to other forensic norms (e.g., Andrews & Meyer, 2003). Therefore, a decision was made to retain the data gathered from the 'denier' group for analyses pertaining to offender development (*n* = 121). For the analyses concerning sexual offence onset the sample size was 107 child sexual abusers.

For comparative analyses, official demographic and offence history data were obtained on an additional group of offenders (*n* = 100) who declined to participate in the study when approached by corrections staff. Those who participated in the study were significantly younger at the time of data collection (*M* = 46.0 years, *SD* = 12.61) than those who did not participate (*M* = 50.90 years, *SD* = 11.57, *t* (219) = -2.98, *p* = 0.003). The magnitude of difference between the means was small (eta squared = 0.03). Participants (25%) were significantly more likely than nonparticipants (8.5%) to have studied at a Tertiary level, χ^2 (3, 214) = 12.05, *p* = .005, Cramer's *V* = .24 (missing data = 3.2% *n* = 7). Participants had twice the number of previous sexual offence convictions (26.8%) than non-participants (12%), χ^2 (1, 212) = 7.27, *p* = .007, Φ = -.19 (missing data = 4.1%, *n* = 9). However, no significant differences in non-sexual offence histories were found, χ^2 (1, 212) = 1.64, *p* = .20, Φ = -.09 (missing data = 4.1%, *n* = 9). Those who did not participate had twice the number of concurrent non-sex offence convictions (48%), than those who did participate (24%), χ^2 (1, 211) = 12.87, *p* = .000, Φ = .25 (missing data = 4.5%, n = 10). Non-participants also had a significantly longer current sentence length (*M* = 124.26 months, *SD* = 81.89) than participants, (*M* = 94.52 months, *SD* = 70.53, *t* (210) = -2.84, *p* = 0.005, missing data = 4.1%, *n* = 9). The magnitude of difference between the means was small (eta squared = 0.02).

These findings suggest that initial consent to participate in the study may have been impacted by literacy, language and cultural barriers. Although significant differences were found regarding offender age and sentence length, an inspection of the means suggest these differences would be unlikely to impact on offenders' decisions to

participate. Participants also had significantly more sexual offence convictions than non-participants. Thus, they may have been approached on previous occasions to participate in such studies and therefore may have been more open to discussing their sexual offending behaviour than non-participants.

3.2 Measures

Participants completed a questionnaire[2] containing standardised self-report measures and detailed questions concerning the situational features of the pre-offence and offence settings. Given the nature of the setting (i.e., prison) the following standardised measures were chosen because of their: (a) high levels of confidentiality, (b) low levels of intrusiveness and (c) ease of administration.

Four self-report attachment instruments were used in this study; two instruments measured childhood attachment and two measured adult attachment. In addition a measure of self-control and a measure of social desirability were included.

Childhood attachment. The Parental Bonding Instrument (PBI)[3] (Parker, Tupling, & Brown, 1979) is a 25 item retrospective measure of respondents' recollections of parental bonding attitudes and behaviour prior to age 16. Participants completed the PBI separately for each parent (or parental figure). Items were rated on a 4-point Likert scale ranging from 0 *(very like)* to 3 *(very unlike)*, yielding scores on two sub-scales: 'care' and 'control'. The 12-item care subscale measures warmth and affection, empathy and understanding, and positive reinforcement (e.g., "spoke to me in a warm and friendly voice"). The 13-item control subscale measures autonomy, emotional indifference and parental control (e.g., "tried to control everything I did"). Assignment to high or low categories for each dimension is based on the following recommended cut-off scores: maternal care = 27; and maternal control = 13.5; paternal care = 24; and paternal control = 12.5. Parenting styles can then be categorised into one

[2] The questionnaire is documented in Appendix B
[3] Refer to Section C in Appendix B

of four ‘parental bonding quadrants’ based on combined ‘care’ and ‘control’ scores: “optimal parenting” (high care; low control); “affectionate constraint” (high care; high control); “affectionless control” (low care; high control); and “neglectful parenting” (low care; low control). Parker (1990) and Wilhelm, Niven, Parker, and Hadzi-Pavlovic (2005) have reported good reliability and validity of the PBI across different populations and over extended time periods.

The Childhood Attachment Questionnaire (CAQ)[4] (Hazan & Shaver, cited in Collins & Read, 1990) contains three short paragraphs consistent with Ainsworth et al.’s (1978) three major childhood attachment styles (secure, anxious/ambivalent, and avoidant). This questionnaire was completed separately for both maternal and paternal attachment relationships. Respondents rated the extent to which each description corresponded their mother and father’s attitudes, feelings, and behaviour toward them as they were growing up, on a seven-point Likert scale ranging from 1 (*not at all like my mother/father*) to 7 (*very much like my mother/father*). This questionnaire has previously demonstrated moderate to high test-retest reliability in a sample of incarcerated sexual offenders (Smallbone & Dadds, 1998).

Adult attachment. General (trait) adult attachment was measured using the Experiences in Close Relationships Instrument (ECRI)[5] (Brennan et al., 1998). Respondents indicate how well each of the 36 items describes their typical feelings in romantic relationships on a 7-point Likert scale ranging from 1 (*disagree strongly*) to 7 (*agree strongly*). The measure yields scores on two subscales: attachment avoidance and attachment anxiety. The avoidance scale assesses discomfort with interpersonal closeness, dependence, and intimate self-disclosure (e.g., “I don’t feel comfortable opening up to romantic partners”). The anxiety scale measures fears of abandonment and strong desires for intimate contact (e.g., “I need a lot of reassurance that I am loved

[4] Refer to Section C in Appendix B
[5] Refer to Section D in Appendix B

by my partner"). Low scores on both scales indicate a secure attachment orientation. The anxiety and avoidance dimensions have good internal consistency, with alphas greater than 0.9. Test–retest coefficients among non-offender samples have been found to be .71 (Avoidance) and .68 (Anxiety) (Lopez & Gormley, 2002). Four adult attachment classifications can be derived using computational guidelines provided by Brennan et al. (1998) based on normative data: secure; preoccupied/anxious, fearful-avoidant; dismissive avoidant.

A modified version of the ECRI was included in the study for the purposes of measuring state adult attachment (ECRI-State)[6]. State adult attachment refers to offenders' attachment orientation in the weeks preceding the onset of child sexual abuse. The ECRI-State measure was identical to the ECRI, except that respondents were asked in the past tense about their experiences with a specific intimate partner relationship in the weeks preceding the onset sexual offence. Only those offenders who identified being in an intimate partner relationship in the month preceding their onset sexual offence were required to complete the ECRI-State. As this measure was developed specifically for this study, the reliability and validity of this version of the ECRI have not been previously established.

Self-control. To measure capacities for self-restraint this study used Grasmick, Tittle, Bursik, and Arneklev's (1993) Low Self-Control Scale[7]. The scale is a 24-item attitudinal scale that measures the six components of self-control proposed by Gottfredson and Hirschi (1990): impulsivity (e.g., "I often act on the spur of the moment without stopping to think"); simple tasks (e.g., "I frequently try to avoid projects that I know will be difficult"); risk seeking (e.g., "Sometimes I will take risk just for the sake of it"); physical activities (e.g., "I like to get out and do things more than I like to read or contemplate ideas"); self-centredness (e.g., "I try to look out for

[6] Refer to Section F in Appendix B
[7] Refer to Section I in Appendix B

myself first, even if it makes things difficult for other people"); and temper (e.g., "I lose my temper pretty easily"). All responses are rated in the same direction using a Likert-type scale ranging from 1 (*strongly disagree*) to 4 (*strongly agree*). The scores for each sub-category yield a total self-control score with higher scores indicating lower levels of self-control. Reliability and validity of this scale as a uni-dimensional measure of self-control is well-established (e.g., Arneklev et al., 1999; Cleary, 2004; DeLisi, Hochstetler, & Murphy, 2003; Grasmick et al., 1993; Piquero & Rosay, 1998). Pratt and Cullen (2000) recommend it as one of "the most carefully designed and valid measures of self-control" (p. 943).

<u>Child sexual abuse onset variables.</u> Offenders were asked to provide details about their first sexual contact with a child whether or not this incident had been the subject of criminal charges[8]. Self-report information was obtained on offender age; victim age and gender; the nature and length of offender's relationship to the victim; sexual orientation and sexual thoughts prior to sexual offence onset; personal problems encountered in the month preceding the onset sexual offence and strategies employed in response to these problems; offence location; offence times; offenders modus operandi; guardianship; length of contact; and efforts to avoid victim disclosure. Participants were encouraged to provide more than one answer where more than one response was applicable to their situation. Space was provided for additional responses where necessary and later categorised.

<u>Social desirability.</u> Social desirability was measured using the Marlowe-Crowne Short Form C[9] ([MC-C], Reynolds, 1982). The MC-C is a 13-item measure derived from the original 33-item Marlowe-Crowne Social Desirability ([MC], Crowne & Marlowe, 1960). Available research attests to the psychometric properties of the MC-C

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[8] Refer to Sections F – H in Appendix B
[9] Refer to Section I in Appendix B

and its utility for measuring biased self-presentation on self-report measures within forensic contexts (Andrews & Meyer, 2003).

3.3 Procedure

Ethics approval from the Griffith University Human Research Ethics Committee was obtained in September 2006 (Griffith University Reference Number: CCJ/06/06/HREC). A separate ethics application was approved by the Department of Corrective Services Research Ethics Committee. In accordance with the protocols granted the initial participant recruitment phase was conducted by Corrections staff who explained that participation was voluntary. A list containing Identifier Codes of those who provided initial consent was provided to the research team for individual follow-up within the relevant centre. This identifying information was available to the researchers only for the purpose of administering questionnaires. Data were otherwise de-identified. Researchers were required to approach Corrections staff with the list of Identifier Codes to obtain names. Potential participants were then approached within the centre to complete the questionnaire.

Each participant was informed of the nature and processes of the research project and implications of participating[10]. Offenders were offered complete anonymity, but were also invited to provide their name for the purposes of follow-up contact, in which case they were assured that self-reported information would be kept confidential. As participants were asked to provide information on offences they may not have been convicted for, they were assured that no identifying information would be given to correctional and/or other authorities, and all identifying information would be destroyed following data entry. All participants were assured they could withdraw at any time without penalty. On average, the questionnaire took one hour to complete. Assistance

[10] Refer to Participant Information Sheet and Consent Form in appendices C & D

was provided to offenders with literacy problems. All participants were debriefed following completion of the questionnaire.

Official demographic and offence history data were provided by Corrections staff. Identifier codes were used to match self-report and official data. Following the main data collection phase, 25 offenders who had agreed to follow-up contact were asked to complete the questionnaire a second time for the purposes of computing test-retest reliability on the above self-report measures. The average follow-up period was 6 months.

All analyses were conducted using statistical package SPSS for Windows, Version 17.0. Preliminary data screening was conducted to check for missing data, outliers and violations of normality and linearity as stipulated by Minium, King and Bear (1993), Pallant (2011) and Tabachnick and Fidell (2007). Where discrepancies were found, hard copy data was re-examined to ensure accuracy of the data entry and corrections made where necessary. Inspection of the skewness and kurtosis values indicated slight violations of normality (i.e., platykurtic) in some of the distributions of the childhood attachment variables and in the offender- and victim-age distributions. Transformations were unsuccessful. For these variables, bivariate correlations were obtained using the non-parametric alternative, Spearman's *rho* (ρ) for determining significant relationships among these variables. In the main analyses both parametric and the non-parametric tests were conducted. All yielded significant results. For simplicity, only the results of the parametric tests are reported.

As part of the preliminary stages of data analysis reliability and validity tests were also conducted for the self-report measures used in this research. Pearson Product-moment (and Spearmans ρ) correlations and Kappa statistics were used to assess the test-retest reliability of the measures and the validity of the scales. Cronbach's alpha

was used to assess the internal consistency of the scales. Social desirability scores were also examined to assess response bias.

The role of developmental and situational factors in the onset of sexual abuse was explored in three phases: (1) offender development, (2) situational dimensions of the onset sexual offence and (3) the person-situation interaction. With regard to offender development, childhood and adult attachment were examined using univariate analyses. Two paired-samples t-tests were conducted to examine differences in self-reported maternal and paternal childhood attachment relationships. Then, the bivariate correlation matrix used in the preliminary stages of this research was re-examined to assess the stability of attachment styles from childhood to adulthood. Additionally, attachment stability was examined categorically using 2 x 2 chi-square (χ^2) analyses. When all expected cell counts are at least five, chi-square is commonly recommended, over Yates correction, which has been found to decrease the accuracy of probability statement in such cases (Camilli & Hopkins, 1978). Therefore, chi-square (χ^2) is reported. Phi (Φ) is reported to demonstrate the strength of these relationships. Recommended values for measuring strength of Phi (Φ) are: 0.0 – 0.1 (*little, if any, association*); 0.1- 0.3 (*low association*), 0.3 - 0.5 (*moderate association*), > 0.5 (*high association*) (Cohen, 1988; Howell, 1999). Finally, correlations were conducted to examine the relationship between childhood attachment (Spearman ρ), adult attachment (Pearson r) and self-control.

The situational dimensions of the onset offence are reported as univariate analyses and tabulated. Where applicable, results are presented in cross-tabulation format, using chi-square (χ^2) to examine between-subject differences. As the chi-square analyses resulted in more than two probability outcomes, differences were considered as significant in cells with adjusted residuals exceeding absolute 2.0 (Cooksey, 2007). Violations of the chi-square test, due to expected frequencies below 5, were rectified

using exact tests (reported as 'exact p') (Brace, Kemp, & Snelger, 2006). Cramer's *V* is also reported to demonstrate the strength of these relationships.

The third phase of analyses (e.g., the person-situation interaction) utilised the state adult attachment measure (ECRI-State). As this measure required offenders to be in a relationship, chi-square (χ^2) and independent samples t-tests were conducted first to compare offenders who were in a relationship at onset with those who were not, prior to excluding them from the main data analyses. Second, to examine the association between childhood attachment and state adult attachment, the correlation matrix used in the preliminary stages of analyses was re-inspected. Third, descriptive analyses were conducted to examine contextual factors (e.g., stressors, strategies to reduce stress, state feelings and behaviour) in the lead up to, and immediately preceding, the onset sexual offence. Finally, two paired samples t-tests were conducted to examine changes in attachment security in the period immediately preceding sexual offence onset.

CHAPTER 4: RESULTS

The research findings are divided into four sections. In Section 4.1 preliminary analyses on the self-report measures are conducted to assess the methodological rigour of the research. Section 4.2 concentrates on examining the developmental experiences of offenders. Section 4.3 presents a descriptive analysis of the situational dimensions of the onset sexual offence. Section 4.4 explores the conceptual interactions between situational factors and offenders' dispositional characteristics.

4.1 Reliability and Validity Analyses

Social desirability. The mean score for social desirability in this sample was lower (M = 5.96, SD = 2.23) than reported forensic norms (M = 7.61, SD = 3.32), including those specific to child-sex offenders (M = 7.03, SD = 3.45), but slightly higher than the general population (M = 5.37, SD = 3.13), indicating a relatively low response bias (Andrews & Meyer, 2003).

Reliability and validity. Test-retest data for the childhood and adulthood attachment ratings and abuse onset variables are presented in Table 4.1. With the exception of maternal and paternal anxious attachment, all childhood attachment measures were found to be stable with Pearson (r) and Spearman correlation (ρ) coefficients ranging from .69 (paternal secure attachment) to .95 (maternal care). Adult attachment ratings were also found to be stable with Pearson correlation (r) coefficients ranging from .69 (trait anxious) to .91 (state anxious). The self-control measure also demonstrated good stability. Consistently high test-retest correlations were obtained for offender age, victim age and victim gender (see Table 4.1).

Problems with the reliability of the childhood anxious attachment measures have emerged previously and have been attributed to the nature of this attachment style (e.g., indecision, inconsistency, ambivalence) (Smallbone & Dadds, 1998). Due to the poor reliability of the childhood anxious attachment measures found here, these variables

were excluded from subsequent analyses. Where a dichotomous (e.g., insecure / secure) attachment typology was used, the childhood anxious attachment measure was included with the childhood avoidant attachment measure as a general measure of insecure childhood attachment type. This decision was made on the basis that anxious attachment is traditionally conceptualised as one of two dimensions of insecure attachment and it was moderately correlated with the childhood avoidant attachment measure in the present study.

The subscales of the ECRI (trait adult attachment) were internally consistent, with Cronbach's alpha coefficients of .94 for the Avoidance items and .93 for the Anxiety items. For the ECRI-State measure (state adult attachment), alpha coefficients were .95 for avoidance and .94 for anxiety, again indicating very good internal consistency.

Correlations among childhood and adult attachment measures are reported in Table 4.2. Moderate to strong convergence between offenders' attachment relationships with their mothers and fathers was found on both childhood attachment measures. Moderate to strong negative correlations were obtained between both maternal secure and avoidant, and paternal secure and avoidant attachment, and between maternal care and control and paternal care and control dimensions. Correlations between adult trait and state attachment dimensions indicate concordance both within and between adult attachment measures. Overall, these results indicate good internal consistency, test-retest reliability, and construct, convergent and discriminant validity of the self-report measures used with this sample.

Table 4.1

Test-retest Reliability of Attachment, Self-Control and Abuse Onset Variables

Variables		*N*	*Missing (N)*
Childhood attachment			
Maternal			
Secure[*]	.84	23	1
Anxious[*]	.46	23	1
Avoidant[*]	.89	23	1
Paternal			
Secure[*]	.69	23	0
Anxious[*]	-.10	22	1
Avoidant[*]	.83	23	0
Maternal Bonding			
Care[*]	.95	23	1
Control	.87	23	1
Paternal Bonding			
Care	.91	22	1
Control	.91	21	2
Adult attachment			
Trait anxious	.69	23	2
Trait avoidant	.76	21	4
State anxious	.91	11	1
State avoidant	.88	11	1
Self-control	.75	23	2
Abuse onset			
Offender age[*]	.99	22	3
Victim age[*]	.82	22	3
Victim gender[#]	1.00	24	1

Note. [*]Denotes Spearman *rho* (*ρ*) statistic; [#] Denotes Kappa statistic; All others are Pearson *r* statistics.

Table 4.2

Intercorrelations among Maternal and Paternal Childhood Attachment and Adult Trait and State Attachment Ratings

	Attachment style													
	Maternal					**Paternal**					**Trait**		**State**	
	Secure	**Anxious**	**Avoidant**	**Care**	**Control**	**Secure**	**Anxious**	**Avoidant**	**Care**	**Control**	**Avoidant**	**Anxious**	**Avoidant**	**Anxious**
Maternal														
Secure	-													
Anxious	-.26**	-												
Avoidant	-.69***	.40***	-											
Care	.47***	-.18	-.41***	-										
Control	-.37***	.17	.26**	-.57***	-									
Paternal														
Secure	.35***	-.01	-.18	.03	-.05	-								
Anxious	.15	.38***	.06	.15	-.06	-.06	-							
Avoidant	-.12	.21*	.30**	.08	-.01	-.64***	.24**	-						
Care	-.01	.03	.13	.31**	-.08	.30**	-.09	-.29**	-					
Control	-.07	.12	-.02	-.35**	.51***	-.06	-.01	.18	-.35**	-				
Adult(Trait)														
Avoidant	-.15	.18	.15	-.09	.18	-.23*	.08	.18	.03	-.06	-			
Anxious	-.17	.11	.13	-.25*	.30**	-.18	.10	.15	-.29**	.19	.30**	-		
Adult(State)														
Avoidant	-.24	.25	.20	-.05	.34*	-.29*	.14	.38**	.01	.09	.74***	.28*	-	
Anxious	-.39**	.09	.19	-.32*	.23	-.34**	.06	.15	-.25	.06	.23	.56***	.36**	-

*$p \leq 0.05$, **$p \leq 0.01$, ***$p \leq 0.001$

4.2 Offender Development

4.2.1 Aims and hypotheses

The first phase of analyses examines the developmental experiences of child-sex offenders. This relates to research question one:

- Do child-sex offenders generally report attachment problems and are these associated with lower capacities for, and commitment to, self-restraint?

  1.1 Do child-sex offenders report more insecure than secure childhood attachment?

  1.2 Are there differences in the extent to which child-sex offenders report insecure paternal attachment and insecure maternal attachment?

  1.3 Do child-sex offenders report more insecure than secure adult attachment generally (i.e., trait adult attachment)?

  1.4 Is attachment style stable from childhood to adulthood in a sample of child-sex offenders?

  1.5 Is there a relationship between attachment insecurity and low self-control?

To do this the nature, extent and stability of attachment and its relationship to self-control was investigated. There is emerging evidence that maternal and paternal attachment contribute in different ways to later development (Newland, Freeman, & Coyl, 2011), and tentative evidence of links between insecure paternal attachment and later sexual offending (Smallbone & Dadds, 1998, 2000, 2001). Therefore, differences in maternal and paternal childhood attachment were investigated. Drawing upon the literature reviewed in this thesis, five hypotheses were derived:

(1) Offenders will be more likely to report insecure than secure childhood attachment relationships;

(2) Offenders will be more likely to report insecure paternal attachment than insecure maternal attachment;

(3) Offenders will tend to be more insecure in their orientation to adult intimate relationships generally (i.e., trait adult attachment);

(4) There will be moderate continuity from childhood attachment to adult attachment styles;

(5) Attachment insecurity will be associated with lower levels of self-control.

4.2.2 Analyses

Childhood attachment. For most offenders their mother (97.4%, n = 112, missing data = 4.9%, n = 6) and / or father (88.7%, n = 102, missing data = 4.9%, n = 6) was present during childhood. Table 4.3 presents overall mean (SD) maternal and paternal attachment ratings for the sample. Categorical attachment styles were also identified. Just over half of the offenders (51.3%, n = 58) reported an insecure maternal attachment type, and almost two thirds (62.5%, n = 65) reported an insecure paternal attachment type. Paternal attachment was significantly less secure (M = 3.84, SD = 2.22) than maternal attachment (M = 4.68, SD = 2.32), t (101) = 3.20, p = .002. PBI scores indicated a predominant parenting bonding style of *affectionless control* (low care; high control) for both parents (see Figure 4.1). By comparison, an *optimal parenting* style (high care; low control) was reported by 14.6% to 21.8% (father & mother respectively) of the sample.

Trait adult attachment. Most offenders (96%, n = 110, missing data 4.9%, n = 6) reported having been in at least one close adult intimate relationship, 71% reported that they had lived with an intimate partner for two years or more. Most (94%) reported having

had a sexual relationship with woman, 22% with a man. Mean (*SD*) trait adult attachment ratings are reported in Table 4.3. Trait adult attachment styles were also examined categorically. As shown in Figure 4.2, three-quarters of the sample were classified having an insecure adult attachment style. The most common classification was fearful-avoidant (39%).

Table 4.3

Mean (SD) Childhood and Adult Attachment Ratings

Childhood Attachment	Maternal	Paternal
Secure	4.53	3.83
	(2.37)	(2.22)
Avoidant	3.10	3.45
	(2.43)	(2.40)
Care	19.70	17.95
	(10.41)	(9.02)
Control	18.31	18.42
	(8.15)	(8.12)
Trait Adult Attachment		
Anxious	3.90	
	(1.37)	
Avoidant	3.42	
	(1.35)	

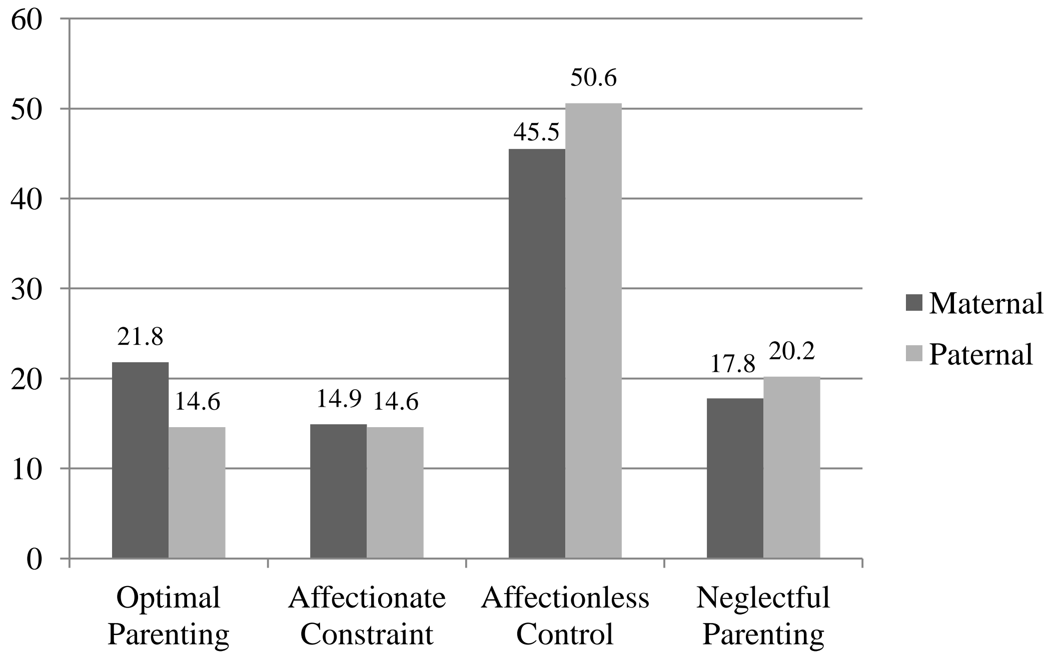


Figure 4.1. Frequencies of Parental Bonding Styles (%).

