Pathways to Female Sexual Offending: Approach or Avoidance?

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Abstract
This study forms the second part of a larger investigation into the offence process characteristics of female sexual offenders (FSOs). In the first part—documented in Gannon, Rose, and Ward (2008)—we described the development of the Descriptive Model of Female Sexual Offending (DMFSO); an offence process model developed using Grounded Theory methodology to describe the sequence of cognitive, affective, behavioural and contextual factors generating female-perpetrated sexual abuse. The second study described here examines the prevalence of specific pathways characterising the 22 FSOs originally used to develop the DMFSO. Four individuals could not be assigned to a pathway due to lack of information (18% of the overall sample). However, for the remaining 18 participants, three stable pathways to female sexual offending were identified: Explicit Approach offenders (50%, n = 9) who intended to offend, and explicitly planned their offence behaviours accordingly; Directed Avoidant offenders (28%, n = 5), who did not intend to offend, but did so under the direction and coercion of a male accomplice; and Implicit Disorganised offenders (22%, n = 4), who did not intend to offend (i.e., they engaged in minimal planning), but offended impulsively following severe self-regulatory failure. In this paper, we present the core characteristics defining each pathway, their associated demographic features, and discuss potential treatment implications.

Key words: Female Sexual Offender; Pathways; Offence Process; Grounded Theory; Planning
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Pathways to Female Sexual Offending: Approach or Avoidance?

A common conception is that female sexual offenders (FSOs) are forced into offending by men (Longdon, 1993). Research has confirmed that child molesting females are more likely to co-perpetrate than male molesters (see Finkelhor & Williams, 1988; Gannon & Rose, 2008; Solomon, 1992), although distinctions have been made between women who are coerced into offending, and those who play a more active role (male coerced or accompanied FSOs respectively; Mathews, 1987; Syed & Williams, 1996). Clinicians and researchers have also documented examples of women who sexually abuse alone (Adshead, Howett, & Mason, 1994; Mathews, Matthews, & Speltz, 1989; Saradjian, 1996; Syed & Williams, 1996). Mathews and colleagues (Mathews et al., 1989; Matthews, Mathews, & Speltz, 1991) for example, generated two main typological distinctions of lone FSOs using qualitative and quantitative data obtained from 16 FSOs at their clinic. Predisposed FSOs were those who had experienced high levels of sexual abuse. These women typically went on to initiate sexual abuse, usually targeting their own children. Teacher/Lover FSOs were not typified by childhood sexual abuse although they had sometimes experienced emotional or physical abuse. These women typically initiated sexual abuse against adolescent victims, seeing the abuse as adult-like and mutually enjoyable. In addition to these lone offenders, Mathews and colleagues noted the presence of a third co-offender typology; the male coerced FSO (described above) who they described as passive, male dependent, and non-assertive.

Since Mathews and colleagues’ initial works, the research literature has become dominated by clinical observation and research aimed at generating typological groupings of FSOs (Adshead et al., 1994; Nathan & Ward, 2001; Sandler & Freeman, 2007; Syed & Williams, 1996; Vandiver & Kercher, 2004). Such typological distinctions provide broad guidance for treatment professionals, but lack specific detail of each FSO’s offence chain process since many typologies are typically
generated from relatively simple offence characteristics, demographic subtyping, or anecdotal observations.

Within the male sexual offending literature, significant progress has been made examining offence chain characteristics, providing treatment professionals with a useful understanding of the cognitive, affective, behavioural, and contextual factors associated with male perpetrated sexual abuse (Courtney, Rose, & Mason, 2006; Polaschek, Hudson, Ward, & Siegert, 2001; Ward, Louden, Hudson, & Marshall, 1995). Typically, researchers obtain offenders’ offence accounts and analyse each using Grounded Theory techniques (Strauss & Corbin, 1990). Here, phenomena are grouped inductively and then ordered sequentially, to demonstrate the sequence of events generating sexual offending. In the first adaptation of these techniques to sexual offending, Ward et al. (1995) developed a descriptive model of male child molesters’ offending. Intriguingly, however, as well as providing a detailed explanation of the cognitive, affective, behavioural, and contextual factors associated with sexual offending, Ward et al.’s model showed that offenders could be characterised by heterogeneous patterns or pathways to offending. In brief, Ward et al. found two main pathways: avoidant and approach offenders. Avoidant male sexual offenders were characterised by negative affect, ineffective self-regulation (e.g., sexual coping strategies), and little explicit planning. Approach offenders, on the other hand, were characterised by positive affect, effective self regulation (in order to meet antisocial sexual goals), and explicit planning. These diverse pathways to offending appeared to describe two very different offender types (i.e., non paedophilic versus paedophilic respectively) whose offence chain characteristics highlighted—not only the heterogeneous nature of offending—but also the diversity of treatment needs associated with these men (see Ward, Yates, & Long, 2006). Previous to this research, professionals had conceptualised male sexual offending as following only the avoidant pathway; a standpoint commonly referred to as the Relapse Prevention Model (Laws, 1989; Pithers, 1990). Offence chain research with
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rapists (e.g., Polaschek & Hudson, 2004; Polaschek et al., 2001) has also indicated that the Relapse Prevention Model is an oversimplification of the offence pathways taken by male sexual offenders. In their qualitative research with 24 New Zealand rapists, Polaschek and Hudson (2004) found three pathways to rape: (1) men who sought sex to augment positive affect; (2) men who sought sex to alleviate negative affect (the classic avoidance pathway); and (3) men who offended to rectify perceived harm to self.

There is currently very little information available describing the offence process of FSOs. This study represents the second part of a major investigation of FSOs’ offence characteristics. In our first study (Gannon, Rose, & Ward, 2008), we developed a preliminary model of female perpetrated sexual abuse—the Descriptive Model of Female Sexual Offending (DMFSO) — using Grounded Theory Methodology similar to that utilised by Ward et al. (1995). The resulting DMFSO describes the sequence of cognitive, affective, behavioural, and contextual factors generating female perpetrated sexual abuse but does not describe—in detail—the taxonomic offence pathways taken by FSOs. Thus, in our second study described here, we examine the prevalence of specific offence patterns or pathways characterising FSOs, present case studies of each pathway, and discuss associated treatment needs. We begin by reiterating the essential elements of the DMFSO, and the participants involved as outlined in Gannon et al. (2008).

The Descriptive Model of Female Sexual Offending (DMFSO)

The DMFSO was developed from the offence chain narratives of twenty women incarcerated for sexual offences and two women whose file information suggested that their index offence(s) contained a clear sexual element. Offenders were interviewed about their index sexual offence in detail by either the first or second author, with specific attention being paid to cognitive, affective, behavioural, and contextual factors associated with their offending. The resulting interviews (ranging from 26 minutes to 88 minutes, $M