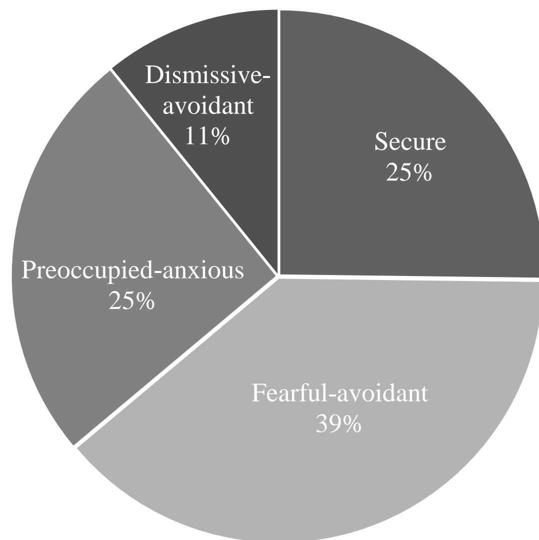


Figure 4.2. Adult Attachment Classifications.

Attachment stability. As shown in Table 4.2 small to moderate correlations (ρ = -.23 to .30) were obtained between maternal childhood attachment and trait adult attachment anxiety. Small correlations (ρ = -.23 to -.29) were also obtained between paternal attachment and trait adult attachment avoidance and anxiety. These results indicate weak but discernable stability in attachment style from childhood to adulthood.

Insecure childhood attachment was more stable than secure childhood attachment. As illustrated in Table 4.4 of those who reported an insecure maternal attachment style, 84% reported an insecure trait adult attachment style. However, only 34% of those reporting a secure maternal attachment style reported a secure trait adult attachment style, χ^2 (1, 108) = 4.46, p = 0.04, Φ = -.20. Similarly, 81% of those who reported an insecure paternal attachment style reported an insecure trait adult attachment style, but only 39% of those reporting a secure paternal attachment style reported a secure trait adult attachment style, χ^2 (1, 101) = 4.46, p = .04, Φ = -.21.

Table 4.4

Attachment classification from childhood to adulthood (%)

Childhood attachment		Trait adult attachment	
Maternal		Secure	Insecure
	Secure	**34**	66
	Insecure	16.4	**83.6**
Paternal			
	Secure	**38.5**	61.5
	Insecure	19.4	**80.6**

Self-control. One small, positive correlation was found between secure maternal attachment and self-control, ρ (100) = .23, $p < 0.05$. No other significant findings emerged for the childhood attachment measures. Pearson Product-moment correlations yielded moderate positive correlations between self-control and trait attachment avoidance, r (98) = .36, $p < 0.001$) and trait attachment anxiety, r (98) = .38, $p < 0.001$).

4.2.3 Discussion

In Section 4.2 five theoretically-driven hypotheses regarding the developmental experiences of child-sex offenders were tested. First, as predicted, offenders were somewhat more likely to report insecure than secure childhood attachment. This is consistent with most previous studies of childhood attachment with child-sex offenders (Marsa et al., 2004; McCarthy, 2004; Smallbone & Dadds, 1998; Smallbone & Wortley, 2000). Overall, the prevalence of insecure childhood attachment found in the present sample is considerably higher (51% & 63%) than that found in the general population (around 35%) (Campos et al., 1983; Waters, Hamilton, & Weinfeld, 2000). This indicates that early attachment problems are disproportionately high in this sample. In the present study both maternal and paternal relationships were characterised by ‘affectionless control’, reflecting low parental care and high overprotection and control. Other researchers (Craisatti et al., 2002; Marsa et al., 2004) have also found this to be the predominant parental bonding style in samples of child-sex offenders.

On the other hand, as with previous studies, a substantial minority of the present offenders reported secure childhood attachment relationships confirming that childhood attachment problems are neither a necessary nor sufficient condition for sexual offending. These findings suggest that child-sex offenders, like many non-sexual offenders, may have general individual-level vulnerabilities involving a low capacity for, and low commitment

to, self-restraint (Smallbone & Cale, in press). The proposition that child-sex offenders may be generally low in self-restraint is supported more broadly by their high prevalence of nonsexual offending histories found here and by others (Broadhurst, & Maller, 1992; Hanson, Scott, & Steffy, 1995; Smallbone & Wortley, 2004b; Smallbone et al., 2008; Soothill et. al., 2000), as well as other non-criminal problem behaviours (e.g., Cleary, 2004; Harris, Mazerolle, & Knight, 2009).

Second, as predicted, offenders were more likely to report insecure childhood attachment relationships with their fathers (63%) than with their mothers (51%). Further, paternal attachment was significantly less secure than maternal attachment, and lower rates of *optimal parenting* were reported for fathers than mothers. Only a few studies have previously examined maternal and paternal attachment in child-sex offenders. Marshall et al. (2000) found that nonfamilial sexual abusers were more likely to report secure than insecure maternal attachment, but that their experiences of paternal attachment were more variable. Smallbone and Wortley (2000) similarly found that nonfamilial abusers were more likely to report secure maternal attachment, but that both familial and nonfamilial abusers were more likely to report insecure, and especially avoidant, attachment relationships with fathers. Further, whilst links between paternal attachment avoidance and sexually coercive behaviour have been found (Smallbone & Dadds, 2000), they have failed to be replicated (Smallbone & Dadds, 2001). In the wider population rates of secure paternal attachment tend to be very similar, if a little lower, to those of secure maternal attachment, with most studies indicating high concordance rates between the two (Fox et al., 1991; Lamb, 1978; Main & Weston, 1981; Roelofs et al., 2008; van IJzendoorn & de Wolff, 1997). The current findings suggest that qualitative differences may exist between maternal and paternal attachment and later developmental outcomes and that paternal

attachment in particular may be especially important for boys in the development of skills necessary for effective emotional and behavioural regulation particularly within interpersonal (including sexual) contexts.

Third, also as predicted, offenders were more likely to report insecure than secure trait (i.e., general) adult attachment. In the present sample the prevalence of insecure adult attachment (75%) was substantially higher than the prevalence of insecure childhood attachment (51%-63%). Again the prevalence of insecure adult attachment was substantially higher than that found in the general population (35%-45%) (Bartholomew & Horowitz, 1991; Bakersman-Kranenburg & van IJzendoorn, 2009). Consistent with previous studies of child-sex offenders (Jamieson & Marshall, 2000; Proeve, 2003; Ward et al., 1996; Wood & Riggs, 2009), the most common insecure adult attachment styles in the present sample were fearful-avoidant and preoccupied-anxious styles both of which are characterised by fear of rejection and abandonment (Bartholomew, 1990), and which are consistent with poor interpersonal skills and high levels of social anxiety, intimacy deficits and emotional loneliness often reported by child-sex offenders (e.g., Bumby & Hansen, 1997; Marshall, 1993; Marshall & Mazzucco, 1995; Seidman, Marshall, Hudson, & Robertson, 1994; Ward et al., 1996). This recurrent finding indicates that higher levels of adult attachment avoidance and anxiety may be a precursory risk factor for sexually abusive behaviour (Smallbone & Dadds, 2001). Perhaps as Miner et al. (2010) and others (e.g., Ward et al., 1996) propose, the characteristics associated with these trait adult attachment types (e.g., desire for closeness whilst fearful of rejection and abandonment) create conditions (e.g., loneliness, lack of empathy, impulsivity, and hostility towards others) conducive to sexually abusive behaviour generally and, more specifically, child sexual abuse by turning to children (who are perceived to be less threatening and less

rejecting) to meet intimacy and attachment needs. This fits with Howells (1979) findings that child-sex offenders report being fearful of prospective adult partners and sexual engagement with adults and experience more emotional congruency with children.

The higher prevalence of adult versus childhood insecure attachment suggests that in the present sample offenders may have experienced life events since childhood that have adversely affected their general orientation to intimate relationships. Secure childhood attachment does not seem to have served as a strong protective factor for these offenders. General adult attachment problems may in turn have decreased their resilience to ordinary relationship difficulties, especially in adult intimate relationships, and perhaps increased their vulnerability to sexualising relationships with children. With respect to adolescence- or adult-onset sexual offending, adult attachment style is a developmentally more proximal factor than childhood attachment, and thus would be expected to exert a more direct influence on adolescent and adult behaviour, including sexual abuse behaviour.

Fourth, overall, the stability of attachment styles from childhood to adulthood was weaker than expected. The higher prevalence of adult attachment problems relative to childhood attachment problems in the present sample is already noted. Findings suggest that childhood attachment style is not strongly predictive of general adult attachment style. While it was not uncommon for insecure adults to have a secure childhood attachment history, the reverse was generally not true – secure adults generally did not have an insecure childhood attachment history. The fact that very few of these offenders reported a change from insecure to secure attachment over time suggests that the profound interpersonal difficulties associated with insecure attachment may result in little, or no, opportunity to experience alternative (i.e., secure) attachment experiences in order to alter their attachment orientation, thereby producing relatively stable patterns of attachment over

time. Thus, mental models become naturally self-perpetuating (Bowlby, 1969, 1973), with individuals actively seeking out relationships that serve to confirm their internal beliefs of self and others, and for which they are behaviourally prepared to respond (Collins & Feeney, 2004). Continuity occurs because future experiences support established expectations (Belsky & Nezworski, 1988). However, for those who are otherwise securely attached, they may be more likely, at times, to experience unfulfilling and neglectful attachment relationships, which in turn increase levels of attachment insecurity, at least for a short while. It seems that, within this sample of child-sex offenders at least, attachment experiences subsequent to childhood have resulted in an increased orientation towards attachment insecurity in adulthood and thus suggests that attachment style (and behaviour) may be more responsive to situations than originally thought.

Fifth, the findings provided some support for a relationship between attachment and self-restraint. Less secure attachment to mothers was associated with lower self-control indicating that maternal attachment relationships may provide the primary developmental foundations for acquiring requisite capacities for self-restraint. Consistent with these ideas Jennings, Miller, Alvarez-Rivera, & Lanza-Kaduce (2008) found links between low maternal attachment and engagement in deviant behaviour in children. Whilst maternal attachment was somewhat weaker in its effect on deviance, their findings suggested that both maternal attachment and low self-control independently affect propensities towards deviance (Jennings et al, 2008). This provides some indirect support for ideas that low self-control may develop out of early problematic attachment relationships, especially with mothers, and therefore may be useful in explaining individual-level vulnerabilities towards anti-social and criminal behaviour generally. Whilst official offence history data cannot account for undisclosed or undetected offences, on the whole these anti-social proclivities

are reflected in the sample's criminal versatility prior to being convicted for sexual offences. Thus, the onset of sexual offending behaviour may be an extension, for some, of more general offence-related vulnerabilities to the sexual domain.

No significant relationship was found between paternal attachment and self-control, which is surprising given recent findings highlighting the important role of fathers in the development of self-regulatory strategies, social competency and deviance (Johnson, 1987). In particular, the paternal bonding style of 'affectionless control' has been directly linked to male delinquency (Mak, 1994). Others have also failed to find a relationship between paternal attachment and self-control (e.g., Jennings et al, 2008). Whilst maternal attachment relationships may be important to the development of anti-social tendencies more generally (and possibly by extension sexual offending behaviour), paternal attachment experiences may have more direct and specific implications for sexual offending behaviour by providing foundations for the acquisition of cognitive and affective capacities to effectively manage and engage in sexually responsible behaviour. This may, in turn, impact on the functioning and expression of other attachment-related systems (e.g., adult attachment, sexual and care giving) during critical developmental periods (Smallbone & Dadds, 2000; Smallbone et al., 2008; Smallbone & Cale, in press).

Self-control was more strongly associated with trait adult attachment avoidance and anxiety. This provides some indirect evidence that low self-control, developed early in life, remains stable into and through adulthood. Further, in terms of adolescent- and adult-onset offences these findings point to the more proximal relationship between adult attachment insecurity and lowered capacities for self-restraint. This provides some support for propositions that insecurely attached individuals may be more at risk, than securely

attached individuals, of chronic failure in exercising behavioural (including sexual) self-restraint.

4.3 Situational Dimensions of the Onset Sexual Offence

The previous phase of analyses (Section 4.2) focussed on the dispositional qualities of child-sex offenders that may serve to increase the propensity towards anti-social and possibly sexually abusive behaviour. This helps us to understand why one person may be more likely than another to offend. However, dispositional factors are limited in their ability to explain how these individual propensities (or vulnerabilities) result in sexually abusive behaviour at a certain time, place and within particular interpersonal contexts. To do this, the second phase of analyses shifts from offender dispositions (i.e., attachment-related vulnerabilities) to the immediate environment in which child sexual abuse occurs for the first time. Of interest here are those incidents that typically arise out of ordinary routine interactions and activities between the potential offender and victim, with focus given to the opportunity structures within these settings (Cohen & Felson, 1979). Propositions regarding the more dynamic nature of situations in evoking sexually abusive behaviour, as set out in Chapter Two, are investigated in more detail in the third phase of analyses.

4.3.1 Aims

As discussed in Chapter Two, several findings (e.g., offence onset age, victim-offender relatedness, and common offence settings) demonstrate the significant mediating and moderating effects of ecosystemic and immediate situational factors in the commission of child sexual abuse. However, recent theoretical propositions regarding how these situational dimensions precipitate sexually abusive behaviour, particularly its onset, have been subject to little empirical scrutiny. As a first step towards addressing this limitation

the aim of phase two of the analyses was to conduct a detailed, descriptive step-by-step analysis of the situational dimensions of the first sexual abuse incident in order to answer research question two:

- What are the situational dimensions of the onset sexual abuse incident?

The research is guided by the situational models described in Chapter Two. First, victim and offender characteristics (e.g., offence-onset age; victim gender and age; the nature and length of victim-offender relationship prior to sexual offence onset) are examined. From a routine activities perspective offence location, timing, victim-offender interactions and guardianship are investigated. In terms of rational choice and situational precipitators' models, offenders' sexual orientation and presence and frequency of sexual thoughts in the lead up to the onset abuse incident are examined. Moreover, level of planning or forethought; offenders' effort in gaining the victim's compliance; the length of sexual contact; and efforts to avoid victim disclosure are investigated.

4.3.2 Analyses

Offender age. Table 4.5 presents the offenders' age at sexual offence onset. The mean offence-onset age was 32 years (range 11 to 79 years). The modal onset-age bracket, constituting 28% of the sample, was 31 to 40 years old. Nearly one-quarter (23%) of the sample reported an offence-onset age over 40 years old.

Table 4.5

Offender age at sexual offence onset (%)

< 16 years	8.7
17 - 20 years	18.2
21 - 30 years	22.1
31 - 40 years	27.9
41 - 50 years	14.4
51 – 60 years	3.9
61 - 70 years	3.8
71 - 80 years	1.0
Mean	32.17 years
SD	14.06
Range	11-79 years

Note. $N = 107$

Type and length of victim-offender relationship. Victim-offender relationships were defined as familial (children who were related to the offender, including by marriage [e.g., biological/step child, sibling, grandchild or any other relative]); nonfamilial (children who offender knew but to whom they were not related [e.g., neighbour, child of friend, child known in some other way]) and stranger (e.g., child who offender did not know personally at least 24 hours prior to having sexual contact with them). A familial-onset was most commonly reported (53.3%, $n = 56$); 40% ($n = 42$) reported a nonfamilial-onset relationship and 6.7% ($n = 7$) reported a stranger-onset relationship (missing data = 1.9%, $n = 2$).

An established care-giving relationship was most commonly reported with 63% of offenders reporting a parental (e.g., biological or stepchild) or quasi-parental relationship (e.g., nephew/niece, grandchild, child of a friend, neighbour, volunteer or paid work) with the onset victim (see Table 4.6). As indicated in Table 4.6, for girls the most common perpetrator was their stepfather or father (51%). Male victims were most commonly offended against by a family friend (29%). In contrast to female victims, there were no reports of father-son abuse.

Table 4.6

Nature of victim-offender relationship (%)

	Victim Gender		
Relationship to child	Female	Male	Combined
Son or daughter of my partner	32.0	3.6	24.0
Biological son or daughter	18.7	0.0	13.5
Son or daughter of a friend	8.0	28.7	13.5
Child was a neighbour	6.7	7.1	6.7
Met child through work	4.0	14.3	7.7
Child complete stranger	4.0	10.7	5.8
Nephew or niece	5.3	7.1	5.8
Biological- or step- sister / brother	5.3	3.6	4.8
Child was friend (adolescent onset)	4.0	7.1	4.8
Cousin	4.0	3.6	3.8
Met child through friend	2.7	7.1	3.8
Met on street	1.3	7.1	2.9
Grandson or granddaughter	2.7	0.0	1.9
Met on internet	1.3	0.0	1.0

Note. $N = 104$; missing data 2.8%, $n = 3$

Table 4.7 indicates how long the offender had known the child before initiating sexual contact. Overall, nearly three-quarters (74%) of the sample had known the child for at least 6 months. Approximately 17% of the sample reported knowing the child for less than one-month, with 4% reporting that they had met the child on the day of the offence.

Table 4.7

Length of victim-offender relationship prior to onset abuse incident (%)

> 1 year	63.1
6 months – 1 year	10.7
1 month – 6 months	11.7
1 week – 1 month	7.8
1 day – 1 week	2.9
A few hours	1.0
A few minutes	2.9

Note. $N = 104$, missing data 2.8%, $n = 3$

Victim Age and Gender. Table 4.8 reports the first victims' age and gender. Overall, victim age was fairly evenly distributed across middle childhood and adolescence, with a mean age of 10.6 years old (modal age = 12 years old). The proportion of victims increased with victim age: 11% were under 5 years, 41% between 6 and 11 years, and 48% between 12 and 16 years. No significant differences in victim age were found between the offence-onset groups (F (2, 103) = -1.74, $p = 0.18$). Girls were approximately three times more likely than boys to be the offender's first victim (73% vs. 27%) and ten times more likely

than boys to be abused within the familial-onset context, 'exact p' (2, 104) = 20.08, p = .000, Cramer's V = .44. Non-familial and stranger-onset offenders reported offending almost equally against boys and girls.

Table 4.8

Victim Age and Gender (%)

	Offence onset group			
Age	Familial	Non-familial	Stranger	Combined
1 – 5 years	14.3	4.9	14.3	10.6
6 – 11 years	46.4	36.6	28.6	41.3
12 – 16 years	39.3	58.5	57.1	48.1
Mean	10.0 years	11.2 years	11.3 years	10.6 years
SD	3.43	3.12	3.99	3.37
Range	1-16 years	2-15 years	4-16 years	1-16 years
Gender				
Male	8.9	48.8	42.9	26.9
Female	91.1	51.2	57.1	73.1
Adjusted residuals	-4.5 to 4.5	4.1 to -4.1	1.0 to -1.0	--

Note. N = 104; missing data 2.8%, n = 3

Offence locations. Table 4.9 presents the location of the onset sexual offence. The onset incident occurred predominately in a domestic setting (78%), most commonly within the victim or offender's home (76%). The next most common setting was the public setting (14%). Offences occurring within institutional settings were least commonly reported (2%).

Table 4.9

Onset offence location (%)

In the offenders home		61.9
In the child's home		14.3
In someone else's home		1.9
If in a home, where exactly,		
	Bedroom	62.7
	Living room	17.3
	Bathroom	6.7
	Yard / shed	5.3
	Somewhere else,	
	(e.g., under house, laundry, office)	8.0
Other private setting (caravan, hotel, workplace)		2.9
In a public place (bushland, car)		14.3
Camping		2.9
At a school, club or church		1.0
At a residential institution		1.0

Note. $N = 105$, missing data 1.9%, $n = 2$

Offence timing. Almost half (47.5%) of the offences occurred between the hours of 3pm and 9pm, 34.7% occurred between 6am and 3pm and 17.8% between 9pm and 6am. As illustrated in Figure 4.3, pre-adolescent children (up to 11 years) were more likely to be offended against between the hours of 6am and 3pm (74%, adjusted residuals = 3.1 to -3.1) and adolescent children between the hours of 9pm and 6am (78%, adjusted residuals = -2.9

to 2.9), $\chi^2(2, 100) = 13.52$, $p = .001$, Cramer's $V = .37$, missing data 6.5%, $n = 7$. Both age-groups were almost equally offended against during the hours of 3pm and 9pm.

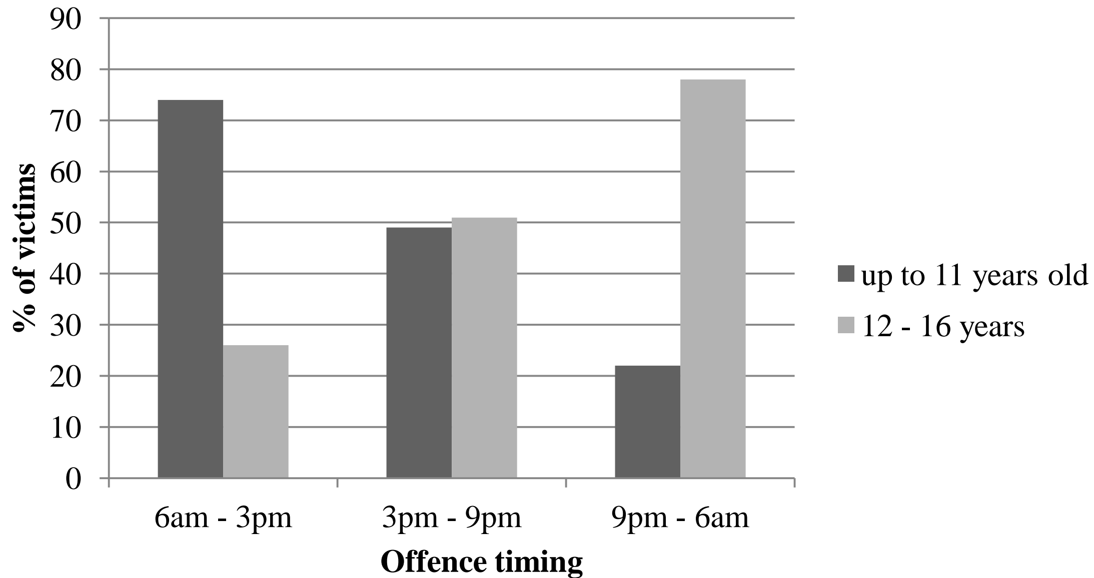


Figure 4.3. Offence timing by age categories (%).

Activities engaged in immediately prior to sexual contact. As shown in Table 4.10, immediately preceding the first sexual contact 27% of the sample reported not being engaged in any particular activity with the child. Others reported being engaged in activities that revolve around ordinary domestic routine and parenting duties – for example, 31% reported being engaged in a recreational activity with the victim (e.g., watching TV, playing a game, reading); 17% were putting the child to bed or lying down with the victim; and 10% were bathing or dressing. A small percentage reported more exploitative activities, for example, exploring sexuality with the child (3%), smoking marijuana with the child (1%), or taking the child out somewhere (7%). A small percentage (2%) reported comforting the child immediately prior to the sexual contact.

Table 4.10

Activities engaged in with child immediately prior to onset (%)

Activity	%
Not doing anything in particular	27.2
Lying with child or putting child to bed	16.5
Playing a game with the child	15.5
Watching TV with child	14.6
Bathing / dressing	9.7
Taking child out somewhere	6.8
Talking	2.9
Exploring sexuality	2.9
Comforting child	1.9
Reading to child	1.0
Smoking marijuana	1.0

Note. $N = 103$ missing data 3.7%, $n = 4$

Presence of others. For offences occurring in the home, 63.4% of the sexual contacts occurred in close proximity to others. For offences occurring outside the home 38.1% took place when someone else was nearby. Despite this, only 10% of sexual contacts were witnessed. Table 4.11 reports the reasons why the offender came to be alone with the child. For those offenders living with the child at the time, the opportunities arose within the realm of ordinary routine caretaking responsibilities (66%) (e.g., supervising the child whilst others out or at home) or as the child's sole caregiver (8%). Similarly, for those not living with the child, these opportunities predominantly arose within the realm of (quasi) caregiving responsibilities (e.g., babysitting child) (33%), as well as during visitation at the

offender's home (with or without family) (24%) and somewhat less commonly at a public place (13%).

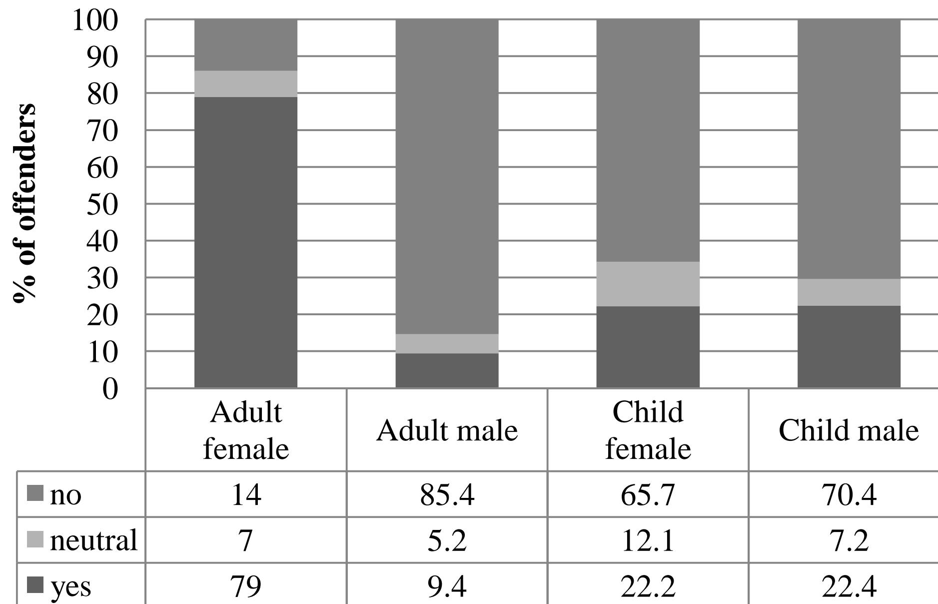
Table 4.11

Reasons for being alone with child

Living with child	%
Supervising child at home as part of normal child care duties (others home)	34.0
Supervising child at home (others family members out)	32.0
Sole caregiver	8.0
Let child sleep with me	6.0
Went to child whilst other family members asleep	6.0
Playing / confined to same room alone	6.0
Volunteered to go on an excursion / drive	4.0
Child came to my bed / room (others asleep)	4.0
Not living with child	
Babysat child for friend / relative	32.6
Child visited my home without family / alone	23.9
Met child at public place	13.0
Took the child out somewhere or picked them up from somewhere	8.7
I visited the child's home	6.5
Child was visiting my home with their family	6.5
Swimming in pool with child	2.2
Through church activities	2.2
Broke into child's house	2.2
Through organised recreational activities	2.2

Note. $N = 100$, missing data 6.5%, $n = 7$

<u>Sexual orientation</u>. Figure 4.4 reports offenders' sexual orientation at the time of the onset sexual offence. Whilst sexual orientation towards both male and female children was indicated, a heterosexual orientation was reported by the majority of offenders (79%).



	Adult female	Adult male	Child female	Child male
no	14	85.4	65.7	70.4
neutral	7	5.2	12.1	7.2
yes	79	9.4	22.2	22.4

Figure 4.4. Sexual orientation at sexual offence onset[11]

<u>Sexual thoughts.</u> Table 4.12 indicates the presence of sexual thoughts in the lead up to sexual offence onset. The majority of offenders reported that they did not experience sexual thoughts about children in general (70%) or the onset victim (61%) in the month prior to offence onset. Whilst the proportion of offenders reporting sexual thoughts about children in general remained relatively constant in the weeks and days prior to the onset sexual offence, the proportion of offenders reporting sexual thoughts about the onset victim substantially increased closer to the incident, with the majority (60%) of the sample indicating that they experienced sexual thoughts about the onset victim on the day of the offence. As depicted in Table 4.13, for those offenders who reported experiencing sexual

[11] *Note.* Participants could indicate more than one preference, $N = 99$ (missing data 7.5%, $n = 8$)

thoughts (N = 65), these thoughts were most commonly prompted by the physical attractiveness of the child (45%) and that the child seemed to care about the offender (42%). Seeing the child naked or semi-naked was also commonly reported (40%).

Table 4.12

Presence of sexual thoughts prior to the onset sexual offence (%)

Presence of sexual thoughts	%		N
	Children Generally	Onset Victim	
Month prior	29.8	38.1	106
Week prior	21.9	35.4	96
Day prior	22.1	35.9	95
Day of	29.6	60.4	98

Table 4.13

Reasons leading to sexual thoughts about the child (%)

Child was physically attractive	44.6
Child seemed to care about me	41.5
Saw the child naked / semi-naked	40.0
Child fun to be with	38.5
Child needed attention (e.g., to be hugged)	32.3
Child flirted with me	29.2
Way child was dressed	15.4
Child seemed vulnerable / shy	13.8
Child already had a sexual relationship with an older person	12.3

Note. Participants could indicate more than one reason, N = 64, missing data 0.9%, n = 1

Level of forethought and planning. As Tables 4.14 and 4.15 indicate, the majority of offenders reported little forethought and planning prior to sexual contact with the child. Most reported that the decision to offend occurred spontaneously (47%), or within minutes (29%) of, the offence taking place. Similarly, deliberate plans to "set up" the sexual contact was not commonly reported with most (76%) offenders indicating that they acted on the spur of the moment, or within minutes of thinking about the sexual contact.

Table 4.14

Level of forethought prior to the onset sexual offence (%)

Made active decision to offend	
Acted on spur of the moment	46.6
Few minutes before	29.1
Few hours before	7.8
A day before	1.9
A day – week before	6.8
Week – month before	4.9
Month – 6 months before	1.0
6 – 12 months before	0.0
Over 1 year	1.9

Note. $N = 103$, missing data 3.7%, $n = 4$

Table 4.15

Level of planning prior to the onset sexual offence (%)

Set up the sexual contact	
Acted on spur of the moment	57.8
Few minutes before	23.5
Few hours before	5.9
A day before	2.0
Day – week before	3.9
Week – month before	3.9
Month – 6 months before	1.0
6 – 12 months before	0.0
Over 1 year	2.0

Note. $N = 103$, missing data 3.7%, $n = 4$

Strategies to obtain victim compliance. Table 4.16 indicates the strategies employed by offenders to obtain victim compliance. A large proportion (48%) of the sample reported "doing nothing". When strategies were used these tended to be more subtle modes of persuasion: providing love and attention (26%) and exploration of sexuality with the child (19%). The use of physical force, drugs and alcohol or pornography was less frequently reported (10%).

Table 4.16

Strategies used to obtain child's compliance (%)

Did nothing	48.1
Gave child love and attention	26.0
Encouraged child to explore their sexuality	19.2
Offered bribes (e.g., money, lollies)	8.7
Showed child pornography	3.8
Gave child alcohol / drugs	2.9
Threatened child with physical force	1.9
Used physical force	1.0

Note. Participants could indicate more than one strategy; N = 104, missing data 2.8 %, n = 3

Length of sexual contact. As shown in Table 4.17, nearly all (81%) sexual contacts lasted less than fifteen minutes, most (61%) of which were completed within five minutes.

Table 4.17

Length of sexual contact (%)

0 – 5 minutes	61.4
5 – 15 minutes	19.7
15-30 minutes	12.9
30-45 minutes	3.0
45-60 minutes	1.0
Over 1 hour	2.0

Note. N = 101 missing data 5.6%, n = 6

Strategies to avoid disclosure. Table 4.18 reports the strategies used to avoid disclosure. In the twenty-four hours following the onset sexual offence, 80% of the sample reported that they did nothing to silence the child. The strategies reported by offenders appeared to involve the exploitation of the relationship with the child (e.g., bribes, keeping secrets, offender or child getting into trouble). Threats to hurt the child or others close to them, and the use of force were not reported by any of the participants.

Table 4.18

Strategies to avoid the child from disclosing the sexual contact (%)

Nothing	80.0
Bribed the child with gifts	9.0
Said I would go to jail	7.0
Asked child not to tell / keep a secret	5.0
Said child would be in trouble	5.0
Relied on position	2.0
Said I would not love them anymore	2.0
Said that their parents would not love them anymore	1.0
Threatened the child with physical force	0.0
Said I would hurt their family / friends	0.0

Note. Participants could indicate more than one strategy
$N = 100$, missing data 6.5%, $n = 7$

4.3.3 Discussion

Section 4.3 focussed on the situational dimensions of the onset sexual offence, particularly the opportunities structures may potentially enable or restrict the enactment of such behaviour. With regard to offender age, the findings suggest that the peak risk period for offence-onset is the early to mid-30's. The mean offence-onset age for this sample was 32 years, with a modal range of 31 to 40 years. This is consistent with previous trends (Andrews, Gould, & Corry, 2002; Fleming, 1997; Hanson, 2002; Lussier, 2005; Smallbone & Wortley, 2000, 2004a; Wortley & Smallbone, 2006). This late offence-onset age may be a function of increased opportunities to exploit children, which is consistent with the current findings regarding the nature of the victim-offender relationship.

A familial-onset was most commonly reported by the sample. Two-thirds of the sample reported an existing relationship with the victim extending more than one year prior to sexual contact, with only 7% reporting a stranger-onset relationship. This is similar to other studies of child-sex offenders (e.g., Andrews, Gould, & Corry, 2002; Dube & Hebert, 1988; Smallbone & Wortley, 2000) and current official statistics (ABS, 2005; QPS, 2010). Overall, the most commonly reported perpetrator was a stepfather or father. The presence of a stepfather in the home has been previously documented as one of the most important risk factors in child sexual abuse (Beitchman, Hood, DaCosta, Akman, & Cassaria, 1992; Finkelhor & Baron, 1986; Mullen & Fleming, 1998; Putnam, 2003). Also consistent with previous findings (e.g., Hunter, 1991) these tended to be stepfather- or father-daughter relationships. Father-daughter and stepfather-daughter incest has been reported as the most traumatic of all forms of child sexual abuse (Beitchman et al., 1992; Hebert, Parent, Daignault, & Tourigny, 2006). Whilst girls were more at risk of sexual abuse within the

family, boys tended to be abused by someone outside the family, most commonly by a family friend.

Again consistent with previous trends (e.g., ABS, 2005; Andrews, Gould, & Corry, 2002; Goldman & Padayachi, 1997; QPS, 2010) the findings indicate that the peak risk for sexual abuse for children is between 10 and 12 years old. This risk increases with age (Putnam, 2003). In the current study most offences occurred against children aged 12 to 16 years old. Overall, females were more likely to be abused than boys (ABS, 2005; Goldman & Padayachi, 1997; Fischer & McDonald, 1998; Putnam, 2003).

The domestic setting was the main location for the onset sexual offence, with the majority of offences taking place within the offender's or child victim's home, most often within a bedroom. Contact through organised recreational or educational activities or actively seeking out children in public place was much less frequently reported. This points to offenders exploiting common, everyday situations to offend, taking opportunities as they arise, and which require much less effort and risk than offending outside of this domain. Institutional settings were least commonly reported, which is somewhat surprising. It may be that institutional abuse is characteristic of more chronic offending patterns, whereby offenders actively seek employment that brings them into routine contact with children, and thus more opportunity to offend.

From a routine activities approach the domestic setting is where potential victims and offenders are most likely to "converge in space and time", and "in the absence of a capable guardian", thus providing the least amount of risk for offenders and protection for victims (Clarke, 1992). It is often during everyday routine interactions between the potential victims and offender that opportunities to offend disproportionately arise. It may be that, due to the nature of the existing relationship between the victim and offender the

offender is entrusted with supervision of the child, oftentimes in the absence of others. Thus, it is the offender that, in many instances, is also the primary caregiver and thus is the "not-so-capable" guardian (Smallbone, 2011).

In line with these ideas, the results show that offence timing coincided with typical age-related routine activities where opportunities to offend are likely to be maximised, and chances of being witnessed minimised. Overall, offences occurred most typically between the hours of 3pm and 9pm. These are times where both familial and non-familial (including strangers) are likely to come into contact with children (i.e., family activities within the home, recreational activities outside the home). Further, younger children (under 11 years) were most predominately offended against between the hours of 6am and 3pm. In terms of familial offending, these are times where the victim may be most likely to be engaged in activity with the offender, often unsupervised for periods of time (e.g., stay at home parent, bathing or dressing child, putting child down for a nap). With regard to non-familial offending this risk may be in child care centres, schools, or being babysat by a family friend. Adolescent victims (aged 12 to 16 years), were most commonly offended against between the hours of 9pm and 6am, which again points to the times one might ordinarily expect potential victims to be interacting the most with their caregivers in the home (e.g., homework, watching TV, bedtime) and, for some, individuals outside the home (e.g., sleep over at friends house; at a party; walking home).

The activities engaged in at this time suggest that these offences typically arose during domestic routine interactions (e.g., lying with child or putting them to bed, playing a game, watching TV or bathing and dressing the child), others reported "doing nothing" in particular with the child at the time. Many of these activities, on the surface could be viewed as innocuous, even positive parenting activities. Very few offenders indicated using

strategies that would likely arouse suspicion (e.g., smoking marijuana with the child; openly exploring the child's sexuality).

Only 10% of offences were witnessed, despite in many cases, the presence of others nearby. This was particularly so for offenders living with the child. For these offenders, access to their victim most often arose in the course of normal caretaking duties where there were no other responsible adults available and present (e.g., child's sole caregiver, undertaking normal child care duties whilst others out, asleep or whilst on excursion). Again, in familial relationships other guardians naturally entrust the supervision and caretaking responsibilities of their children to their partner whilst engaged in other ordinary activities in the home. For offenders not living with the child, the findings indicate that they may utilise opportunities when left responsible for children for a significant period of time whilst other guardians are absent (e.g., babysitting the child for parents; child visiting the offender's home alone). Combined, these findings point to the role of both the victim-offender relationship and ordinary caregiving situations in providing the most opportune offence structure and thus the most risk for sexual abuse to occur.

Sexual attraction towards children was reported by a small proportion of offenders. The majority reported a preference for adult females. This suggests that for most men, their primary orientation was heterosexual (Tominson, 1995), which may also account for the higher rates of female victims. The proportion of offenders reporting conscious sexual thoughts about children generally was low, and appeared to remain so in the lead up to the first sexual offence. Similarly, only some offenders reported experiencing sexual thoughts about the onset victim in the lead up to onset, although this changed on the day of the offence, where the majority of offenders (e.g., 60%) reported experiencing sexual thoughts. This again points to the possibility that many of these men did not possess entrenched

sexually deviant motivations at onset. It also suggests that these sexual thoughts were directed at a particular child and may have even been prompted by the immediate circumstance. The findings also suggest that sexual motivations may have been precipitated by both sexual cues (e.g., physical attractiveness of child, seeing child naked or semi-naked) as well as attachment (e.g., child seemed to care about offender) and nurturing (e.g., child needed comforting; vulnerable child) cues present at the time of onset.

Most offenders reported little active decision-making and planning prior to onset. On the one hand this suggests that, for some, sexual motivations and behaviour were evoked spontaneously by situational cues (e.g., seeing the child naked, comforting the child), leading to offender to take the immediate opportunity to act on impulses. On the other, it suggests that most offenders did not consciously and deliberately "set up" the first sexual contact, but responded to the perceived risk and benefits within the immediate environment. It appears that, regardless of motivation (well-established or spontaneous), like all other forms of crime, situational factors present within the immediate environment most directly influenced their decision to offend (i.e., cost-benefit analysis).

Further to this, the strategies used to gain victim compliance in the sexual contact in many respects required little effort on the offenders' part. In fact, most reported "doing nothing". This indicates that the power of the existing relationship between the offender and victim. It seems that, by nature of their physical and emotional position in this relationship, it was easy to exploit the child. When strategies were used, these reflected nurturing behaviours rather than overt threatening means. Again, this points to offenders attempting to exploit the victim-relationship as an effective tool for engaging children in sexual activity.

Moreover, the sexual abuse incident, for the most part, was completed within a short duration of time (e.g., 1 to 15 minutes). From a rational choice perspective this may indicate that little time and effort was required to obtain reward (be this sexual, emotional or both). It may also suggest that the length of the contact was restricted by offender's concerns about the proximity of others. Alternatively, as it was the first sexual contact with the child, the behaviour may have been more exploratory to "test the waters".

Finally, the lack of effort indicated by offenders to avoid disclosure again demonstrates the powerful nature of the victim-offender relationship. It also suggests that offenders were, for the most part, confident that the child would not disclose. Thus, from a rational choice perspective effort required to silence the child was minimal; the relationship in itself appeared to be a powerful silencer. Strategies, when used, again appeared to exploit the emotional relationship the offender had established with the child, but were unlikely to involve actual or threatened harm.

These findings, combined, provide a classic account of rational choice and routine activities approaches that inform situational crime prevention. The findings are consistent with recent theoretical propositions regarding the role of systemic risk and protective factors (both actual and perceived) present within the social and physical ecologies of potential victims and offenders and that restrict or permit the occurrence of sexually abusive behaviour. It is those typical routine interactions occurring in the context of existing caregiving relationships that such opportunities most frequently arise because, by nature, they characteristically bring the victim and offender together in time and space, oftentimes in the absence of other capable guardians, thus acting as fundamental initiators of child sexual abuse (Cohen & Felson, 1979; Finkelhor, 1984). In saying this, virtually all men encounter these opportunities, but most, it is assumed, do not sexually abuse. This

requires understanding the person-situation interaction, which is the purpose of the final phase of the analyses.

4.4 Examining the Person-Situation Interaction at Sexual Abuse Onset

The previous two phases (Sections 4.2 & 4.3) of the analyses concentrated on understanding, separately, the role of individual development-related vulnerabilities that may increase one's susceptibility to engaging in sexually abusive behaviour and situational dimensions of the onset sexual offence that facilitate its enactment. As Hartley (2001) argues, "the situation does not objectively influence behaviour; rather, one's subjective interpretation or perception of the situation, influenced by personal factors, induces action" (p. 460). Motivations therefore must be understood within the context of one's past and current life experiences (Hartley, 2001; McTeer, 1972). The third and final phase of the thesis examines how these distal (i.e., developmental) and proximal (i.e., situational) influences together may result in the sexual abuse of a child for the first time.

4.4.1 Aims and hypotheses

Weaving together theoretical perspectives presented throughout this thesis, the aim of the final phase of this research is to explore how distal and proximal factors may together produce sexually abusive behaviour for the first time. It is important to reiterate here that this is an empirical analysis of the conceptual (rather than statistical) interactions between dispositional characteristics and situational factors at sexual offence onset. The research question pertaining to phase three of the analyses is:

- How might individual attachment-related vulnerabilities interact with immediate situational factors to trigger sexually abusive behaviour?

In order to answer this research question, the aim of this section was two-fold:

(1) To examine the relationship between developmental experiences and attachment orientation in the period immediately preceding offence onset

- What is the relationship between childhood attachment and attachment orientation in the period preceding sexual offence onset?

(2) To examine how the relationship between individual development-related attachment vulnerabilities and immediate situational factors may precipitate the onset of child sexual abuse.

- Do early developmental vulnerabilities emerge in response to situational stressors present in the period immediately preceding sexual offence onset?

The three associated hypotheses were:

(1) There will be moderate continuity from childhood to state adult attachment styles;

(2) Attachment problems intensify in the immediate period preceding sexual offence onset with offenders likely to report relationship and other personal problems in the period preceding their onset sexual offence, but will be unlikely to have solved these problems by engaging with adult attachment partners;

(3) Compared to their general adult attachment style, offenders' adult attachment will be more insecure in the weeks prior to their onset sexual offence.

4.4.2 Analyses

The measure for state adult attachment required offenders to be in a relationship in the weeks prior to the onset sexual offence. Just over half of the sample (55.3%, $n = 57$) reported being in an intimate relationship in the month prior to the onset sexual offence. The remainder (44.7%, $n = 46$, missing data, 3.7%, $n = 4$) of the sample were excluded for these specific analyses. There were no significant differences in maternal, paternal or trait adult attachment between those who were and those who were not in an intimate

relationship at sexual offence onset. Offenders who were in an intimate relationship were significantly older (*M* = 35.7 years, *SD* = 11.10) than those who were not (*M* = 26.8 years, *SD* = 14.88), *t* (101) = -3.18, *p* = .001, at the time of the onset offence. For offenders in a relationship a familial-onset (68.4%) was more commonly reported, whilst those who were not in a relationship more commonly reported a nonfamilial- (including stranger) onset (64.4%), χ^2 (1, *N* = 102) = 10.93, *p* = .001, Φ = -.33. More specifically, for offenders in a relationship at the time of onset the victim was either a biological (23.2%, adjusted residuals = -1.9 and 1.9) or step-child / sibling (39.3%, adjusted residuals = -3.2 and 3.2), whereas for those not in a relationship, relationships with the victims of their onset offences were much more diverse, including extended family members (e.g., niece, grandchild, cousin) (17.8%, adjusted residuals = 2.0 and -2.0), children known outside family (e.g., the child of a neighbour or friend (48.9%, adjusted residuals = 2.3 and -2.3), or strangers (13.3%, adjusted residuals = 1.4 and – 1.4), 'exact p' (4, *N* = 101) = 19.09, *p* = .000, Cramer's *V* = 0.44). For offenders in a relationship, the victim of the onset sexual offence was also significantly more likely to be female (83.9%), χ^2 (1, *N* = 101) = 8.52, *p* = .004, Φ = .29. There were no significant differences in onset victim age between the two offender relationship groups.

<u>Associations between childhood and state adult attachment.</u> Recall the correlation matrix (Table 4.2). Childhood attachment was generally more reliably associated with state adult attachment than with trait adult attachment, with the strongest associations obtained between maternal secure and state anxious (ρ = -.39), and paternal avoidant and state avoidant attachment (ρ = .38). By example, the strongest associations involving trait adult attachment were between paternal care and trait anxious (ρ = -.29), and maternal control and trait anxious attachment (ρ = .30).

Stressors. As shown in Figure 4.5, about half (52%) of the sample reported relationship problems in the weeks preceding the onset sexual offence. Other common stressors included financial problems (40%) and sexual difficulties (28%). As indicated in Figure 4.6, few sought help for these problems from a professional (14%) or an adult friend (7%) and least of all, from an adult intimate partner (4%) or adult family member (3%). Some offenders (10%) sought help or comfort from their child(ren). Avoidance strategies were more common, particularly self-isolation (55%), consuming alcohol or drugs (41%), and 'doing nothing' (24%).

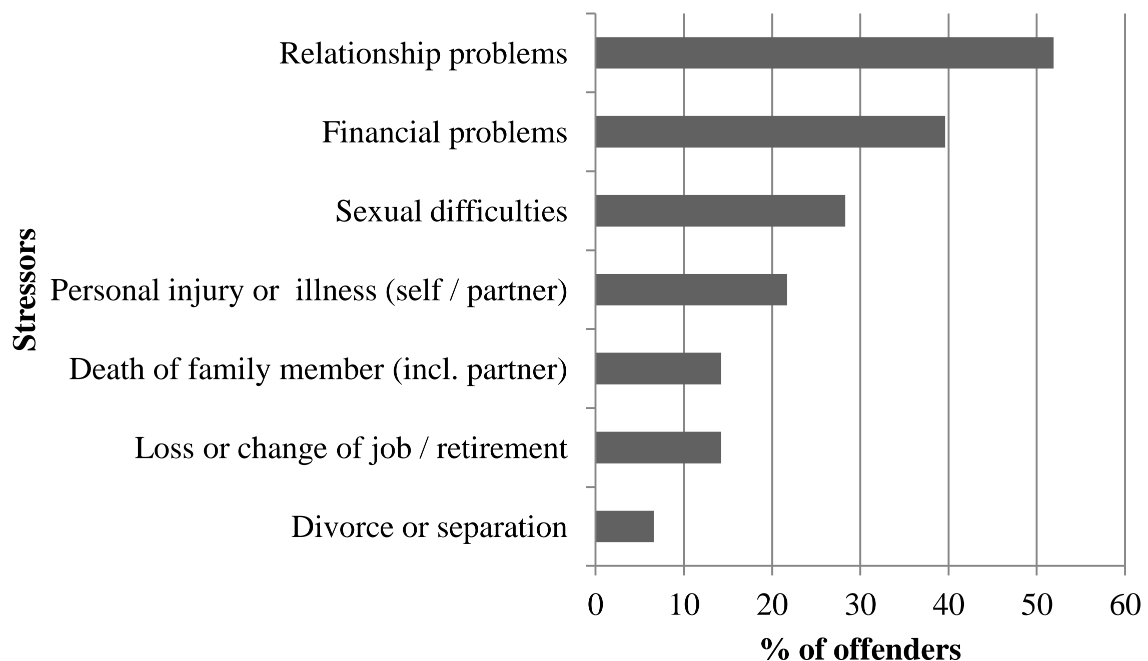


Figure 4.5. Stressors within offenders' life in the month prior to sexual offence onset[12]

[12] *Note.* Participants could indicate more than one response, $N = 106$, missing data 0.9%, $n = 1$

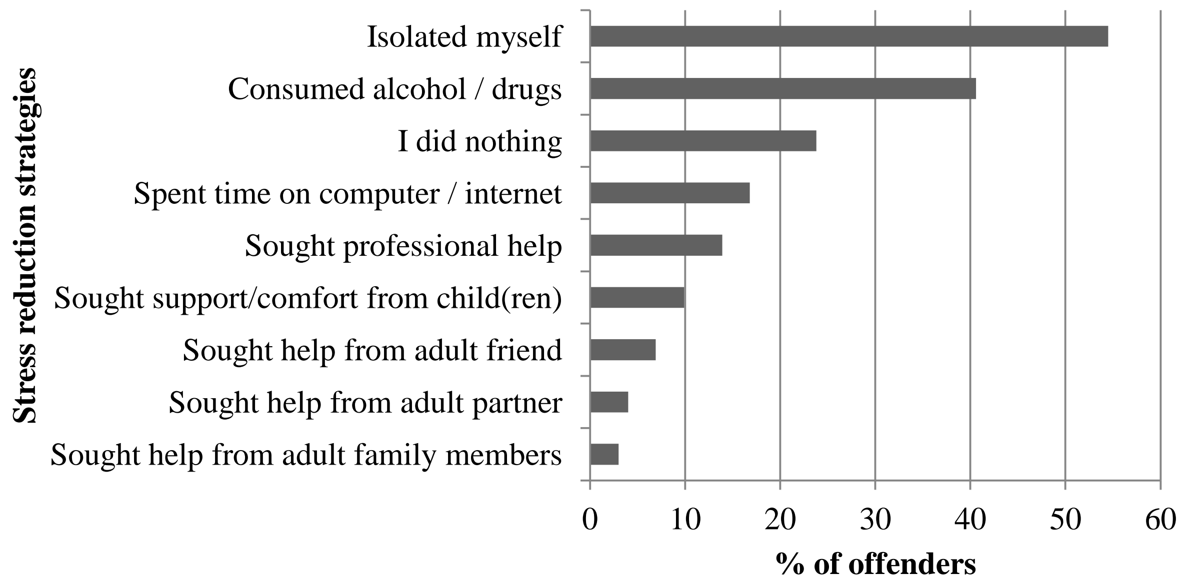


Figure 4.6. Stress reduction strategies[13]

State feelings and behaviour. As reported in Figure 4.7, the most commonly reported feelings immediately prior to the onset sexual offence were loneliness (37%) and depression (30%). Approximately one-quarter (27%) reported wanting sex or use of pornography. Intoxication from alcohol and / or drugs was also commonly reported (33%). Attachment-seeking (e.g., sought comfort from the onset victim) and /or nurturing behaviour (e.g., comfort sought by the onset victim) was reported by 17.3% of the sample.

[13] *Note.* More than one strategy may have been reported by participants $N = 101$, missing data 5.6%, $n = 6$

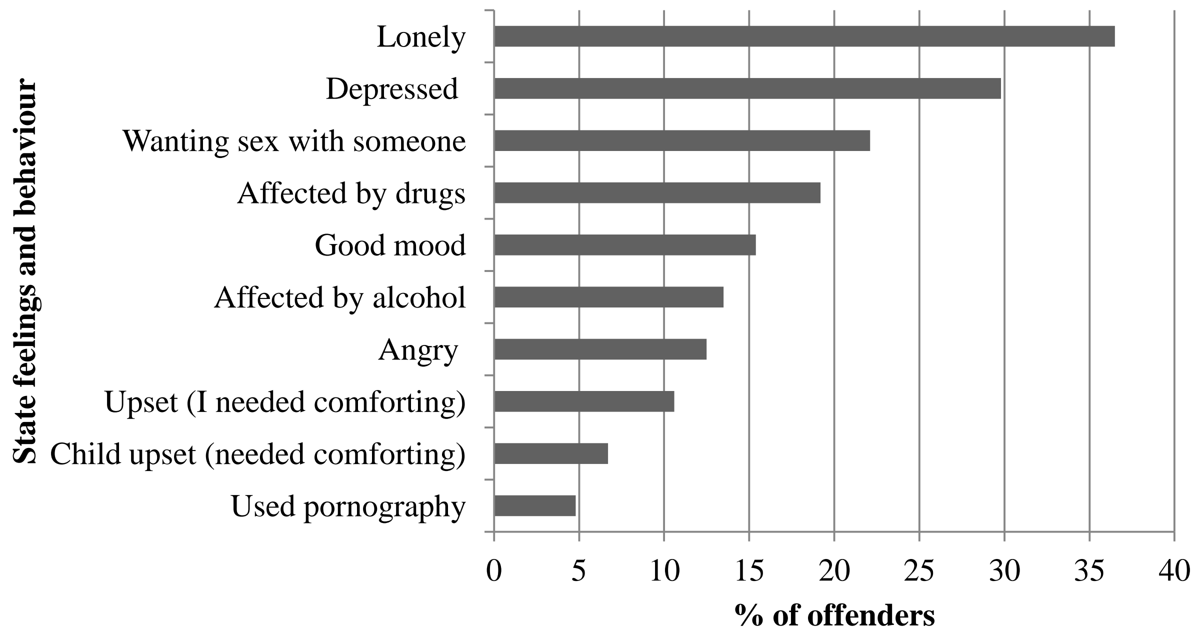


Figure 4.7. State feelings and behaviour immediately prior to onset sexual offence[14]

Attachment orientation at sexual offence onset. Two paired-samples t tests were computed to test for changes in attachment orientation for offenders who were in an adult intimate relationship in the weeks preceding their onset sexual offence. Figure 4.8 shows the mean ratings for trait and state attachment anxiety and for trait and state attachment avoidance. No differences were observed between trait and state attachment anxiety. However, offenders reported a significant increase in attachment avoidance in the weeks preceding their onset sexual offence, (M = 3.77, SD = 1.36), compared to their general (trait) adult attachment avoidance (M = 3.44, SD = 1.36), t (54) = -2.45, p = .018. The eta squared statistic (.10) indicated a moderate effect size (Cohen, 1988).

[14] *Note*. Participants were asked to indicate all answers that apply, N = 104, missing data 2.8 %, n = 3

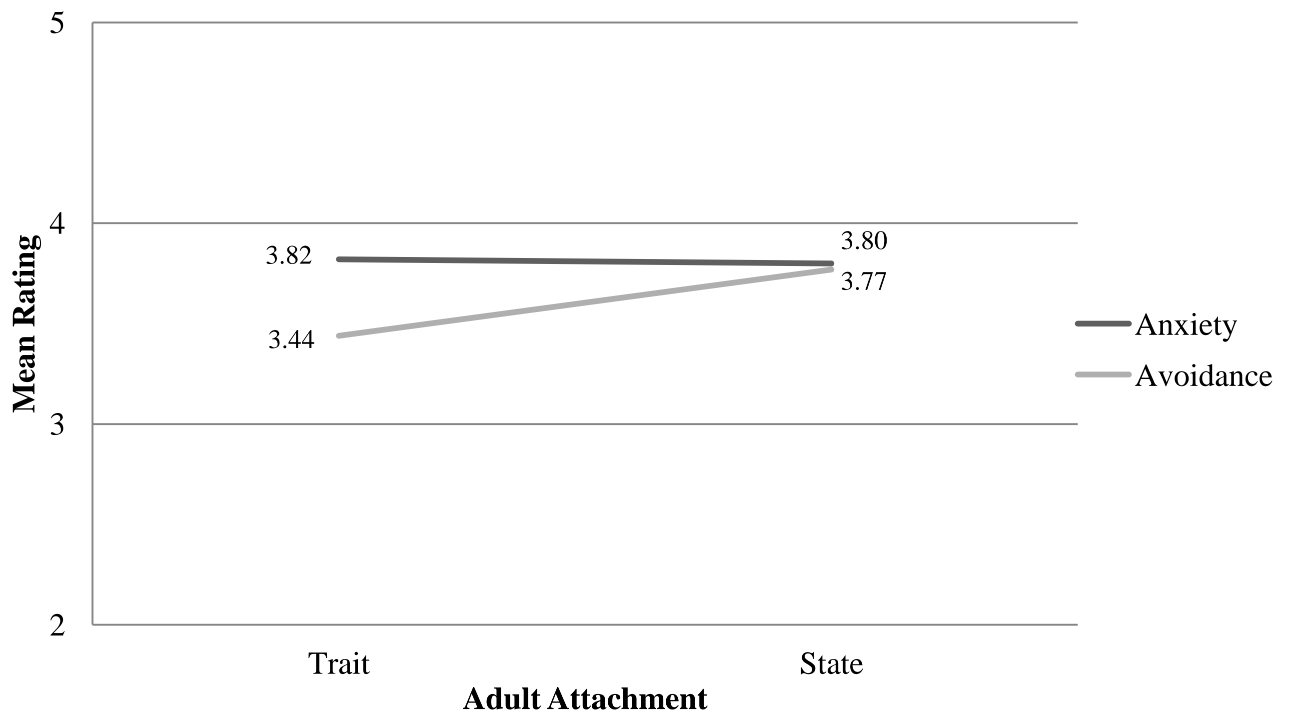


Figure 4.8. Mean trait and state attachment.

4.4.3 Discussion

In Section 4.4 three theoretically-driven hypotheses regarding the interaction between development-related vulnerabilities and immediate situational factors in the onset of child sexual abuse were tested. In general, the findings supported the hypotheses.

First, childhood attachment problems were more clearly reflected in adult state attachment than in trait adult attachment, with moderate continuity found between childhood attachment and state adult attachment styles. This finding provides the first empirical evidence linking insecure childhood relationships specifically to the onset of child sexual abuse. These results further implicate insecure childhood attachment relationships to later dysfunctional, coercive and contradictory strategies for achieving emotional self-regulation, which may result in sexually abusive behaviour (Hazen et al,

2010; Smallbone & Dadds, 2000; Smallbone et al., 2008). These relationships suggest that higher levels of attachment insecurity in the period immediately preceding the onset may render some men more vulnerable to experiencing a breakdown in self- and possibly sexual-restraint (Smallbone & Cale, in press). These findings fit with Marshall, Serran and Cortoni's (2000) findings that sexual offenders engage in extreme emotion-focussed coping leading to states of cognitive deconstruction whereby behaviour is driven by concrete immediate needs, without regard for the inappropriateness or consequences of the behaviour.

Second, the findings suggest that early attachment vulnerabilities do not always manifest as stable adult attachment problems, but instead emerge in the context of relationship or other life problems, creating a diathesis for child sexual abuse (Burk & Burkhart, 2003). As predicted, in this study, half of the offenders reported experiencing relationship problems in the month preceding their onset offence, and most employed avoidance strategies (e.g., isolation; drug and alcohol use) in response to these problems, rather than engaging with adult attachment partners. In the moments preceding sexual offence onset offenders commonly reported feelings of loneliness and depression, and the use of drugs and / or alcohol. Attachment, nurturing and sexual motivations were also reported. These findings indirectly support the theoretical proposition that acute or transient attachment problems and emotional states precipitate sexual abuse behaviour. That is, for some offenders immediate situational precipitators interact with individual-level vulnerabilities (e.g., low capacity for, and commitment, to self-restraint) and opportunity to produce a sexual offence. It also suggests that motivations, other than sexually-deviant ones, may also play a proximal role in sexually abusive behaviour, by prompting and / or permitting sexually abusive behaviour (Wortley & Smallbone, 2006). Given the biological,

developmental and situational links between attachment, nurturing and sexual behaviour, insecure attachment may therefore create more specific vulnerabilities for engaging in irresponsible sexual behaviour, particularly involving children.

These findings also suggest that even the most resilient and prosocial man may be at risk of sexually abusing a child, particularly when several disihibitory elements (e.g., intoxication, stress and anxiety) are simultaneously at play. According to Smallbone and colleagues (2008) these situational stressors, for some men, may produce a temporary disorganisation of attachment-related behaviour, leading to sexual motivations and behaviour being precipitated by attachment (e.g., emotional distress, need for comfort) and / or nurturing cues (e.g., presence of child, being comforted by child). This fits with the findings reported in Section 4.3.

Third, the findings partly support the hypothesis that offenders' adult attachment would become more insecure in the period preceding their onset sexual offence. Recall that these findings pertain only to those offenders who were in an adult intimate relationship prior to their onset sexual offence. For these offenders no significant changes in attachment anxiety were found, which is generally characterised by fears of abandonment and preoccupation with the attentions of an attachment figure. However, a significant increase in attachment avoidance was found. Because offenders were asked specifically about their attachment to an adult partner, the findings suggest an increase in avoidance specifically in relation to that partner.

As noted earlier, many of the present offenders reported relationship and other personal problems at this time, but very few sought help from their adult partner. For avoidant adults the desire for intimacy and contact with others, is often met with pervasive personal distrust, jealousy, need for social approval, and fear of rejection, often leading to

withdrawal from close relationships where one sees themselves as vulnerable to rejection, and possibly redirecting these behaviours towards less threatening sources (including for instance a child) (Bartholomew, 1990; Hazan & Shaver, 1987). The current findings present the possibility that that these men may have been withdrawing from their adult partner because their fear of intimacy with, or rejection from them, increased during the weeks prior to first engaging in the sexual abuse of a child. Other research has found that, when faced with relationship difficulties, individuals adopt more insecure attachment behaviours, especially avoidant strategies (e.g., withdrawal from partners) (Gillath & Shaver, 2007). These offenders may therefore have focussed their attachment needs instead on the child whom they would soon sexually abuse. In line with current thinking then (e.g., Smallbone, 2005, 2006; Smallbone et al., 2008; Wortley & Smallbone, 2006), under conditions of cognitive and emotional distress, an insecurely attached individual may, due to less functional separation of the attachment and sexual behaviour systems, make use of sexual strategies to fulfil attachment needs (Smallbone & Dadds, 1998), which is most likely activated in the context of a close, intimate, non-sexual relationship with a child (Smallbone et al., 2008). This, coupled with limited capacities for self-restraint, may result in sexual abuse of a child for the very first time (Smallbone et al., 2008).

Whilst those offenders not in a relationship were significantly younger at onset and their onset sexual offence occurred in much more diverse circumstances, the nature of these victim-offender relationships (e.g., existing caretaking roles) for the most part did not differ significantly from those who were in a relationship at onset. As such, these findings may not reflect differences in motivations per se (e.g., higher levels of sexual deviancy) but simply reflect a different stage (and therefore role) in these offenders' lives, and suggests the possibility that similar factors instigated these incidents also.

Combined, the findings lend some support to Smallbone et al.'s (2008) propositions that men who have experienced insecure parent-child attachment relationships may be rendered developmentally vulnerable to engaging is disorganised attachment behaviour in the period preceding sexual offence onset. The findings also suggest that these attachment problems tend to arise in the context of other life stressors, and therefore be a product of both chronic and acute disorganised attachment states. Given the biological, developmental and situational links between the human (attachment, caregiving, and sex) behavioural systems, there is an increased risk in sexual motivations and behaviour being activated in response to other nurturing or attachment needs during these times. This risk is increased when one's key mechanisms for self-restraint are impaired, which may be as a result of early insecure attachment relationships.

CHAPTER 5: GENERAL DISCUSSION

With a focus on the person-situation model of human behaviour (Mischel, 1968) this research drew upon recent theoretical models that integrate psychological (e.g., developmental theories) and criminological (e.g., control theory, social ecology, situational crime prevention models) perspectives to examine developmental and situational factors associated with the origins of child sexual abuse. Three key research questions were addressed:

(1) Do child-sex offenders generally report attachment problems and are these associated with lower capacities for, and commitment to, self-restraint?

(2) What are the situational dimensions of the onset sexual abuse incident?

(3) How might individual attachment-related vulnerabilities interact with immediate situational factors to trigger sexually abusive behaviour?

In this chapter a general discussion of the present findings is provided. It begins with a synthesis of the research findings. Then consideration is given to theory advancement, applied implications, limitations, and directions for future research.

5.1 Summary of Findings

This section organises and synthesises the present findings in terms of the basic elements of initial sexual abuse incidents perpetrated by offenders: who is involved, when and where it occurs, what happens and how it happens. The theoretical question of why this first abuse incident occurs is considered within each of these elements.

5.1.1 Who is involved?

The current results showed that child sexual abuse was initially perpetrated by someone well-known to the victim, often for long periods before the first abuse incident occurred. More often than not, the offender had a caretaking role in the child's life. Stranger-onset was rarely reported. These results add to current evidence that sexually

abusive behaviour tends to emerge from trusting relationships, where the victim has an established, emotional tie to the offender (Elliot et al., 1995, Kaufman et al., 1998, Leclerc, Wortley, & Smallbone, 2010; Paine & Hansen, 2002; Smallbone & Wortley, 2000). This tends to be typical of both adolescent- and adult-onset sexual abuse incidents (Kaufman, Hilliker, & Daleiden, 1996). On the one hand this may suggest that offenders proactively engage in a complex grooming process prior to first offending that requires conscious manipulation of individuals and relationships over an extended period of time (Leclerc et al., 2010; Paine & Hansen, 2002). On the other it may suggest that many offenders' initial sexual thoughts and motivations stem from their existing relationships with children, which also tend to involve elements of attachment and caregiving. Thus, whilst these relationships may provide opportunities for manipulation by some (highly motivated) offenders, the emotional connection between the (potential) offender and victim and related behaviours (e.g., attachment and caregiving) may also provide the impetus to offend for the first time.

At onset offenders were likely to be, or to have previously been, involved in adult intimate relationships, primarily with women. Consistent with previous research (e.g., Jenny, Roesler & Poyer, 1994; see also Holmes & Slap, 1998) offenders in the current study identified primarily as adult heterosexual. However, some reported primary or additional sexual preferences for female and / or male children, and less frequently for adult males. While deviant sexual thoughts about children (including the onset victim) were present in the lead up to sexual abuse onset, generally these rates were low (29% - 38%). Combined, these findings indicate that some child sex offenders may not necessarily possess strong, stable sexual interests in children at the point of their very first sexual offence. Whilst sexual deviance tends to be a strong predictor of sexual recidivism (e.g., Abel, Mittleman, Becker, Rathner, & Rouleau, 1988; Barbaree & Marshall, 1988; Hanson & Bussiere, 1998; Quinsey, Rice & Harris, 1995), the

present research suggests that sexually deviant ideation may be less relevant to understanding why sexual abuse first occurs. Instead, perhaps for many offenders, deviant sexual interests emerge from, or become entrenched by, the onset sexual abuse experience. Sexual deviance tends to be most prevalent amongst stranger abusers (Barbaree & Marshall, 1988; Quinsey, 1986). As already noted, in this study, stranger-onset offences were rare (7%). This may also help to partly explain the lower levels of sexual deviance found here. Another explanation may be that not all men who sexually abuse children are primarily driven by sexual motivations. It may be that, for some offenders, other motivations (e.g., attachment needs; emotional congruence with children) may also be relevant in the onset of sexually abusive behaviour.

Despite many being involved in adult intimate relationships, in this study, offenders generally reported insecure adult attachments. Insecure adult attachment tends to be commonly reported amongst child sex offenders (Marsa et al., 2004; Sawle & Kear-Colwell, 2001; Stirpe et al., 2006). For some, attachment problems were stable, originating from problematic early parent-child attachment experiences, particularly with their fathers. Smallbone and Dadds (2000) similarly found paternal attachment to be predictive of adult attachment style. Early attachment experiences are theorised to play a powerful role in the ability to understand and effectively respond to oneself and to others, for establishing and maintaining effective social relationships and the capacity for self-regulation over the life-course (Rich, 2007). The present findings add support to current ideas that chronic attachment problems emerging from early childhood may negatively impact on interpersonal functioning, making the establishment and maintenance of peer relationships more difficult. This may lead to intimacy deficits and emotional loneliness, so that sexually abusive behaviour may result from offenders' redirecting attachment and / or intimacy needs to children who are perceived to be less

threatening and rejecting (e.g., Bumby & Hansen, 1997; Marshall, 1993; Ward et al., 1995).

For those with no discernable early attachment problems, the present findings suggest that offenders' life circumstances or attachment relationships subsequent to childhood may have altered early secure attachment representations resulting in them becoming insecurely attached in adulthood. This suggests that, for these offenders, early secure attachment relationships may not necessarily have served as a protective factor when confronted with subsequent adverse life events and circumstances. It appears that secure attachment style may be particularly vulnerable to change in the face of negative life circumstances that are incongruent with, and serve to disconfirm, earlier established expectations and conceptions about relationships. While many researchers have pointed to the stability of early attachment representations throughout the life course (see Waters, Weinfield, & Hamilton, 2000), the current findings fit with more recent ideas (e.g., Noftle & Gillath, 2009) that attachment can be dynamic. In the current study attachment relationships subsequent to childhood appear to have altered some offenders' attachment style, resulting in three-quarters being classified as insecurely attached in adulthood. Temporally, adult attachment insecurity plays a more proximal role than childhood attachment insecurity and thus may have a more direct influence on offenders' behaviour at this stage in their life. Thus, attachment problems emerging from childhood and into adulthood may increase individual propensities (or vulnerabilities) towards engaging in sexually abusive behaviour.

A large proportion of offenders (39%) were classified as fearful-avoidant. Similar patterns have been found in previous studies on child sex offenders (e.g., Lyn & Burton, 2004; Marsa et al., 2004; Stirpe et al., 2006; Ward, Hudson, & Marshall, 1996). Fearful-avoidant attached individuals tend to be especially fearful and avoidant of adult intimate relationships, to experience loneliness, and to be socially inept, which may

draw them to children who may be perceived as much less threatening, more trustworthy and accepting than adults (Hudson & Ward, 1997; Ward, Hudson, & Marshall, 1996). Fearful-avoidant attached individuals in particular may lack organised attachment strategies in response to stress (Baker, Beech, & Tyson, 2006; Boulter, 2008; Simpson & Rholes, 2002). This may in turn increase their vulnerability towards utilising sexual strategies as a means to self-regulate (Burk & Burkhart, 2003). This makes them an important group to understand in the onset of child sexual abuse.

Further to this, many of the present offenders also appear to have generalised problems in behavioural self-restraint. In this research less secure maternal attachment was associated with lower self-control, as was adult attachment insecurity. More broadly, criminal versatility was also found in the backgrounds of many of these offenders, with more than half of the sample convicted of nonviolent nonsexual offences. Criminal versatility prior to onset of sexually abusive behaviour have been found in other studies of child sex offenders (e.g., Smallbone, Wheaton, & Hourigan, 2003; Smallbone & Wortley, 2004a) Overall, these findings indirectly support current ideas that insecure early attachment experiences (particularly here with mothers) may lead to chronic individual vulnerabilities in the capacity for, and commitment to, self-restraint. According to Smallbone and Cale (in press) these early attachment problems may serve to compromise the development of individual capacities for empathy, emotional regulation and moral reasoning. This may then impact on the formation of (therefore commitment to) other (pro) social attachments, leading to problems in self-restraint. Thus, early childhood attachments may represent a general factor in the development of anti-social and criminal behaviour, and by extension sexually abusive behaviour, as a result of generalised problems with self-restraint. Other studies have found early attachment problems to predict general crime and delinquency (e.g., Mak, 1994). In this sense, while some sexual offenders will be specialised at sexual abuse

onset (i.e., they have no prior offending history), sexual offending might more commonly represent an extension of a well-established repertoire of anti-social proclivities best understood in the context of weakened social bonds and self-restraint. Soothill and colleagues (2000) have similarly suggested that many offenders may be generalists, engaging in sexual offending, as a larger pattern of general criminality. Overall, these findings indicate that individual vulnerabilities associated with general criminality may be linked also to the onset of child sexual abuse.

To summarise, the current findings indicate that, prior to the onset sexual offence, offenders are likely to be well-known and trusted by the victim, have had adult heterosexual relationships and may not all possess well-established deviant sexual interests towards children. They are also likely to be insecurely attached in adulthood and have generalised problems in self-restraint. Applying Cornish and Clarke's (2003) proposed offender typology, the findings suggest that these men may be best classified as either a "mundane" or "provoked" offender at sexual abuse onset. The mundane offender typically has generalised self-restraint problems, characterised by intermittent criminal involvement, opportunistic, "spur of the moment" offending often with little planning and forethought. These men are particularly vulnerable to contextual factors and events that precipitate behaviour, as a function of these underlying vulnerabilities (Cornish & Clarke, 2003). These offenders have been described elsewhere as "opportunists" (Wortley & Smallbone, 2006). For the provoked (or "situational", Wortley & Smallbone, 2006) offender sexual abuse is likely to be the result of a temporary breakdown in self-restraint, precipitated by situational stressors or frustrations (Cornish & Clarke, 2003). It appears from the present findings that the "mundane" offender may be most typical at sexual abuse onset.

From a victim perspective, present findings indicate that female children were three times more likely than male children to be the initial victim of sexual abuse, with

this risk increasing ten-fold within familial contexts. These are typical patterns found in child sexual abuse research (e.g., Edgarah & Ormstad, 2000; Goldman & Padayachi, 1997; Leclerc et al., 2010; Putnam, 2003). Girls were at most risk of being offended against by their stepfather or father. For boys, the offender was likely to be someone known to, but outside, the family. Other studies (e.g., Gold et al., 1998; Holmes & Slap, 1998; Hunter, 1991; Kendall-Tackett & Simon, 1992) have found similar gender-based patterns. Nevertheless, within the findings of this research, both girls and boys appear to be initially at risk of abuse within the context of existing relationships with (potential) offenders, rather than strangers. Similar to Birkbeck & LaFree's (1993) study the current research also suggests that physically attractive children, who are less well guarded and highly exposed to (potential) offenders, may be particularly vulnerable to being sexually abused.

5.1.2 When and where does it occur?

From a developmental perspective, in this study some offenders reported that they commenced offending in adolescence (9%). For others, sexual offending commenced after age sixty (5%). Typically however offenders reported an offence-onset age in the early to late 30's. These same patterns have emerged in other sexual offender studies (Kaufman et al., 1998; Smallbone & Wortley, 2004a). The current findings suggest that sexually abusive behaviour (and possibly thoughts) generally first emerge in middle adulthood; entrenched deviant sexual interests towards children may therefore be the exception, rather than the rule, for a number of these men, at onset.

Once again consistent with current literature (e.g., Andrews, Gould, & Corry, 2002; Goldman & Padayachi, 1997; Leclerc et al., 2010), in this study the average age of the onset-victim was 10 years old. The proportion of victims increased with age with most offences first occurring against adolescent children (12 - 16 years old). This research suggests that although children of all ages are sexually abused, in terms of the

initial abuse incident, early adolescence may be an especially vulnerable time for victimisation. Contrary to common public conceptions of sexual offenders, the sexual abuse of prepubescent children appears to be much less typical, at least initially.

From a situational perspective, the current findings suggest that transitions to a caretaking role (e.g., as a parent, stepparent, coach or teacher) may increase the risk of offending as a function of opportunity. It has already been noted that many of these men (63%) had a parental or quasi-parental role in the victim's life prior to sexual abuse onset. Perhaps these role changes bring many men, some possibly for the first time, into frequent contact with children who are, at the same time, entering the risk period for victimisation. For others who are not in a caretaking role, contact with people who have children increases their exposure to potential victims (Hanson, 2002). The current findings thus indicate that some offenders may utilise opportunities that arise in the context of current relationships to begin offending. For some of these men this may also increase their exposure to situational cues (e.g., bathing, sleeping, nurturing) that could prompt sexually inappropriate thoughts, feelings, and behaviour for the first time (Wortley, 2008). This may be particularly so for men in blended families (e.g., stepfather) where early attachment bonds required to inhibit such behaviour (Alexander, 1992) are less likely to exist.

The present findings also indicate that child sexual abuse incidents tended to occur at times when life stressors were impacting on the offender. In the lead up to the onset sexual abuse incident offenders most commonly reported relationship, financial and sexual problems. Other studies have demonstrated the role of stressful life factors in precipitating sexually abusive behaviour more generally (e.g., Pithers, Beal, Armstrong & Petty, 1989). The present research indicates the stressful life events may be important also for explaining the onset of sexually abusive behaviour more specifically. That is,

life stressors may play a role in precipitating sexually abusive thoughts and behaviour for the first time.

In response to stressful situations, this study showed that offenders tended to use avoidant strategies, for example isolating themselves, consuming drugs and alcohol or "doing nothing" to cope. For those offenders in a relationship, state increases in adult attachment avoidance were also reported, with offenders also more likely to turn to their children (10%) than to their partner (4%) or another adult family member (3%) for comfort and support. One explanation for these findings is that, in times of stress, and when ordinary avenues for support are (or appear to be) unavailable, some offenders may redirect their needs towards children, thereby creating conditions conducive to sexual offending. These findings also suggest that early attachment vulnerabilities may not always manifest in stable adult attachment problems, but instead emerge in the context of relationship and other life stressors. Thus, acute or transient attachment problems may precipitate sexual abuse behaviour.

This study found that the most common location for the first sexual abuse incident was the domestic setting (i.e., 78%), predominately within the victim's or offender's home, and in private areas, most often within a bedroom. Sexual abuse within institutional and public settings was much less commonly reported. These patterns have been previously identified in the literature (e.g., Kaufman et al., 1995; Wortley & Smallbone, 2006; Snyder, 2000). Consistent with Snyder's (2000) findings, most offences occurred between the hours of 3pm and 9pm. This represents the time when victims are most likely to be interacting with (potential) offenders in the context of everyday routine activities. The current research indicates this to be the case with many offenders reporting that the initial abuse incidents tended to coincide with domestic routine activities (e.g., playing, watching TV, putting child to bed, bathing the child). Other studies have also indicated that child sexual offending tends to occur

within the context of everyday routine activities (e.g., Wortley & Smallbone, 2006; Young, 1997). Similar also to Snyder (2000), in this study younger children (< 11 years) were particularly at risk of victimisation during the earlier hours of the day (6am – 3pm), and older children (12-16 years) during the late evening (9pm onwards), mapping typical age-related routine activities where offenders and victims are most likely to converge together in space and time.

Overall, these findings indicate that children are at most risk of sexual abuse by known individuals, in known surroundings and within the context of ordinary interactions, particularly where the offender is likely to be in a caretaking role (Prentky & Knight, 1991; Sjostedt, Langstrom, Sturidsson, & Grann, 2004; Smallbone & Wortley, 2000). This finding contrasts with common 'stranger-danger' concepts which focus on extraordinary circumstances perpetrated by unknown individuals, often in unknown surroundings. Sexually abusive behaviour may also be more likely when such individuals are experiencing relationship or other life stressors and are withdrawing from their usual sources of support.

5.1.3 What happens?

In this study offenders reported feeling lonely and depressed immediately prior to the onset sexual abuse incident. Sexual feelings were also present, but were relatively low (27%). In approximately one-third of incidents offenders reported being intoxicated. Other studies have reported that offenders identify negative emotion states as triggers for sexually abusive behaviour (Pithers et al., 1989; McKibben, Proulx, & Lusignan, 1994). Alcohol intoxication and victim vulnerability (e.g. victim upset and needing comfort) have also been found to increase the likelihood of offenders initiating sexual contact (Ward, Louden, Hudson & Marshall, 1996). It appears, from the current research, that negative situational factors (e.g., relationship, financial and sexual stressors) and transitory emotional states (e.g., loneliness, depression, stress,

intoxication) may serve as triggers for some men, inducing sexual deviant motivations and behaviour for the first time.

Relationship problems were the most commonly reported stressors. In times of marital instability recourse to sexual contact with a child has been demonstrated (Williams & Finkelhor, 1990). In Hartley's (2001) study of incest offenders participants described feelings of unhappiness, rejection, and lack of intimacy with their partner immediately preceding their offence, and that they used sexual contact with a child as a way to cope with inadequate affection, to feel acceptance and to ameliorate feelings of rejection. Similar to findings of this research, current life stress, especially marital problems were viewed as having a direct influence in the onset of sexually abusive behaviour (Hartley, 2001).

It may be that these transitory situational factors and emotional states interact with underlying individual vulnerabilities to produce sexually abusive behaviour for the first time. In this study, childhood attachment was moderately associated with state adult attachment insecurity. These findings provide indirect support for ideas that developmental experiences may impact on the formation and functioning of adult attachment, caregiving and sexual behavioural systems, so that offenders may be more likely to experience disorganised attachment-related behaviour in response to situational stress, resulting in the sexualised expression of attachment or other non-sexual needs (Baker & Beech, 2004; Smallbone & Dadds, 1998, 2000). This propensity (and therefore risk) is increased in men who have lowered levels of self-restraint, which in turn, is more likely when his developmental history has been characterised by insecure attachments to parents (Smallbone et al., 2008).

Whilst the risk of situational stressors precipitating sexually abusive behaviour is increased when there exists underlying development-related vulnerabilities, the present findings also suggest that this does not preclude men who, by all accounts, are normally

highly restrained, and who may be overcome by stressful circumstances (e.g., relationship, sexual and financial difficulties) and / or powerful situational precipitators (e.g., seeing child naked, comforting child or being comforted, depression or loneliness, intoxication) that together result in a temporary breakdown in self-restraint thereby inducing sexually abusive behaviour. Most (76%-81%) offenders reported "acting on the spur of the moment" or within minutes of experiencing sexual thoughts. For those offenders who reported having sexual thoughts, the most common prompts were the physical attractiveness of the victim, that the child seemed to care about the offender or seeing the child naked or semi-naked. One way to explain this is in terms of the situational precipitators model of offending (Wortley, 2008). From this perspective, some of these men may have acted on "spontaneous impulses" precipitated by interactions with the victim and the immediate behavioural setting, rather than as part of an overall conscious and deliberate plan to sexually abuse. For others it may indicate that some offenders lack forethought and deeply entrenched motivations to sexually offend, but 'seized the opportunity' because the immediate context was perceived to comprise low risk and high reward (Cornish & Clark, 1986).

Further, in this study a large percentage (i.e., 48%) of the sample reported "doing nothing" to gain the victim's compliance. Rarely were overt (e.g., force, threatened harm) means used. By many accounts these strategies reflected ordinarily condoned parent-child interactions (e.g., giving love and attention; giving gifts). These strategies may represent subtle grooming techniques under the guise of acceptable conduct. For example, strategies such as giving gifts, love and attention have been suggested as a means to create a façade so as to avoid suspicion and evade parental supervision (Kaufman et al., 1998). Many studies suggest that the grooming process used by sexual offenders is graduated, beginning with low level, subtle non-sexual touch and moving to more overt sexual exploration and behaviour, in an effort to

desensitise the victim and test the boundaries (Berliner & Conte, 1990; Kaufman et al., 1998; Paine & Hansen, 2002). Perhaps being the first sexual abuse incident these more subtle strategies of persuasion were employed to gauge to victim's level of compliance. Moreover, the strategies used by offenders appeared to exploit the existing emotional relationship with the child. This may negate the need for more overt means to engage the child in sexual contact for the first time.

Whilst previous studies of victims and offenders have indicated the frequent use of threats and coercion (threatening / using physical harm, withdrawing benefits) to silence victims (Berliner & Conte, 1990; Kaufman et al., 1998), in this study, overt strategies to inhibit victim disclosure were rarely used, with many offenders typically "doing nothing". Again, it may be that more overt strategies for silencing the victim are employed by offenders over the course of offending, rather than in the first instance. It may be that sexual abusive behaviour becomes progressively intrusive over an extended period of time, so that efforts to maintain victim compliance and silence requires increasingly more overt strategies and effort on the offender's part. It could also be likely that, because of the existing relationship with the victim, offenders may have high levels of confidence and trust in the relationship with the child so that they may not feel it important to actively silence the victim in the first instance. Alternatively, some of these relationships may have been perceived by offenders to represent normal courtships, so that silencing the victim may not have even been contemplated initially.

<u>5.1.4 How does it happen?</u>

On the whole, the findings of the current research suggest that the first sexual abuse incident was quite easily accomplished. Generally, offenders' self-reported modus operandi prior to, during and after the initial sexual contact, suggests little forethought, planning and effort required on the offenders' part prior to the onset sexual offence. Only 3% reported lengthy and explicit pre-planning (i.e., more than 1 month

prior to sexual abuse onset), with most (84% - 87%) offenders reporting that the decision to offend and planning occurred on the day they first had sexual contact with the child. Many (47%-58% of the sample) reported acting on the “spur of the moment”. As already noted, sexual thoughts were present for some offenders in the month leading up to sexual offence onset. The proportion of offenders reporting sexual thoughts, however, increased dramatically on the day of the first sexual abuse incident, and were focussed predominately on the onset-victim. This indicates that, in some cases, offenders’ decisions to offend were likely triggered by immediate sexual thoughts specific to the victim and the situation, rather than by more generalised sexual thoughts and motivations about children. Whilst some studies have suggested that offenders are highly motivated and therefore actively manipulate situations in order to engage in child sexual abuse (see Robertiello & Terry, 2007), the current findings indicate that explicit thoughts and planning may be more relevant to sexual reoffending than to onset. Although a minority of offenders appeared to consciously set up or manipulate situations in order to initially offend, others did not. It may be possible that some offenders engaged in ‘implicit planning’; subconsciously manipulating situations in order to increase the chances of contact with the child but not acknowledging doing so (Ward, Louden, Hudson, & Marshall, 1996).

The fact that so many offenders reported a long-standing non-sexual relationship with the victim prior to first engaging in sexual abuse, suggests that these relationships may be perceived by some offenders as very similar to normal courtship relationships whereby strong emotional attachment slowly develops, and from which sexual behaviour may emerge. Yet, within the context of this close, emotional attachment these offenders would have presumably had many opportunities to sexually offend and may have even fantasised about this happening, but did not. This suggests again that the elements of the situation itself may have directly influenced offenders’ behaviour. As

aforementioned, it may be that this particular situation was perceived as the most conducive to engaging in sexual abuse, involving the least amount of risk and effort and high reward (Cornish & Clarke, 1986) so that offenders seized the opportunity to sexually offend for the first time. On the other hand, some offenders behaviour may have been prompted by visual cues (e.g., physical attractiveness of child; seeing child naked or semi-naked) and possibly by attachment (e.g., offender upset and needing comfort) or nurturing cues (e.g., child vulnerable, requiring comfort) present within the immediate behavioural setting. This may also indicate that for many offenders, in the first instance at least, their primary goal may not necessarily have been sexual.

Whilst this sexual behaviour may be viewed by some offenders in the context of a courtship relationship, the fundamental difference in these abuse incidents is the balance of power between the individuals involved; the absence of equality and consent. The current findings indicate that little effort was required on the offenders' behalf to engage the child in a sexual relationship: most offenders already knew (and typically lived with) their victims; the offender was often afforded easy, frequent unsupervised access to the victim; the offences took little time and occurred even when others were nearby. Further, the current results indicate that, for the most part, these offenders assumed that the child will most likely not disclose the abuse, with 80% of offenders "doing nothing" to avoid victim disclosure. It appears then that the victim-offender relationship itself may be an effective 'enabler' of sexual abuse and 'silencer' of victims.

Specifically, the current findings highlight two characteristics of the victim-offender relationship that enable sexual abuse to occur for the first time and that may maintain victim silence. First, the nature of the existing relationship and emotional tie between the (potential) offender and victim may facilitate victim compliance during and after sexual contact. For example, in most instances offenders were in a position of

power and trust. It is likely therefore that the victims were much more easily persuaded both to comply with the sexual contact and to keep it a secret. As Kaufman et al. (1998) have similarly suggested these existing relationships foster compliance and mediate against victim disclosure. Indeed, children abused by close family members are the victims least likely to disclose (see Paine & Hansen, 2002). Second, because of the nature of this victim-offender relationship, others also place trust in the (potential) offender which in turn provides more opportunity to offend by affording frequent, unsupervised access to the child. For instance, in almost three-quarters of incidents, the present offenders were in a primary caretaking role of the child (regardless of whether they were living with the child or not) at the time of the onset sexual offence. Thus, even though many of these initial incidents took place whilst others were in close proximity, only 10% were actually witnessed.

The fact that these events occurred even when others were nearby suggests that offenders were largely unconcerned about being caught. Because of the nature of the existing relationship between the victim and offender (and indeed others close to the victim/offender), it may be that many offenders felt they could easily justify or conceal their behaviour if confronted. On the other hand, most initial sexual abuse incidents occurred for a short duration (less than 5 minutes). Leclerc, Smallbone and Wortley (2011) have previously found that guardianship is particularly important for reducing the duration and severity of sexual abuse incidents. This may offer some explanation for the short duration of abuse incidents found in the present research. Thus, the current findings serve to reinforce the critical role of guardianship in preventing sexual abuse, and specifically, its occurrence in the first place.

5.2 Theory Advancement

The present findings underscore the importance of an integrated theoretical approach to explaining sexual offending behaviour that emphasises the role of

ecological and situational factors, as well as of developmental factors, in the onset of child sexual offending. Second to this, it indicates that current theory and research needs to expand beyond existing sexual deviance models to include other non-sexually deviant motivations that may increase the risk of sexual offending. The consensus seems to be that both sexual deviance and general antisocial factors are basic dimensions of sexual offending (e.g., Hanson & Bussiere, 1998; Ward et al., 1995, 1996). What the present findings indicate is that in the context of the very first offence, some sexually abusive behaviour may be as much (if not more so) a product of low behavioural self-restraint, situational precipitators and opportunity, than it is a specific disorder of sexual dysfunction (i.e., stable deviant preferences) (Smallbone, 2006). Hanson & Bussiere's (1998) statement that "all sexual offending is, by definition, socially deviant, but not all sexual offenders have deviant sexual interests or preferences" seems particularly relevant to the onset of sexual offending (p.349). Thus, theory development may be best placed to situate the onset of sexually abusive behaviour within the context of factors also associated with general anti-social and criminal behaviour.

From a developmental perspective this study provides at least tentative evidence that directly and indirectly implicates offenders' attachment problems in the onset of their sexual abuse behaviour. What this research also suggests is that attachment problems may be one condition for the development of sexually abusive behaviour, but it is certainly not a sufficient condition. One of the important caveats of this area continues to be that many individuals emerge from such developmental experiences and do not go on to sexually abuse and many individuals who sexually abuse have no discernable early developmental vulnerabilities. This illustrates the complexity and variation of human nature and propensities for sexual offending behaviour such that insecure attachment and related difficulties are just "one element in a complex pathway that, for some, leads to sexual aggression" (Rich, 2007, p.214). As Rich (2006)

contends, a model of sexual behaviour needs to account for why some men who arrive at the point of onset, and who share virtually identical experiences, go on to sexually abuse whilst others do not, and in terms of attachment, how this uniquely contributes to sexually abusive behaviour over criminality or anti-social behaviour in general. Smallbone et al.'s (2008) theoretical links between the attachment, caregiving and sexual behavioural systems may be one step forward in understanding these more specific relationships and therefore, warrants further attention.

These present findings also reinforce contemporary ideas that attachment can be dynamic and context-specific. It seems that early attachment relationships, to some degree, shape interpersonal behaviour and functioning, and attachment style remains relatively enduring under stable developmental conditions, but it is not impervious to change. Attachment style (and behaviour) may be modified in light of experience and interpersonal circumstance subsequent to childhood. The findings also indicate that early secure attachment experience may not always act as a protective barrier to subsequent adversity, and in fact is more vulnerable to change than insecure attachment. This may be particularly so when changes to existing attachment relationships occur or during negative and/or disruptive life events (Cozzarelli, Karafa, Collins, & Tagler, 2003). Indeed, Waters and colleagues (2000) provide evidence that life changing events negatively impact the stability of attachments. In this way, attachment may be conceived also as a dynamic state that evolves over the course of human development, and in response to certain situations or experiences. Along the lines proposed by Smallbone (2005), theory development should perhaps consider attachment as a predisposing and precipitating factor in the onset of child sexual abuse.

With regard to models of situational crime prevention, the findings indicate that the onset of child sexual abuse is influenced by situational factors commonly found in the immediate pre-offence and offence settings and that offender decision making is

contingent upon their immediate perceptions of risk and effort to offend as well as precipitating conditions which serve to directly induce sexually abusive behaviour. Situational approaches should therefore be fully integrated with offender-centred approaches, to explain sexual offending, in the longstanding tradition of the person-situation model of human behaviour (Mischel, 1968).

5.3 Applied Implications

This interactional approach may contribute in new ways to prevention efforts. In the present case, the findings suggest that developmental prevention and early intervention models, as well as situational prevention models that target both the distal and proximal risk factors may be worth considering. In line with Clarke and Homel's (1997) propositions the findings suggest that prevention initiatives should aim to: (1) increase offender's effort, (2) increase perceived and actual risks associated with the sexual abuse incidents, (3) reduce anticipated rewards, and (4) remove excuses that make sexual offending acceptable. Using the public health model of prevention, these ideas are considered in terms of primary, secondary and tertiary prevention initiatives.

5.3.1 Primary and secondary prevention

To effectively target, and ultimately reduce, the incidence of child sexual abuse interventions need to be in place *before* these incidents occur. This is the purpose of primary prevention, and in a sense, secondary prevention initiatives. Primary prevention is a universally-based initiative aimed at preventing the occurrence of sexually abusive behaviour before it actually emerges and is targeted at the community as a whole. Secondary prevention targets at-risk groups (e.g., potential offenders and at-risk families) in an effort to deter offending.

Attachment-focussed early intervention programs

The findings provide some direction for early developmental prevention initiatives. Early intervention may be useful to reduce abuse-related vulnerabilities both

within the community as a whole (i.e., primary prevention) but particularly for at-risk groups (i.e., secondary prevention) through early intervention that promotes positive attachment to family, community and social institutions and that, in turn, promote responsible social and sexual behaviour and accountability. Evidence suggests that the developmental risk factors found in individuals who eventually sexually abuse, tend to be the same as those associated with heightened risk of victimisation (Alexander, 1992; Marshall & Marshall, 2000). That is, poor attachment relationships are likely to impede on parents' capacity to form secure attachment with their own child. For mothers this may mean children become more vulnerable to child sexual abuse through a failure to recognise at-risk situations and relationships, or intervene appropriately when abuse is discovered. For fathers this may impede internal controls that would otherwise inhibit such behaviour (Alexander, 1992). This, combined with an impaired caregiving behavioural system, which ordinarily serves to nurture and protect children, may result in these motivations being overcome by other competing (i.e., sexual) motivations. Thus, attachment-focussed early intervention programs that aim to strengthen attachment relationships and bonding within the family are likely to forestall abuse-related vulnerabilities and enhance resilience in children and their non-offending family members.

Research on attachment-focussed prevention with disadvantaged young mothers has shown considerable promise for reducing both childhood maltreatment of, and later involvement in delinquency by, the children of these mothers (Olds, 2002). Furthermore, structured attachment interventions that directly target and enhance the sensitivity and quality of parent-child interactions have demonstrated effectiveness in influencing parental behaviour towards the child (Bakersman-Kranenberg, van IJzendoorn, & Juffer, 2003) as well as altering levels of attachment security in children from maltreated families (Tarabulsy et al., 2008). In line with current findings, the

research suggests that, without intervention, insecure attachment remains relatively stable, and indicates that early attachment-focussed interventions may be effective in altering early adverse developmental trajectories (Cichetti, Rogosch, & Toth, 2006). Of particular importance to the current findings, these early prevention programs have been most effective in reducing attachment disorganisation (Tarabulsy et al., 2008).

The present findings also suggest that these early intervention programs may be best directed at father-son attachment relationships. In line with Smallbone and Cale's (in press) life-course developmental perspective, the current findings indicate that these programs may need to be reintroduced at critical transitional periods in an individual's life, for example during early childhood, puberty and at first fatherhood (Smallbone & Dadds, 2000). The findings suggest that strengthening attachment or remediation of attachment problems, with new fathers may be important for reducing developmental vulnerabilities associated with sexual offending. Such interventions may also be beneficial for blended families, where vulnerabilities may emerge between men and their stepchildren (particularly stepdaughters) in the context of a close emotional relationship with the child, and in the absence of protective early attachment bonds (Smallbone et al., 2008). This may apply also to men outside the family, such as teachers, sport coaches or scout leaders. The present findings that adult attachment problems were more prevalent than childhood attachment problems suggest that attention may also be given to later relationship problems for adolescent and adult males.

Community education initiatives

From an ecological perspective, these findings point to the importance of implementing universal community education programs that contain information regarding the developmental, situational and interpersonal risks associated with child sexual abuse. The implementation of child-focussed, school-based protective

behaviours programs is now widespread. These conceptual and skills-based programs focus particularly on recognising potentially abusive situations, victim resistance strategies and abuse disclosure (Kaufman, Mosher, Carter, & Estes, 2006). Present findings indicate that such programs may be best implemented early (i.e., preschool), with the average age of sexual abuse onset in this study being 10 years old. Whilst there is some concern about placing the burden of protection on children, who are physically and emotionally vulnerable in such circumstances, research on the effectiveness of these programs indicates the children of all ages, and particularly younger children, acquire and retain the concepts, can implement strategies in simulated conditions (MacMillan, MacMillan, Offord, Griffith, & MacMillan, 1994), and are not significantly distressed by the content of these programs (Finkelhor, 2009). Less is known about their effectiveness in actually reducing victimisation or enhancing victim resistance and disclosure. One study has indicated that these programs do in fact reduce the occurrence of sexual abuse (Gibson & Leitenberg, 2000). Other studies, however, indicate that teaching children more overt forms of victim resistance may place children at further risk (Finkelhor, Asigian, & Dziuba-Leatherman, 1995a, 1995b; Leclerc et al., 2010). In this regard, placing emphasis on less active (i.e., verbal) forms of victim resistance and on building resilience in children (e.g., building assertiveness, self awareness, and self-esteem), so that they are less vulnerable in the first place, have been recommended (Smallbone & Wortley, 2000).

These findings also indicate that these education initiatives should be implemented at all levels within a child’s social ecology (e.g., individual [potential victims and offenders], family, schools and neighbourhoods), and particularly in families where this risk seems to be the greatest. Parents and guardians may benefit from clear information about the risks to children in their own homes, particularly by casual visitors, new boyfriends, or others who may become involved in routine intimate

care-taking duties with children without the protective attachment bond that might otherwise prevent the sexualisation of that relationship. This education should focus particularly on the interpersonal contexts in which boys and girls are most likely to be abused. Whilst boys and girls are victims of both familial and non-familial sexual abuse, parents and other guardians need to be especially aware of the heightened risk within the family for girls and outside the family for boys. Education regarding potential settings, peak risk times and interactions are also important. Parents can be educated on how to increase their child's resistance by developing an honest and supportive relationship with their child that encourages open communication, undermines secrecy and promotes disclosure of abuse should it occur. Advice for parents on introducing the concepts around normal sexual development and risky sexual behaviour may also be useful to reinforce concepts and skills learnt within schools. These initiatives also shift the greater burden of responsibility from children to other potential guardians who may be better placed to intervene and protect.

These parent education forums may also be important in increasing internal inhibitions in (potential) offenders, should they be in the audience. These open forums and discussion about the inappropriateness of such behaviour, the potential risks and effects on children and families, and increased possibility of victim disclosure may increase their perceptions of risk and internal inhibitory controls and, in some cases, deter offenders, particularly those with lower propensities to offend (Krivacska, 1989).

At an institutional level education regarding "target hardening" measures may be useful. For example, in schools or other child-focused institutions (scouts, sports) educating managers and teachers about the risks of "private" encounters between adults and children may be beneficial and may direct policies to minimise the risk of children and adults being placed in such vulnerable positions.

Public awareness campaigns

Universal public awareness programs may be important in conveying the social and cultural norms and therefore reach out to potential victims and offenders, as well as society as a whole in an effort to promote public accountability and enhance community safety. In terms of situational crime prevention, universal public awareness campaigns and advertising may effectively deter potential offenders by increasing perceptions of risk around detection. The current findings indicate that prior to onset many potential child-sex offenders may not be necessarily highly-driven to sexually offend and may therefore be effectively deterred by such campaigns *before* they abuse. For those that do offend, the current findings suggest that many invest little time and effort in avoiding detection or victim disclosure. This indicates that, possibly by nature of the victim-offender relationship, most offenders assume the risk of victim disclosure to be minimal. In terms of Wortley and Smallbone's (2006) proposed situational crime prevention strategies these public awareness campaigns, like community education programs, may serve to increase offender's perceptions of risk around detection and victim disclosure thereby inhibiting sexually abusive behaviour. It may also increase the effort required to maintain victim silence thereby inhibiting behaviour. Early disclosures may also result from a better understanding of offenders' modus operandi for silencing victims. Finally, it may reduce permissibility by reinforcing social messages about the inappropriateness and consequences of engaging in sexually abusive behaviour acting as an external inhibitor (Krivacska, 1989; Wortley & Smallbone, 2006). As a secondary measure, Finkelhor (2009) suggests that suggest campaigns should reach out to potential offenders urging them to seek help, through such means as confidential support lines.

Confidential support lines for offenders at-risk of sexually abusing

Offender-focussed initiatives targeted at both potential abusers and actual abusers represent one proactive approach for encouraging (potential) offender accountability. These programs are designed to provide at-risk individuals with confidential advice and support with the aim to deter individuals from acting on inappropriate thoughts, feelings and motivations and enable family members to detect and intervene where necessary. One example is the Stop It Now! Program based in the United Kingdom and Ireland, which aims to educate men to recognise risk and mange at-risk situations. Research conducted on this program (Stop It Now! 2010) and by others (e.g., Finkelhor, 2009) indicate that some men do contact these help lines. Whether or not it prevents child sexual abuse is not yet well established, although anecdotal evidence is positive. It is also unknown whether the effectiveness of these programs lies in the men who make these calls, and who may be more self-aware and motivated *not to offend* than other men who choose not to seek help. The primary legal and ethical challenge faced by practitioners who provide these services is in balancing therapist-client confidentiality with mandatory reporting and statutory obligations. Ultimately, the aim of these programs is to prevent child victimisation and without them many children would continue to be sexually abused and remain anonymous to authorities. Despite the difficulties faced by practitioners ethically, legally and morally, this indirect intervention may reduce incidences of abuse that may otherwise never have been prevented.

Reducing opportunity and creating safe environments

A number of findings suggest that situational crime prevention initiatives may be implemented in order to reduce opportunity and create safer environments for children. These initiatives are aimed at increasing the (perceived and actual) risk and effort as well as reducing permissibility. Whilst it is important to ensure that safeguards against

sexual abusive behaviour are implemented in institutional and public settings, current evidence suggests the primary focus (and ultimately the most difficult) should be on domestic setting. In terms of physical modifications to the home environment, it appears the “private areas” are the main risk areas. Therefore, play areas may be best placed in communal parts of the home where they can be easily monitored. Further, “open door” policies may be useful as well as locks on bathrooms when older children are bathing to reduce likelihood of others being exposed to physical “prompts” that could stimulate offending.

Of course, many of these suggestions are very difficult to implement given the nature of the relationship between the victim and offender and in light of the fact that routine activities that often precipitate such behaviour reflect positive parenting practices and interactions. Separating these seemingly normal parenting behaviours from more deliberate and exploitative tactics to offend is challenging. Moreover, these policies work on the “presumption of guilt” that may create tension and conflict among family members and friends. Therefore, it may be easier to change those factors within the family that create opportunities for offenders to capitalise on, for example, rules disallowing friends, neighbours, acquaintances in home when parents not home; extended guardianship arrangements when parents need to work long hours; reducing private adult-child interactions; increasing guardianship within the home; and reference checks on babysitters (Kaufman et al., 2006). Further to this, it is important to create an emotionally safe environment that fosters strong attachments, parental availability and regular, effective, open communication that encourages children to “speak up”. On the whole, offenders’ reports in this research suggest that they tend to perceive low level risk and effort in such domains, even when actual risks (i.e., other people nearby) are present. Thus, attempts should be made to implement strategies that increase both perceived and actual risks thereby acting as an external inhibitor to abuse.

Situational prevention may also be effected by reducing exposure of developmentally-vulnerable adolescent and adult males to precipitating conditions for sexual abuse. The findings suggest that transient disinhibitors also facilitate sexually abusive behaviour. Therefore, restricting availability to alcohol, pornography, nudity and drugs may serve to reduce permissibility and control prompts that, in themselves, serve to cue inappropriate sexual behaviour (Wortley & Smallbone, 2006).

Nevertheless, there must continue to be surveillance and environmental design to inhibit child sexual abuse outside of the domestic setting. In terms of institutional abuse, safeguards and policies around recruitment may involve screening and monitoring of employees and others in organisational settings where they may be involved with vulnerable children to preclude known sexual offenders. Another example of includes regulating visitors in schools (Smallbone et al., 2008). Being alert to early signs of emotional over-involvement with children or other interpersonal boundary problems in organisational settings may also be important. Policies and procedures that govern interactions between adults and children so that a child is never alone with an adult have been recommended (Leclerc et al., 2010). In terms of public settings, CCTV and reducing "private" spaces in parks, toilets and playgrounds are important physical parameters to constrain such behaviour.

5.3.2 Tertiary prevention

Tertiary prevention relates to interventions that occur *after* problematic behaviour has emerged. In the case of child sexual abuse, this is once the victim has disclosed and / or the offender apprehended. Whilst this thesis is concerned with the onset of child sexual abuse, some suggestions can be made regarding tertiary level prevention, particularly with regard to risk assessment and treatment models.

Risk assessment

In terms of informing current sex-offender risk assessment tools the findings indicate that effective assessment should concentrate on both dynamic (e.g., state attachment problems, intoxication, situational precipitators) and static (e.g., generalised problems with self-restraint, criminal histories) risk factors (Abracen et al., 2004). In terms of risk prediction, the interaction of individual attachment-vulnerabilities and transitory situational cues (e.g., marital problems, intoxication, sleeping arrangements and so on) that serve as precursors to offending need to be accounted for, particularly within the context of familial abuse. Assessment and treatment may need to be strengthened in response to more covert modus operandi strategies (e.g., bribes, gifts, desensitisation) used to engage children in sexual contact, and which may also serve as early indicators for reoffending (Kaufman et al., 1998). Further, the current findings indicate that offender-related and offence-related risk factors may vary at different stages of criminal involvement, so that risk assessment may need to be tailored to the risks associated with potential, novice and persistent offending and interventions tailored accordingly. The findings may also indirectly inform community-based risk management strategies by alerting parole and other authorities to the potential importance both of secure attachment relationships as a protective factor, and of attachment-related problems as a dynamic risk factor, for sexual offending.

Sex offender treatment programs

The present findings add some support to sexual offender treatment models that include efforts to remediate attachment and intimacy problems (e.g., Marshall et al., 1999). The development of a secure therapeutic relationship may provide otherwise insecurely attached individuals with a safe haven from which to explore and challenge maladaptive relational schemas and behavioural responses (Baker & Beech, 2004; Lyon, Gelso, Fischer, & Silva, 2007; Stirpe et al., 2006). Interventions that challenge

underlying core assumptions and current manifestations of developmental attachment relationships, particularly with regard to intimacy avoidance, may be beneficial. Effectiveness of treatment may be compromised by offenders' (and indeed therapists') inability to form a strong, productive therapist-client working alliance, especially fearful-avoidant individuals who tend to have the lowest therapeutic alliance ratings (Eames & Roth, 2000). Emphasis on education regarding the differential functions of attachment, caregiving and sexual behaviour systems may be efficacious.

The findings also implicate low self- (including sexual) restraint as an important risk factor in the onset of sexually abusive behaviour. Treatment should therefore target these current manifestations of earlier developmental problems (e.g., empathy, self-regulation). For example, cognitive-behavioural strategies for emotional and behavioural self-regulation may be useful. From an offender-centred approach, increasing internal inhibitory factors (e.g., increasing potential offenders' awareness of the inappropriate nature of child sexual abuse; management and strategies to control urges) may be important.

In terms of a situational approach, increasing external inhibitors (e.g., environmental constraints and increasing capable guardianship) to reduce offenders' exposure to opportunities for reoffending may be important. Furthermore, many of the situational disinhibitors mentioned by offenders (e.g., anger, intoxication, stress) may not just be seen as excuses for behaviour, but may act as "potential explanatory factors" that could be incorporated into treatment and self-management plans (Marshall et al., 2006, p.55).

5.4 Limitations

The current findings should be interpreted in the context of the study's limitations. The findings of this thesis are based on a single study, using a modest sample size. The findings may not therefore be representative of a true population of

adult male child-sex offenders. On the other hand, the current research design allowed for a specific and detailed analysis of offenders' developmental experiences and the situational context in which these sexual abuse incidents first unfold and how these factors, together, may lead to sexual abusive behaviour for the first time. To date, there has been little, if any, of this kind of detailed analysis on the situational elements of sexual abuse incidents.

This research was retrospective utilising self-report data. While reliability data indicated that offenders were unlikely to be simply fabricating their responses, it cannot be assumed that their recollections are an accurate representation of their attachment or offending histories. Although scores on the social desirability measure indicated a low response bias, offenders' recollections may still have been subject to defensiveness and other self-serving biases. Sexual offenders have also been noted to 'fake good' (Tan & Grace, 2008) and to under-report the extent of their offending (Wood & Riggs, 2009). Even in the present circumstances where self-reported offending was protected by anonymity and confidentiality, the present offenders may have been reluctant to provide information about otherwise undisclosed and undetected offences.

All of the present offenders were incarcerated at the time of the study, and therefore, it is not known whether attachment ratings simply reflect current constructions of past relationships. Present relational schemas have been noted elsewhere as a potential bias on retrospective accounts of attachment experiences (Baldwin & Fehr, 1995). Therefore, the present findings may under- or over-estimate the presence and the extent of childhood and adult attachment problems generally among child-sex offenders. Interview based-measures, such as the Child Attachment Interview (Target, Fonagy, & Schmueli-Goetz, 2003) and the Adult Attachment Interview (George, Kaplan, & Main, 1984) may provide a less subjective account than these self-report methods, are more resilient to the effects of social desirability

(Bakersman-Kranenburg & van Ijzendoorn, 1993) and have sufficient scope to measure attachment disorganisation. Where time and resources permit these interview-based measures may be considered as an alternative method in future studies involving child-sex offenders.

Finally, this sample contains only detected (i.e., convicted) offenders. This may restrict the generalisations of findings regarding offenders' modus operandi. The findings that offenders used little forethought, planning and effort to engage the child(ren) in sexual activity and to avoid victim disclosure, could in a sense represent their failures at concealment. Thus, the present findings may be more relevant to understanding the modus operandi of men who are apprehended for their sexual offences, and less relevant to those men who are successful at concealment and who therefore go undetected. The current findings may also then be more reflective of the typical situational offender than the committed (preferential) offender.

5.5 Directions for Future Research

Notwithstanding these limitations the current findings provide a starting point from which to explain the origins of child sexual abuse. Several research directions can follow from this point. First, the current findings indicate that examining both distal and proximal associations of attachment problems and sexual offending is a promising research direction, and it is argued here that this person-situation framework should be more widely adopted in sexual offending research. The field continues to be dominated by offender-centred approaches, both theoretically and empirically, and it seems clear that more needs to be understood about how individual offence-related vulnerabilities or dispositions manifest specifically as sexual abuse behaviour.

Second, at the time of data collection a measure of state adult attachment did not exist. The ECRI-State was designed to specifically measure attachment in the month prior to offending onset to examine how changes in attachment insecurity may

proximally influence sexually abusive thoughts and behaviour. Whilst initial reliability and validity analyses indicated that the ECRI-State it was a reliable and valid measure of state adult attachment, further validation of this measure is recommended, and future studies incorporating this measure welcomed.

Third, this research also provides a starting point from which to discern if, and how, situational factors and offenders' modus operandi differ from those associated with abuse incidents subsequent to the onset sexual offence. This may all allow for prevention efforts to be tailored specifically to different stages of criminal involvement (i.e., potential, novice and persistent offenders) (Wortley, 2008) where difference are found to exist. Further research is also needed to discover whether proximal attachment problems are associated with sexual recidivism, as well as with the onset sexual abuse incident as is suggested by the present study.

Fourth, examining the continuity of attachment classification from adolescence to adulthood in a sample of child-sex offenders may be useful. Such research may serve to clarify whether late adolescent and adult representations are equivalent or whether this is a critical period of transition, particularly when individuals are confronted with negative attachment-related experiences. Adolescence also represents a risk period for the onset of sexually abusive behaviour. Only a handful of offenders in the present study identified as adolescent-onset offenders which did not allow scope for comparative analyses. It would therefore be beneficial to conduct a similar study on a sample of adolescent-onset sexual offenders to determine the developmental and situational factors associated with early-onset sexually abusive behaviour. Whilst there is some research examining attachment style as a developmental antecedent to adolescent sexual offending (e.g., Miner et al., 2010) and the modus operandi of adolescent sexual offenders (e.g., Kaufman et al., 1996; Leclerc & Tremblay, 2007;

Leclerc, Beauregard, & Proulx, 2008) no studies have yet examined adolescent-onset sexual abuse through the person-situation framework.

Last, the findings on the situational dimensions of the onset sexual offence suggest that situational crime prevention frameworks such as routine activities and rational choice theory, which inform situational crime prevention initiatives, may be useful for understanding the general criminogenic aspects of sexual offending in adult-onset offenders. More direct empirical examination of these factors, and particularly, how they interact with underlying individual-level vulnerabilities to trigger sexually abusive behaviour, is warranted. In addition to domestic, institutional and public settings, future research should also incorporate internet-based sexual crimes, which now represent an additional offence setting requiring situational analysis.

5.6 Concluding Remarks

The purpose of this thesis was to explore the previously neglected, but highly important, onset sexual offence through the person-situation framework. The current findings indicate that an integrated approach that draws together psychological and criminological perspectives, and tailors interventions to offender-related and offence-related factors, provides a new way forward in sex offender research and prevention. Specifically, developmental and situational approaches provide a comprehensive foundation from which to begin explaining the origins of sexually abusive behaviour. The findings have led to a number suggestions regarding theory advancement and for developmental and situational prevention initiatives at a universal level (i.e., primary prevention), for implementation with at-risk groups (i.e., secondary prevention) and targeted specifically at convicted sexual offenders (i.e., tertiary prevention) in an effort to manage, if not reduce, sexually exploitative behaviour against children. The findings also give rise to several future research directions that may assist in advancing current

understanding of the origins of child sexual abuse to ultimately prevent such incidents from occurring in the first place.

APPENDICES

Appendix A
Data Sheet

Date:______________________________

1. DEMOGRAPHIC INFO

CIS Number	Date of Birth (dd/mm/yyyy)	Level of Education Attained	Ethnicity		
			ATSI	White Aust	Other
		❑Primary School (grades 1-7) ❑ Some Secondary School (grades 8-10) ❑ Secondary School (completed grade 11) ❑Secondary School (completed grade 12) ❑ Technical / Apprenticeship ❑TAFE ❑ Some University ❑ University Graduate ❑ Post-Graduate Studies			

Correctional Status (Please Circle)		Date sentenced (month/year)	Total Sentence			Prison / Office
Community	Prison		Years	Months	Days	

2. PROJECT STATUS

Agreed to Access to Prison File (Y/N) If NO, this sheet must be completed by a QCS staff member.	Data collected from prison file by:

Agreed to Private Interview (Y/N)	Agreed to Re-Administration of Questionnaire:	Agreed to Audio-Taping (Y/N)	Agreed to Follow-Up Study (Y/N)

3. CURRENT OFFENDING

A) Sexual offence / s for which inmate is **currently** serving a sentence

Offence Date (month / year)	Conviction Date (month / year)	Number (convictions)	Offence type / s

B) Non-sexual offence / s for which inmate is **currently** serving a sentence (insert month and year of offence and conviction dates and number of convictions)

ASOC 01 Homicide and Related Offences			ASOC 02 Acts Intended to Cause Injury			ASOC 04 Dangerous or Negligent Acts Endangering Persons			ASOC 05 Abduction and Related Offences		
Offence Date	Conv. Date	No. Conv(s)	Offence Date	Conv. Date	No. Conv(s)	Offence Date	Conv. Date	No. Conv(s)	Offence Date	Conv. Date	No. Conv(s)

ASOC 06 Robbery, Extortion and Related Offences			ASOC 07 Unlawful Entry with Intent/Burglary, Break and Enter			ASOC 08 Theft and Related Offences			ASOC 09 Deception and Related Offences		
Offence Date	Conv. Date	No. Conv(s)	Offence Date	Conv. Date	No. Conv(s)	Offence Date	Conv. Date	No. Conv(s)	Offence Date	Conv. Date	No. Conv(s)

ASOC 10 Illicit Drug Offence			ASOC 11 Weapons and Explosives Offences			ASOC 12 Property Damage and Environmental Pollution			ASOC 13 Public Order Offences		
Offence Date	Conv. Date	No. Conv(s)	Offence Date	Conv. Date	No. Conv(s)	Offence Date	Conv. Date	No. Conv(s)	Offence Date	Conv. Date	No. Conv(s)

ASOC 14 Road Traffic and Motor Vehicle Regulatory Offences			ASOC 15 Offences Against Justice Procedures, Govt Security, & Govt Operations			ASOC 16 Miscellaneous Offences		
Offence Date	Conv. Date	No. Conv(s)	Offence Date	Conv. Date	No. Conv(s)	Offence Date	Conv. Date	No. Conv(s)

4. PREVIOUS OFFENDING

A) Previous sexual offending history (record details for each particular offence)

Offence Date (month / year)	Conviction Date (month / year)	Number (convictions)	Offence type / s

B) Non-sexual offence / s for which inmate has previously been convicted (insert month and year of offence and conviction dates and number of convictions)

ASOC 01 Homicide and Related Offences			**ASOC 02 Acts Intended to Cause Injury**			**ASOC 04 Dangerous or Negligent Acts Endangering Persons**			**ASOC 05 Abduction and Related Offences**		
Offence Date	**Conv. Date**	**No. Conv(s)**	**Offence Date**	**Conv. Date**	**No. Conv(s)**	**Offence Date**	**Conv. Date**	**No. Conv(s)**	**Offence Date**	**Conv. Date**	**No. Conv(s)**

ASOC 06 Robbery, Extortion and Related Offences			**ASOC 07 Unlawful Entry with Intent/Burglary, Break and Enter**			**ASOC 08 Theft and Related Offences**			**ASOC 09 Deception and Related Offences**		
Offence Date	**Conv. Date**	**No. Conv(s)**	**Offence Date**	**Conv. Date**	**No. Conv(s)**	**Offence Date**	**Conv. Date**	**No. Conv(s)**	**Offence Date**	**Conv. Date**	**No. Conv(s)**

ASOC 10 Illicit Drug Offence			**ASOC 11 Weapons and Explosives Offences**			**ASOC 12 Property Damage and Environmental Pollution**			**ASOC 13 Public Order Offences**		
Offence Date	**Conv. Date**	**No. Conv(s)**	**Offence Date**	**Conv. Date**	**No. Conv(s)**	**Offence Date**	**Conv. Date**	**No. Conv(s)**	**Offence Date**	**Conv. Date**	**No. Conv(s)**

ASOC 14 Road Traffic and Motor Vehicle Regulatory Offences			**ASOC 15 Offences Against Justice Procedures, Govt Security, & Govt Operations**			**ASOC 16 Miscellaneous Offences**		
Offence Date	**Conv. Date**	**No. Conv(s)**	**Offence Date**	**Conv. Date**	**No. Conv(s)**	**Offence Date**	**Conv. Date**	**No. Conv(s)**

Appendix B
Questionnaire

Project Questionnaire

CIS: ___ ___ ___ ___ ___ ___

Centre:________________________

Date: __ __ / __ __ / __ __ __ __

Participant No: ___ ___ ___

Researcher Initials: _____________

SECTION A

Thank you for choosing to participate in our research. Please read and respond to each question. **It is important that you respond to all questions.** If you have any difficulties understanding the questions, please ask the researcher to help you. **Remember, your answers are confidential and will not be used against you**.

1. What was the highest level of education you had completed at the time you commenced your current sentence?

☐ Primary School (grades 1-7)

☐ Some Secondary School (grades 8-10)

☐ Secondary School (completed grade 11)

☐ Secondary School (completed grade 12)

☐ Technical / Apprenticeship

☐ TAFE

☐ Some University

☐ University Graduate

☐ Post-Graduate Studies

2. Have you ever lived with an intimate partner for two years or more?

☐ YES ☐ NO

3. Before you were 17 years old had you ever (please tick all that apply):

☐ Been formally cautioned by the police

☐ Served a community order (e.g. probation)

☐ Been fined

☐ Served time in a Youth Detention Centre (Boys Home)

If you ticked any of the above, what was this for?

____

4. How old were you at the time you commenced your current sentence?

______ years _______ months

5. How old are you now?

______ years _______ months

6. How long is your current sentence?

______ years ______ months

7. When do you expect to be released from prison (which month of which year)?

____

SECTION B

The questions below ask you about your family experiences while you were under 17 years of age. Please read and respond to each question. Please remember that any information that you provide is **confidential** and **anonymous** and will not be shared with anyone outside of the research team. Remember not to put your name on the questionnaire.

1. Before you were 17 years old, had you ever been the subject of a child protection investigation (i.e., had your parents or guardians ever been investigated for matters concerning you when you were a child)?

☐ YES ☐ NO ☐ UNSURE

If you ticked YES, was this for (please tick all that apply):

☐ Neglect ☐ Physical Abuse

☐ Emotional Abuse ☐ Sexual Abuse

☐ Other (please describe) ____

How old were you when this first happened? ________ years _________ months

2. a) Even if you were not the subject of a child protection investigation, do you remember experiencing any of the following:

☐ Neglect ☐ Physical Abuse

☐ Emotional Abuse ☐ Sexual Abuse

☐ Other (please describe) ____

How old were you when this first happened? ________ years _________ months

b) Do you remember experiencing any of the following by **<u>someone other than your parents or guardians</u>**:

☐ Emotional Abuse ☐ Physical Abuse

☐ Sexual Abuse ☐ Other (please describe) ______________________

How old were you when this first happened? ________ years _________ months

Who was this person (e.g. uncle, teacher etc)? ______________________

3. Before you were 17 years old, had you ever spent time in a foster home or institution because of problems at home?

☐ YES – I spent time in a foster home ☐ YES – I spent time in an institution

☐ NO ☐ UNSURE

If you ticked YES, how old were you when this first happened? _______ years _______ months

SECTION C

The following items list various attitudes and behaviours of parents. As you remember your MOTHER and FATHER in your first 16 years, would you please circle the most appropriate response. Please respond separately for both your MOTHER and FATHER using the scale below. If your MOTHER was not in your life in your first 16 years, please tick here _____ and respond to the statements for your FATHER only. If you FATHER was not present in your life in your first 16 years, please tick here _____ and respond to the statements for your MOTHER only.

0	1	2	3
Very Like	Moderately Like	Moderately Unlike	Very Unlike

1. My Mother/Father:	**MOTHER**				**FATHER**			
	Very Like	**Mod. Like**	**Mod. Unlike**	**Very Unlike**	**Very Like**	**Mod. Like**	**Mod. Unlike**	**Very Unlike**
a) Spoke to me in a warm and friendly voice	0	1	2	3	0	1	2	3
b) Did not help me as much as I needed	0	1	2	3	0	1	2	3
c) Let me do those things I liked doing	0	1	2	3	0	1	2	3
d) Seemed emotionally cold to me	0	1	2	3	0	1	2	3
e) Appeared to understand my problems and worries	0	1	2	3	0	1	2	3
f) Was affectionate to me	0	1	2	3	0	1	2	3
g) Liked me to make my own decisions	0	1	2	3	0	1	2	3
h) Did not want me to grow up	0	1	2	3	0	1	2	3
i) Tried to control everything I did	0	1	2	3	0	1	2	3
j) Invaded my privacy	0	1	2	3	0	1	2	3
k) Enjoyed talking things over with me	0	1	2	3	0	1	2	3
l) Frequently smiled at me	0	1	2	3	0	1	2	3
m) Tended to baby me	0	1	2	3	0	1	2	3
n) Did not seem to understand what I needed or wanted	0	1	2	3	0	1	2	3
o) Let me decide things for myself	0	1	2	3	0	1	2	3
p) Made me feel I wasn't wanted	0	1	2	3	0	1	2	3
q) Could make me feel better when I was upset	0	1	2	3	0	1	2	3
r) Did not talk with me very much	0	1	2	3	0	1	2	3
s) Tried to make me feel dependent on him/her	0	1	2	3	0	1	2	3
t) Felt I could not look after myself unless he/she was around	0	1	2	3	0	1	2	3
u) Gave me as much freedom as I wanted	0	1	2	3	0	1	2	3
v) Let me go out as often as I wanted	0	1	2	3	0	1	2	3
w) Was overprotective of me	0	1	2	3	0	1	2	3
x) Did not praise me	0	1	2	3	0	1	2	3
y) Let me dress in any way I pleased	0	1	2	3	0	1	2	3

2. Please rate EACH of the following descriptions according to the extent to which each describes your **MOTHER** as you were growing up. Circle one number for each style for your **MOTHER.**
A. My mother was generally warm and responsive. She was good at knowing when to be supportive and when to let me do my own thing. Our relationship was always comfortable, and I have no major reservations about it. 1 (Not at all like my mother) 2 3 4 (Somewhat like my mother) 5 6 7 (Very much like my mother)
B. My mother was noticeably inconsistent in her reactions to me, sometimes warm and sometimes not. She had her own needs and agendas, which sometimes got in the way of her receptiveness and responsiveness to my needs. She definitely loved me, but didn't always show it in the best way. 1 (Not at all like my mother) 2 3 4 (Somewhat like my mother) 5 6 7 (Very much like my mother)
C. My mother was fairly cold, distant, and rejecting, and not very responsive. I often felt that I wasn't her highest priority, and that her concerns were elsewhere. I often had the feeling that she would just as soon not have had me. 1 (Not at all like my mother) 2 3 4 (Somewhat like my mother) 5 6 7 (Very much like my mother)

3. Now please rate EACH of the following descriptions according to the extent to which each describes your **FATHER** as you were growing up. Circle one number for each style for your **FATHER.**
A. My father was generally warm and responsive. He was good at knowing when to be supportive and when to let me do my own thing. Our relationship was always comfortable, and I have no major reservations about it. 1 (Not at all like my father) 2 3 4 (Somewhat like my father) 5 6 7 (Very much like my father)
B. My father was noticeably inconsistent in his reactions to me, sometimes warm and sometimes not. He had his own needs and agendas, which sometimes got in the way of his receptiveness and responsiveness to my needs. He definitely loved me, but didn't always show it in the best way. 1 (Not at all like my father) 2 3 4 (Somewhat like my father) 5 6 7 (Very much like my father)
C. My father was fairly cold, distant, and rejecting, and not very responsive. I often felt that I wasn't his highest priority, and that his concerns were elsewhere. I often had the feeling that he would just as soon not have had me. 1 (Not at all like my father) 2 3 4 (Somewhat like my father) 5 6 7 (Very much like my father)

SECTION D

We are interested in how you generally experience close adult relationships, not just in what is happening in any current relationship you may be in. Please respond to each statement by circling how much you agree or disagree with it using the rating scale below. Please circle the number that best suits your response for each question.

1.	**Disagree Strongly**			**Neutral/ Mixed**			**Agree Strongly**
a) I prefer not to show my partners how I feel deep down.	1	2	3	4	5	6	7
b) I worry about being abandoned.	1	2	3	4	5	6	7
c) I am very comfortable being close to my romantic partners.	1	2	3	4	5	6	7
d) I worry a lot about my relationships.	1	2	3	4	5	6	7
e) Just when my partner starts to get close to me I find myself pulling away.	1	2	3	4	5	6	7
f) I worry that romantic partners won't care about me as much as I care about them.	1	2	3	4	5	6	7
g) I get uncomfortable when a romantic partner wants to be very close.	1	2	3	4	5	6	7
h) I worry a fair amount about losing my partner.	1	2	3	4	5	6	7
i) I don't feel comfortable opening up to romantic partners.	1	2	3	4	5	6	7
j) I often wish that my partner's feelings for me were as strong as my feelings for him/her.	1	2	3	4	5	6	7
k) I want to get close to my partner, but I keep pulling back.	1	2	3	4	5	6	7
l) I often want to merge completely with romantic partners, and this sometimes scares them away.	1	2	3	4	5	6	7
m) I am nervous when partners get too close to me.	1	2	3	4	5	6	7
n) I worry about being alone.	1	2	3	4	5	6	7
o) I feel comfortable sharing my private thoughts and feelings with my partner.	1	2	3	4	5	6	7
p) My desire to be very close sometimes scares people away.	1	2	3	4	5	6	7
q) I try to avoid getting too close to my partner.	1	2	3	4	5	6	7
r) I need a lot of reassurance that I am loved by my partner.	1	2	3	4	5	6	7
s) I find it relatively easy to get close to my partner.	1	2	3	4	5	6	7
t) Sometimes I feel that I force my partners to show more feeling, more commitment.	1	2	3	4	5	6	7
u) I find it difficult to allow myself to depend on romantic partners	1	2	3	4	5	6	7
v) I do not often worry about being abandoned.	1	2	3	4	5	6	7
w) I prefer not to be too close to romantic partners.	1	2	3	4	5	6	7
x) If I can't get my partner to show interest in me, I get upset or angry.	1	2	3	4	5	6	7
y) I tell my partner just about everything.	1	2	3	4	5	6	7

Please remember to respond to each statement by circling how much you agree or disagree with it using the rating scale below. Please circle the number that best suits your response for each question.

	Disagree Strongly			**Neutral/ Mixed**			**Agree Strongly**
z) I find that my partner(s) don't want to get as close as I would like.	1	2	3	4	5	6	7
aa) I usually discuss my problems and concerns with my partner.	1	2	3	4	5	6	7
bb) When I'm not involved in a relationship, I feel somewhat anxious and insecure.	1	2	3	4	5	6	7
cc) I feel comfortable depending on romantic partners.	1	2	3	4	5	6	7
dd) I get frustrated when my partner is not around as much as I would like.	1	2	3	4	5	6	7
ee) I don't mind asking romantic partners for comfort, advice, or help.	1	2	3	4	5	6	7
ff) I get frustrated if romantic partners are not available when I need them.	1	2	3	4	5	6	7
gg) It helps to turn to my romantic partner in times of need.	1	2	3	4	5	6	7
hh) When romantic partners disapprove of me, I feel really bad about myself.	1	2	3	4	5	6	7
ii) I turn to my partner for many things, including comfort and reassurance.	1	2	3	4	5	6	7
jj) I resent it when my partner spends time away from me.	1	2	3	4	5	6	7

SECTION E

Now we would like you to read on and answer the following questions which ask you about your intimate sexual activity. For the purposes of the following questions INTIMATE SEXUAL ACTIVITY means any sexual activity with a consenting **adult**, which could include oral, anal, or vaginal sex. Please remember that any information that you provide is confidential and anonymous and will not be shared with anyone outside of the research team. Remember not to put your name on the questionnaire.

1. Have you ever had intimate sexual activity with an adult woman *(here adult means over 16 years)*?

☐ YES ☐ NO

IF YOU ANSWERED NO, PLEASE TICK HERE _______ AND SKIP TO **QUESTION 2** BELOW**.**

a) How old were you when you first had consenting sexual intercourse with a female partner?
__________ (years)

b) How old was the female partner involved?
__________ (years)

c) Approximately how many different women have you had consenting sex with?
____

d) How many relationships have you had which have involved emotional commitment?
____

e) What was the length of the longest heterosexual relationship you have had?
__________ years __________ months __________ days

f) How many sexual relationships have you had with adult women that lasted six months or more?
____

g) How many female sexual partners have lived with you for at least 4 weeks?
____

2. a) Have you ever had intimate sexual activity with an adult man?
(here adult means aged at least 16)

☐ YES ☐ NO

IF YOU ANSWERED NO, PLEASE TICK HERE _____ AND SKIP TO **SECTION F** ON **PAGE 8**.

b) How old were you when you first had consenting sexual activity with a male partner?
__________ years

c) How old was the male partner involved?
__________ years

d) Approximately how many different men have you had consenting sex with?
____

e) How many relationships have you had with men which have involved emotional commitment?
____

f) What was the length of the longest homosexual relationship you have had?
__________ years __________ months __________ days

g) How many sexual relationships have you had with adult men that lasted six months or more? __________

h) How many male sexual partners have lived with you for at least 4 weeks? __________

SECTION F

Thank you for completing the previous questions. Now could we please ask you to think about the **very first time** you had sexual contact with **a child**. **A child is someone under the age of 16 years**.

Please answer these questions whether or not you were caught for this, or even whether or not anyone else knows about it.

If you were an **adult** when this first happened, please think about the first time you had sexual contact with someone younger than 16 years of age.

If you were an **adolescent or teenager**, please think about the first time you had sexual contact with someone **three or more years younger than you.**

It is very important that you answer these questions truthfully. Please remember it will not be used against you. Remember not to put your name on the questionnaire.

Now please think back to the **month leading up to the very first time** you had sexual contact with this child, and answer the questions below.

1. What was your employment / educational situation in the month leading up to the first sexual contact with this child? (please tick appropriate box)

☐ Attending high school
☐ Attending University / TAFE
☐ Employed full-time
☐ Employed part-time
☐ Receiving government benefits
☐ Other income (please specify) ____________________

2. If you were employed, what was your occupation?

____

3. Please circle on the scale below how satisfied you were with your employment / education situation in the month leading up to the first sexual contact with a child. (please circle appropriate number)

Very Unsatisfied	Quite Unsatisfied	Neutral	Quite Satisfied	Very Satisfied
1	2	3	4	5

4. What was your relationship status in the month leading up to the first sexual contact with this child?

☐ Married and living with spouse
☐ Steady girlfriend / boyfriend (lived with me)
☐ Married but not living with spouse
☐ Steady girlfriend/boyfriend (did not live with me)
☐ New or casual girlfriend / boyfriend
☐ Not in any close adult relationship
☐ Other (please describe) ____________________________________

5. Please circle on the scale below how happy you were with your relationship situation in the month leading up to the first sexual contact with a child.

Very Unhappy	Quite Unhappy	Neutral	Quite Happy	Very Happy
1	2	3	4	5

6. Did any of the stressful events listed below occur in the month leading up to the very first time you had sexual contact with a child? (please tick all that apply)

- ☐ Relationship problems
- ☐ Moving house
- ☐ Financial problems
- ☐ Personal injury / illness
- ☐ Loss of job / retirement
- ☐ Death of partner
- ☐ Death of family member
- ☐ Change of job
- ☐ Divorce / separation
- ☐ Injury / illness of partner
- ☐ Sexual difficulties
- ☐ Other stressful event (please describe____

7. What did you do to reduce the stress of these events? (please tick all that apply)

- ☐ Sought help from adult partner
- ☐ Sought help from other adult family members
- ☐ Sought help from adult friend
- ☐ Sought professional help
- ☐ Sought support / comfort from your child(ren)
- ☐ Consumed alcohol / drugs
- ☐ Turned to gambling
- ☐ Isolated myself
- ☐ Spent time on the computer/internet
- ☐ I did nothing
- ☐ Other (please describe) ____

8. Did these efforts reduce the stress?

- ☐ YES
- ☐ NO

If not, what other things did you do? Please specify

____

____

9. How long before the first sexual contact occurred did you first notice that you were having sexual thoughts about **children in general**?

- ☐ Did not have sexual thoughts about children in general
- ☐ For 1 week – 1 month
- ☐ For a few minutes
- ☐ For 1 month – 6 months
- ☐ For a few hours
- ☐ For 6 months – 1 year
- ☐ For 1 day – 1 week
- ☐ For more than 1 year

10. In the **month before** you had sexual contact with a child for the very first time, how often were you having sexual thoughts about **children in general** (not necessarily the child who you had sexual contact with)?

1	2	3	4	5
Not at all		Sometimes		Very often

11. How long before the **first sexual contact** occurred did you first notice that you were having sexual thoughts about **the child you had sexual contact with for the very first time**?

☐ Did not have sexual thoughts about the child who I had first sexual contact with	☐ For 1 week – 1 month
☐ For a few minutes	☐ For 1 month – 6 months
☐ For a few hours	☐ For 6 months – 1 year
☐ For 1 day – 1 week	☐ For more than 1 year

12. In the **month before** you had sexual contact with this child for the **very first time**, how often were you having sexual thoughts about **this child?**

1	2	3	4	5
Not at all		Sometimes		Very often

IF YOU WERE NOT IN ANY CLOSE ADULT RELATIONSHIP IN THE MONTH LEADING UP TO YOUR FIRST SEXUAL CONTACT WITH A CHILD, PLEASE TICK HERE _____ AND GO ON TO **SECTION G** ON **PAGE 13.**

IF YOU WERE IN A CLOSE ADULT RELATIONSHIP IN THE MONTH LEADING UP TO YOUR FIRST SEXUAL CONTACT WITH A CHILD, PLEASE CONTINUE WITH **QUESTION 13** ON THE **NEXT PAGE**.

13. The following statements concern how you felt in your close adult relationship **in the month leading up to the first time** you had sexual contact with a child. Respond to each statement by indicating how much you agree or disagree with it using the rating scale below. Please circle the number that best suits your response for each statement.

	Disagree Strongly			**Neutral/ Mixed**			**Agree Strongly**
a) I preferred not to show my partner how I felt deep down.	1	2	3	4	5	6	7
b) I worried about being abandoned.	1	2	3	4	5	6	7
c) I was very comfortable being close to my partner.	1	2	3	4	5	6	7
d) I worried a lot about my relationship.	1	2	3	4	5	6	7
e) Just when my partner started to get close to me I found myself pulling away.	1	2	3	4	5	6	7
f) I worried that my partner wouldn't care about me as much as I cared about them.	1	2	3	4	5	6	7
g) I got uncomfortable when my partner wanted to be very close.	1	2	3	4	5	6	7
h) I worried a fair amount about losing my partner.	1	2	3	4	5	6	7
i) I didn't feel comfortable opening up to my partner.	1	2	3	4	5	6	7
j) I often wished that my partner's feelings for me had been as strong as my feelings for him/her.	1	2	3	4	5	6	7
k) I wanted to get close to my partner, but I kept pulling back.	1	2	3	4	5	6	7
l) I often wanted to merge completely with my partner, and this sometimes scared them away.	1	2	3	4	5	6	7
m) I got nervous when my partner got too close to me.	1	2	3	4	5	6	7
n) I worried about being alone.	1	2	3	4	5	6	7
o) I felt comfortable sharing my private thoughts and feelings with my partner.	1	2	3	4	5	6	7
p) My desire to be very close sometimes scared my partner away.	1	2	3	4	5	6	7
q) I tried to avoid getting too close to my partner.	1	2	3	4	5	6	7
r) I needed a lot of reassurance that I was loved by my partner.	1	2	3	4	5	6	7
s) I found it relatively easy to get close to my partner.	1	2	3	4	5	6	7
t) Sometimes I felt that I forced my partner to show more feeling, more commitment.	1	2	3	4	5	6	7
u) I found it difficult to allow myself to depend on my partner.	1	2	3	4	5	6	7
v) I did not often worry about being abandoned.	1	2	3	4	5	6	7
w) I preferred not to be too close to my partner.	1	2	3	4	5	6	7
x) If I couldn't get my partner to show interest in me, I'd get upset or angry.	1	2	3	4	5	6	7
y) I told my partner just about everything.	1	2	3	4	5	6	7
z) I found that my partner didn't want to get as close as I would have liked.	1	2	3	4	5	6	7

Please remember to respond to each statement by indicating how much you agree or disagree with it using the rating scale below. Please circle the number that best suits your response for each statement.

	Disagree Strongly			**Neutral/ Mixed**			**Agree Strongly**
aa) I usually discussed my problems and concerns with my partner.	1	2	3	4	5	6	7
bb) When I was not involved in a relationship, I felt somewhat anxious and insecure.	1	2	3	4	5	6	7
cc) I felt comfortable depending on my partner.	1	2	3	4	5	6	7
dd) I got frustrated when my partner was not around as much as I would have liked.	1	2	3	4	5	6	7
ee) I didn’t mind asking my partner for comfort, advice, or help.	1	2	3	4	5	6	7
ff) I got frustrated because my partner was not available when I needed them.	1	2	3	4	5	6	7
gg) It helped to turn to my partner in times of need.	1	2	3	4	5	6	7
hh) When my partner disapproved of me, I felt really bad about myself.	1	2	3	4	5	6	7
ii) I turned to my partner for many things, including comfort and reassurance.	1	2	3	4	5	6	7
jj) I resented it when my partner spent time away from me.	1	2	3	4	5	6	7

SECTION G

Thank you for answering the previous questions about the **month leading up to** the very first time you had sexual contact with a child. Now we would like to ask you some questions about the **very first time** you had sexual contact with a child. Please remember that a child is someone under the age of 16 years. If there was more than one child involved in the sexual contact at the very first time, please think about the **first child** who you had sexual contact with

Please answer these questions whether or not you were caught for this, or even whether or not anyone else knows about it

If you were an **adult** when this first happened, please think about the first time you had sexual contact with someone younger than 16 years of age.

If you were an **adolescent or teenager**, please think about the first time you had sexual contact with someone three or more years younger than you.

It is very important that you answer these questions truthfully. Please remember it will not be used against you. Remember not to put your name on the questionnaire.

1. Please identify where you were living at the **time of your first sexual contact with a child.** Please tick ONE of the following:

☐ YOUR PARENTS HOUSE / FLAT

☐ YOUR HOUSE / FLAT (owned or rented)

☐ SOMEONE ELSE’S HOUSE / FLAT

☐ CARAVAN PARK

☐ HOSTEL

☐ OTHER INSTITUTION

☐ NO FIXED ADDRESS

☐ OTHER

2. Please specify who lived in the household with you at the **time of your first sexual contact with a child**:

LIVED ALONE ☐ YES

SPOUSE ☐ YES
(e.g. wife / partner you have lived with
for more than **6** months)

MOTHER ☐ YES

FATHER ☐ YES

GIRLFRIEND / BOYFRIEND ☐ YES

OWN CHILD/REN ☐ YES

If YES, please complete the table below by filling in each child(s) gender and age:

	Own child 1	**Own child 2**	**Own child 3**	**Own child 4**	**Own child 5**	**Own child 6**
Gender (M or F)						
Age						

STEP CHILD/REN ☐ YES

If YES, please complete the table below by filling in each of your step-child's gender and age:

	Step-child 1	**Step-child 2**	**Step-child 3**	**Step-child 4**	**Step-child 5**	**Step-child 6**
Gender (M or F)						
Age						

OTHER RELATIVE/S ☐ YES

If YES, please complete the table below by filling in each relative's gender and age:

	Relative 1	**Relative 2**	**Relative 3**	**Relative 4**	**Relative 5**	**Relative 6**
Gender (M or F)						
Age						

OTHER CHILD/REN (NOT RELATED TO YOU) ☐ YES

If YES, please complete the table below by filling in each of the other child/rens gender and age:

	Relative 1	**Relative 2**	**Relative 3**	**Relative 4**	**Relative 5**	**Relative 6**
Gender (M or F)						
Age						

OTHER ADULT/S (NOT RELATED TO YOU) ☐ YES

If YES, please complete the table below by filling in each of the adult's gender and age:

	Adult 1	**Adult 2**	**Adult 3**	**Adult 4**	**Adult 5**	**Adult 6**
Gender (M or F)						
Age						

3. At the time of **your first sexual contact with a child**, were you involved in a sexual relationship? Please tick ONE of the following categories:

☐ Married and living with spouse

☐ Steady girlfriend / boyfriend (lived with me)

☐ Married but not living with spouse

☐ Steady girlfriend/boyfriend (did not live with me)

☐ New or casual girlfriend / boyfriend

☐ Not in any close adult relationship

☐ Other (please describe) ____________________

4. Please read the following statements and respond to each by circling on the scale below how much you agree or disagree with each at the time of your **first sexual contact** with a child.

	Strongly Disagree	**Disagree**	**Neutral**	**Agree**	**Strongly Agree**
a) I was sexually attracted to adult women	1	2	3	4	5
b) I was sexually attracted to adult men	1	2	3	4	5
c) I was sexually attracted to female children (under 16 years)	1	2	3	4	5
d) I was sexually attracted to male children (under 16 years)	1	2	3	4	5

Now we want you to think about the child with whom you had sexual contact with the **very first time.** We would like to ask you a number of questions which relate specifically to this child and your first sexual contact with this child. **It is very important that you answer these questions truthfully. Please remember it will not be used against you. Remember not to put your name on the questionnaire.**

5. Please provide the following information about the **very first time** you had sexual contact with a child. If there was more than one child involved in the sexual contact at the very first time, please think about the **first child** whom you had sexual contact with:

Child's Gender	Child's Age	Your Age	How did you know this child?
☐ Male ☐ Female	________ (At the time of the first sexual contact with you)	________ (At the time of your first sexual contact with this child)	☐ The child was my biological son or daughter ☐ The child was my biological sister or brother ☐ The child was the son or daughter of my partner ☐ The child was my stepsister or stepbrother ☐ The child was my nephew or niece ☐ The child was my grandson or granddaughter ☐ The child was a son or daughter of a friend ☐ The child was a neighbour ☐ I met the child through my (paid or volunteer) work What work were you doing? ____________ ☐ The child was a complete stranger to me ☐ I knew the child in some other way Please explain ____________

6. How long had you known this child before the **very first time** you had sexual contact with them?

☐ For a few minutes
☐ For a few hours
☐ For 1 day – 1 week
☐ For 1 week – 1 month
☐ For 1 month – 6 months
☐ For 6 months – 1 year
☐ For more than 1 year

The question below asks you about how often you had sexual thoughts about both **children in general** *and* **the child you had sexual contact with the very first time.**

7. Please circle how often you had sexual thoughts about both children in general and the child you had sexual contact with in the **week before**, **day before**, and the **day of** the first sexual contact.

	Children in general					**Child you had sexual contact with for the very first time**				
	Not at all		**Some-times**		**Very Often**	**Not at all**		**Some-times**		**Very Often**
Week before first sexual contact	1	2	3	4	5	1	2	3	4	5
Day before first sexual contact	1	2	3	4	5	1	2	3	4	5
Day of first sexual contact	1	2	3	4	5	1	2	3	4	5

8. What was it that led to you **having these first sexual thoughts** about this child? (please tick all that apply)

- ☐ I did not have sexual thoughts about this child
- ☐ The way the child was dressed
- ☐ The child needed attention (e.g., wanted to be hugged)
- ☐ The child had already been involved in sexual activity with an older person
- ☐ The child was physically attractive
- ☐ The child was fun to be with
- ☐ The child seemed vulnerable / shy
- ☐ I saw the child semi-naked or naked
- ☐ The child flirted with me
- ☐ The child seemed to care about me
- ☐ Other (please specify)______________________
____

9. For each statement below, circle the number that best describes how you felt in the **minutes before** you had sexual contact with a child for the **very first time**.

	Didn't feel this way at all		**Felt this way somewhat**		**Felt this way very strongly**
a) I felt good about myself	1	2	3	4	5
b) I wanted to sink into the floor and disappear	1	2	3	4	5
c) I felt remorse or regret	1	2	3	4	5
d) I felt worthwhile or valuable	1	2	3	4	5
e) I felt small	1	2	3	4	5
f) I felt tense	1	2	3	4	5
g) I felt capable or useful	1	2	3	4	5
h) I felt like I was a bad person	1	2	3	4	5
i) I could not stop thinking about what I was about to do	1	2	3	4	5
j) I felt proud	1	2	3	4	5
k) I felt humiliated or disgraced	1	2	3	4	5
l) I felt like apologizing or confessing to someone	1	2	3	4	5
m) I felt pleased	1	2	3	4	5
n) I felt worthless or powerless	1	2	3	4	5
o) I felt bad	1	2	3	4	5
p) I felt sexually excited	1	2	3	4	5

10. Before the first sexual contact, when did you start <u>feeling</u> sexually aroused by this child?

- ☐ A few minutes before the first sexual contact
- ☐ A few hours before the first sexual contact
- ☐ 1 day before the first sexual contact
- ☐ 1 day – 1 week before the first sexual contact
- ☐ 1 week – 1 month before the first sexual contact
- ☐ 1 month – 6 months before the first sexual contact
- ☐ 6 months – 1 year before the first sexual contact
- ☐ More than 1 year before the first sexual contact
- ☐ I did not feel sexually aroused by this child before I had sexual contact with them

11. At what point did you <u>decide</u> that the sexual contact was going to happen?

- ☐ A few minutes before the first sexual contact
- ☐ A few hours before the first sexual contact
- ☐ 1 day before the first sexual contact
- ☐ 1 day – 1 week before the first sexual contact
- ☐ 1 week – 1 month before the first sexual contact
- ☐ 1 month – 6 months before the first sexual contact
- ☐ 6 months – 1 year before the first sexual contact
- ☐ More than 1 year before the first sexual contact
- ☐ I did not – I acted on the spur of the moment

12. At what point did you start to think about <u>how you might</u> set up the first sexual contact?

- ☐ A few minutes before the first sexual contact
- ☐ A few hours before the first sexual contact
- ☐ 1 day before the first sexual contact
- ☐ 1 day – 1 week before the first sexual contact
- ☐ 1 week – 1 month before the first sexual contact
- ☐ 1 month – 6 months before the first sexual contact
- ☐ 6 months – 1 year before the first sexual contact
- ☐ More than 1 year before the first sexual contact
- ☐ I did not – I acted on the spur of the moment

13. Where did the first sexual contact with this child take place?

- ☐ In your home
- ☐ In the child's home
- ☐ In someone else's home

If the first sexual contact occurred in a home, where exactly did it occur:

- ☐ In the child's bedroom
- ☐ In your bedroom
- ☐ In a bathroom
- ☐ In a living room
- ☐ Outside in the yard or in a shed
- ☐ Somewhere else (Please specify ____)

☐ At a school, church, or club where children come for a short while

Please specify exactly where ______________________________

☐ In a residential institution where children live (eg children's home)

Please specify exactly where ______________________________

☐ In a public place (eg street, park, shopping mall, swimming pool)

Please specify exactly where ______________________________

☐ Somewhere else

Please specify exactly where ______________________________

14. If you were living with the child at the time of the first sexual contact, how did you get time alone with the child in order for the sexual contact to occur? (please tick all that apply)

☐ I was the child's sole caregiver

☐ I was supervising the child while others were at home as part of my normal child care duties

☐ I was supervising the child alone whilst other family members were out

☐ I let the child sleep in my bed with me

☐ I was on an unsupervised access visit

☐ I went to the child whilst other family members were asleep

☐ I volunteered to take the child out on an excursion / drive in the car

☐ Other (please specify)______________________________

15. If you were **not** living with the child at the time of the first sexual contact, how was it that you were alone with the child in order for the sexual contact to occur? (please tick all that apply)

☐ I met the child at a public place (e.g. park or shop)

☐ I baby-sat the child for a friend/relative

☐ I met the child through organised recreational activities (e.g. football, scouts)

☐ I worked at the institution where the child lived

☐ The child was visiting my home with their family

☐ The child babysat my child(ren)

☐ I worked at the child's school

☐ I met the child through church activities

☐ I followed the child until they were alone

☐ I broke into the house where the child lived

☐ Other (please specify)______________________________

16. **Immediately before** the first sexual contact occurred what were you doing with the child?

- ☐ I was watching TV with the child
- ☐ I was bathing the child
- ☐ I was in bed with the child
- ☐ I was playing a game with the child
- ☐ I was dressing the child
- ☐ I was taking the child out somewhere
- ☐ I was putting the child to bed
- ☐ I was not doing anything with the child
- ☐ Other (please specify) ______________________________

17. **Immediately before** the sexual contact did any of the following apply? (please tick all that apply)

- ☐ I wanted to have sex with someone
- ☐ I was feeling in a good mood
- ☐ I was feeling lonely
- ☐ I was feeling depressed
- ☐ I was feeling angry
- ☐ I was upset (eg needed comforting)
- ☐ The child was upset (eg needed comforting)
- ☐ I was affected by alcohol
- ☐ I used pornography
- ☐ I was affected by drugs
- ☐ Other (please specify) ______________________________

18. Did you do any of the following to get the child to **take part** in the sexual contact? (please tick all that apply)

- ☐ I offered bribes to the child (e.g. money, lollies etc)
- ☐ I encouraged the child to explore their sexuality (e.g. talking about sex, touching the child sexually)
- ☐ I gave the child love and attention (e.g. saying nice things to the child, playing with the child, being the child's friend)
- ☐ I showed the child pornography
- ☐ I threatened the child with physical force
- ☐ I gave the child alcohol / drugs
- ☐ I used physical force
- ☐ No – I acted on the spur of the moment
- ☐ Other (please specify) ______________________________

19. At the time of the sexual contact how did the child react? (please tick all that apply)

- ☐ The child hit you or pushed you away
- ☐ The child cried
- ☐ The child yelled for help
- ☐ The child did not react
- ☐ The child was frightened
- ☐ The child was sexually aroused
- ☐ The child said no or told you to stop
- ☐ The child was affectionate towards me
- ☐ Other (please specify) ______________________________

20. If the child did react in some way to the sexual contact, what did you do? (please tick all that apply)

- ☐ The child did not react
- ☐ I offered bribes to the child (e.g. money)
- ☐ I encouraged the child to explore their sexuality (e.g., talking about sex, touching them sexually)
- ☐ I gave the child love and attention (e.g., saying nice things about the child)
- ☐ I showed the child pornography
- ☐ I threatened the child with physical force
- ☐ I used physical force
- ☐ I gave the child alcohol / drugs
- ☐ I stopped
- ☐ I kept going with the sexual contact
- ☐ Other (please specify) ____________________

21. If the child reacted **negatively** and you still continued with the sexual contact, please indicate why (please tick all that apply)

- ☐ The child did not react
- ☐ I was too sexually aroused to stop
- ☐ I thought that nobody would see me with the child
- ☐ I was alone with the child; nobody could stop me
- ☐ I did not think that the child would tell anyone about the sexual contact
- ☐ I thought I would not have another opportunity to have sexual contact with the child
- ☐ Other (please specify) ____________________

22. At what time of the day did the first sexual contact occur?

- ☐ 12 midnight – 3 am
- ☐ 3 am – 6 am
- ☐ 6 am – 9 am
- ☐ 9 am – 12 noon
- ☐ 12 noon – 3 pm
- ☐ 3 pm – 6 pm
- ☐ 6 pm – 9 pm
- ☐ 9 pm – 12 midnight

23. How long was the first sexual contact?

- ☐ 0-5 minutes
- ☐ 5-15 minutes
- ☐ 15-30 minutes
- ☐ 30 - 45 minutes
- ☐ 45 – 60 minutes
- ☐ Over 1 hour

24. What did you do sexually when the first sexual contact occurred? (please tick all that apply)

☐ Touched his/her bottom, breasts or genitals
☐ Masturbated the child
☐ Put your mouth on child's genitals
☐ Put your finger in his/her anus or vagina
☐ Tried to or put your penis in child's anus or vagina
☐ Had child touch bottom, breasts or genitals
☐ Had child masturbate you
☐ Had child put his/her mouth on your genitals
☐ Had child put his/her finger in your anus
☐ Had child put his penis in your anus
☐ Had child masturbate themselves

25. If the sexual contact **took place in a home**, was anybody nearby when the sexual contact took place but **did not witness it?** (please tick all that apply)

☐ The sexual contact did not take place in a home
☐ YES, they were in another room in the house
☐ NO, nobody else was at home
☐ YES, they were outside in the yard
☐ YES, they were in the same room
☐ Other (please specify where)_________________
____

26. If you answered YES, to the above question, who was the person(s) who was nearby but **did not witness** the sexual contact taking place? (please tick all that apply)

☐ A child related to you
☐ An adult related to you
☐ A child not related to you but who you knew
☐ An adult not related to you but who you knew
☐ A child who you did not know
☐ An adult who you did not know

27. If the sexual contact **did not take place in a home,** was anybody nearby when the sexual contact took place but **did not witness it?**

☐ The sexual contact took place in a home
☐ YES, approximately 15 – 30 metres away
☐ NO, nobody else was nearby
☐ YES, approximately 30 – 45 metres away
☐ YES, approximately 5 – 15 metres away
☐ Other (please specify where)_________________
____

28. If you answered YES, to the above question, who was the person(s) who was nearby but **did not witness** the sexual contact taking place? (please tick all that apply)

☐ A child related to you
☐ An adult related to you
☐ A child not related to you but who you knew
☐ An adult not related to you but who you knew
☐ A child who you did not know
☐ An adult who you did not know

29. Did someone witness the first sexual contact? (please tick all that apply)

- ☐ NO
- ☐ YES, an adult related to you
- ☐ YES, a child related to you
- ☐ YES, an adult not related to you but who you knew
- ☐ YES, a child not related to you but who you knew
- ☐ YES, an adult who you did not know
- ☐ YES, a child who you did not know

30. If someone witnessed the first sexual contact, what did you do?

- ☐ Nobody witnessed the first sexual contact
- ☐ I **stopped** the sexual contact because the **witness** saw me, although they **did not try** to stop the sexual contact
- ☐ I **stopped** the sexual contact because the **witness** saw me and they **tried** to stop the sexual contact
- ☐ I **continued** with the sexual contact, the **witness** **did not try** to stop the sexual contact
- ☐ I **continued** with the sexual contact, although the **witness** **tried** to stop the sexual contact
- ☐ Other (please specify) ____
____

31. About how many **times** did you have sexual contact with the first child?

☐ 1 time ☐ 2-3 times ☐ 4-5 times ☐ 6-10 times ☐ 11-20 times ☐21-50 times ☐ over 50 times

32. For about **how long** did you continue to have sexual contact with the first child?

☐ 0-1 days ☐ 1-7 days ☐ 1-4 weeks ☐ 1-2 months ☐ 2-6 months ☐ 6-12 months ☐ over 1 year

SECTION H

Now we would like you to think back to the **day following the very first time** you had sexual contact with this child. Please read and respond to each question below.

1. What did you do to avoid getting caught? (please tick all that apply)

☐ Nothing

☐ I threatened the child with physical force if they told

☐ I told the child I would hurt their family or friends if they told

☐ I told the child I would not love them anymore if they told

☐ I told the child I would go to jail if they told

☐ I told the child they would be in trouble if they told

☐ I told the child that their parents would not love them anymore if they told

☐ I bribed the child with gifts if they promised not to tell

☐ Other (please specify) ____

2. Now please think about how you were feeling in the **24 hours after** the first sexual contact. Please circle the number that best describes your feelings at that time.

	Didn't feel this way at all		**Felt this way somewhat**		**Felt this way very strongly**
a) I felt good about myself	1	2	3	4	5
b) I wanted to sink into the floor and disappear	1	2	3	4	5
c) I felt remorse or regret	1	2	3	4	5
d) I felt worthwhile or valuable	1	2	3	4	5
e) I felt small	1	2	3	4	5
f) I felt tension about what I did	1	2	3	4	5
g) I felt capable or useful	1	2	3	4	5
h) I felt like I was a bad person	1	2	3	4	5
i) I could not stop thinking about the thing I did	1	2	3	4	5
j) I felt proud	1	2	3	4	5
k) I felt humiliated or disgraced	1	2	3	4	5
l) I felt like apologizing or confessing to someone	1	2	3	4	5
m) I felt pleased about what I did	1	2	3	4	5
n) I felt worthless or powerless	1	2	3	4	5
o) I felt bad about what I did	1	2	3	4	5
p) I felt sexually excited	1	2	3	4	5

3. After the sexual contact did you: (tick all that apply)

- ☐ Blame someone, or something else (e.g. alcohol), for the offence?
- ☐ Try to make up for it somehow? (please specify ____ ____)
- ☐ Deny you had done anything wrong to yourself ?
- ☐ Deny you had done anything wrong to someone else?
- ☐ Yell at someone, or hit them? Who was this person?____
- ☐ Hide, or isolate yourself from other people?
- ☐ Get drunk or stoned?
- ☐ Punish yourself? (please specify how ____ ____)
- ☐ Think about how much you enjoyed it?
- ☐ Think about doing it again?
- ☐ None of the above.
- ☐ Other (please specify____ ____)

SECTION I

For this section, please read the following statements and indicate how well it describes you by circling the appropriate number using the scale below.

1.	Strongly Disagree	Disagree Somewhat	Agree Somewhat	Strongly Agree
a) I often act on the spur of the moment without stopping to think.	1	2	3	4
b) If things I do upset people, it's their problem, not mine.	1	2	3	4
c) I like to test myself every now and then by doing something a little risky.	1	2	3	4
d) Sometimes I will take a risk just for the fun of it.	1	2	3	4
e) I frequently try to avoid projects that I know will be difficult.	1	2	3	4
f) I sometimes find it exciting to do things for which I might get into trouble.	1	2	3	4
g) I dislike really hard tasks that stretch my ability to the limit.	1	2	3	4
h) If I had a choice, I would almost always rather do something physical than something mental.	1	2	3	4
i) I often do whatever brings me pleasure here and now, even at the cost of some distant goal.	1	2	3	4
j) I almost always feel better when I am on the move than when I am sitting and thinking.	1	2	3	4
k) Excitement and adventure are more important to me than security.	1	2	3	4
l) I try to look out for myself first, even if it means making things difficult for other people.	1	2	3	4
m) I'm more concerned with what happens to me in the short run than in the long run.	1	2	3	4
n) I will try to get things I want even when I know it's causing problems for other people.	1	2	3	4
o) When things get complicated, I tend to quit or withdraw.	1	2	3	4
p) I like to get out and do things more than I like to read or contemplate ideas.	1	2	3	4
q) I'm not very sympathetic to other people when they are having problems.	1	2	3	4
r) I seem to have more energy and a greater need for activity than most other people my age.	1	2	3	4
s) The things in life that are easiest to do bring me the most pleasure.	1	2	3	4
t) I don't devote much thought and effort to preparing for the future.	1	2	3	4
u) I lose my temper pretty easily.	1	2	3	4
v) Often, when I am angry at people, I feel more like hurting them than talking to them about why I am angry.	1	2	3	4
w) When I am really angry, other people should stay away from me.	1	2	3	4
x) When I have a serious disagreement with someone, it's usually hard for me to talk calmly about it without getting upset.	1	2	3	4

2. Please read the statements below and decide whether they apply to you or not by circling either TRUE or FALSE.

a) It is sometimes hard for me to go on with my work if I am not encouraged.	TRUE	FALSE
b) I sometimes feel resentful when I don't get my way.	TRUE	FALSE
c) On a few occasions, I have given up doing something because I thought too little of my ability.	TRUE	FALSE
d) There have been times when I felt like rebelling against people in authority even though I knew they were right.	TRUE	FALSE
e) No matter who I am talking to, I'm always a good listener.	TRUE	FALSE
f) There have been occasions when I took advantage of someone.	TRUE	FALSE
g) I'm always willing to admit it when I make a mistake.	TRUE	FALSE
h) I sometimes try to get even rather than forgive and forget.	TRUE	FALSE
i) I am always courteous, even to people who are disagreeable.	TRUE	FALSE
j) I have never been irked when people expressed ideas very different from my own.	TRUE	FALSE
k) There have been times when I was quite jealous of the good fortune of others.	TRUE	FALSE
l) I am sometimes irritated by people who ask favours of me.	TRUE	FALSE
m) I have never deliberately said something that hurt someone's feelings.	TRUE	FALSE

THANK YOU FOR PARTICIPATING IN THIS RESEARCH

WE APPRECIATE YOUR TIME AND EFFORT

Appendix C
Participant Information Sheet

INFORMATION SHEET

Why is the research being conducted?

You are being approached to take part in a research study. The study is being conducted by a group of researchers from the School of Criminology and Criminal Justice and the School of Psychology, at Griffith University in Brisbane. This study is funded by an Australian Research Council Linkage Grant and Queensland Corrective Services is an industry research partner. The aim of the research is to obtain information about sexual offending and men who are convicted of having committed sexual offences.

What will you be asked to do?

Questionnaire

If you decide to participate, you will be asked to fill out a questionnaire. The questionnaire asks about your personal history and any sexual offences you may have committed. This is likely to take about 1 ½ hours of your time but it might take a little less time or a little more time. The researcher who interviews you will be interested in the things that happened before the offence occurred for which you have been convicted. You will be taken to a private room to complete the questionnaire.

None of the information you provide will be used by anyone outside the research team. This is an independent project – no identifying information will be published or given to anyone outside the research team. If you agree to complete the questionnaire you can sign the consent form that the researcher will provide to you.

Re-administration of Questionnaire

The researchers will also ask your permission to contact you within 6 months of completing the questionnaire and ask you to complete the questionnaire again. The purpose of this is to ensure that the questionnaire that we ask you to fill out reliably records your answers and comments. If you agree to this, you can circle ‘YES’, that you give permission to be contacted again within 6 months. Again, you may also wish to circle ‘NO’, that you do not wish to be re-contacted.

Access to Prison File

The researchers would also like to request permission from you to access your Prison file in order to obtain further information concerning your background and previous offences (if any). The information collected from your file will be entered into an electronic database against your Correctional Information System number in order to conduct analyses to further our understanding of sexual offending. Your name will not be recorded in this database, nor will the researchers be able to identify you through your CIS number. Remember, none of the information obtained from your file will be used by anyone outside

the research team. This is an independent project – no identifying information will be published or given to anyone outside the research team. You can indicate by circling “YES” that you give permission for the researchers to access your Prison file in order to obtain this information. Alternatively, you may wish to circle “NO” indicating that you do not give permission to the researchers to access your prison file.

The expected benefits of the research

There is a lot we do not know about sexual offending. By taking part in the study and providing accurate information, you will be making a very important contribution to our understanding. Our main interest is to obtain information that could be used to try to prevent sexual offences from happening in the first place. This may involve helping men such as yourself to not commit a sexual offence in the first place.

Risks to you

The questions are obviously very personal, and it is possible that answering some of them could upset you. If this happens to you, the researcher who gives you the questionnaire will let you know who you can contact to talk about it. If you are serving a custodial sentence, this person will be the custodial centre psychologist / counsellor. If you are under a community corrections order, your community corrections officer will be available for you to talk to.

As part of this research you will be asked to provide details about previous undetected offences if these have occurred. It is important when answering these questions that you do not provide this information in a way that identifies the person or persons concerned (such as names, dates, specific locations). If you do provide the researchers with information that may identify a person or persons concerned, the researchers may be legally obliged to pass this information to the appropriate authorities.

Your confidentiality

The data collected for this research project will not contain any identifying information that might potentially identify you as a participant in this study nor will any resulting publications or reports. This is an **INDEPENDENT STUDY**. None of the information you provide will be used by anyone outside the research team. Your Correctional Information System number will be stored in a computer database against which the information you provide will be recorded. The Griffith University researchers will not be able to match your CIS number with your name. That is, the researchers will not be able to identify any individual who participates in this study by their name. The research database will only be accessed by the Griffith University researchers. This means that other organisations (including Queensland Corrective services) that have your name and CIS number on record will not have access to this database and will not be able to identify you as having participated in the research study. All information that you wish to provide to us is confidential and will not be discussed outside the research team. There are times however when the researchers will have to tell another organisation about what you have said. This will only occur if you tell us specifically that someone is still being hurt, if your safety is at

risk, or if you provide the researchers with information about a previously undetected offence that identifies the person or persons concerned.

The results of this study may be published in academic journals and presented at conferences. The reports that the researchers provide might contain individual case examples of a particular participant. If this occurs, the researchers will disguise all details that could possibly lead to an individual being identified as having participated in the study. This means that for those participants whose cases have received media attention, the researchers will disguise well known features of their case to prevent this person being identified. All data will be kept in a locked filing cabinet at Griffith University for a period of 5 years before being destroyed.

Your participation is voluntary

Participation in the study is completely voluntary; there will be no penalty if you choose not to participate in the study. Even if you decide to participate, you can withdraw at any time, again without penalty.

Questions / further information

If you have any further questions or require more information regarding this research study please contact the Principal Researcher, Associate Professor Stephen Smallbone, whose contact details you can find at the top of this information sheet.

Feedback to you

Because we will not know who filled out any of the questionnaires, we will not be able to give you feedback about the information you provide. However, if you want to find out about the results of our study, again please feel free to contact the Principal Researcher at the number given below. Please note that we will not be able to report any results to you until about mid-2008.

Associate Professor Stephen Smallbone
School of Criminology & Criminal Justice
Griffith University, Mt Gravatt Campus
(07) 3735 3452; S.Smallbone@griffith.edu.au

Privacy statement

The conduct of this research involves the collection, access and / or use of your identified personal information. The information collected is confidential and will not be disclosed to third parties without your consent, except to meet government, legal or other regulatory requirements. A de-identified copy of this data may be used for other research purposes. However, your anonymity will at all times be safeguarded. For further information consult the University's Privacy Plan at www.gu.edu.au/ua/aa/vc/pp or telephone (07) 3735 5585.

Complaints mechanism

Griffith University conducts research in accordance with the National Statement on Ethical Conduct in Research Involving Humans. If you have any concerns or complaints about the ethical conduct of this research project you should contact the Manager, research Ethics on 3735 5585 or research-ethics@griffith.edu.au

Griffith University thanks you for your consent and participation in this research.

Appendix D
Participant Consent Form

CONSENT FORM

By signing below, I confirm that I have read and understood the information package and in particular have noted that:

Questionnaire

- I understand that my involvement in this research will include the completion of a questionnaire that asks about my background and any sexual offences that I may have committed;

Re-administration of Questionnaire

- I understand that I may indicate by circling 'YES' that I agree to be re-contacted by the researchers within 6 months of completing the questionnaire to fill out the questionnaire again;

Re-administration of Questionnaire

Please indicate below by circling 'YES' or 'NO' whether or not you give permission for the researchers to contact you within 6 months to complete the questionnaire again:

YES (I **give permission** to be recontacted by the researchers within 6 months to complete the questionnaire again)

NO (I **do not** wish to be re-contacted to complete the questionnaire again)

Prison File

- I understand that by circling 'YES' that I am providing consent for the researchers to access my Prison file;
- I understand that none of the information obtained from my file will be used by anyone outside the research team;

Access to Prison File

Please indicate by circling either 'YES' or 'NO' whether or not you wish to provide the researchers with your permission to access your Prison file.

YES (I **give permission** for the researchers to access my Prison file)

NO (I **do not give permission** for the researchers to access my Prison file)

Confidentiality

- I understand that the information I provide is confidential and will not be used to identify me unless I tell the researcher specifically of someone that is in danger or if I am in danger;
- I understand that as part of this research I will be asked to provide details about previous undetected offences if these have occurred.
- I understand that if these have occurred and I provide the researchers with information that could identify the person or persons concerned, the researchers may be legally obliged to pass this information on to the appropriate authorities.
- I understand that my Correctional Information System number will be recorded in the Griffith University researchers' database against the information that I provide;
- I understand that only the Griffith University researchers will have access to this research database and that they will not be able to match my CIS number with my name;
- I understand that any publications or information presented at conferences as a result of this study will not be published or presented in a way that will identify me.

By signing this consent form I am agreeing that:

- I have had any questions answered to my satisfaction;
- I understand the risks involved;
- I understand that there will be no direct benefit to me from my participation in this research;
- I understand that my participation in this research is voluntary;
- I understand that if I have any additional questions I can contact the research team;
- I understand that I am free to withdraw at any time, without comment or penalty;
- I understand that I can contact the Manager, Research Ethics, at Griffith University Human Research Ethics Committee on 3735 5585 (or research-ethics@griffith.edu.au) if I have any concern about the ethical conduct of the project; and
- I agree to participate in the project and complete the questionnaire.

Signed ……………………. / ………….
Participant **(Date)**

Signed…………………….. / ………
Researcher **(Date)**

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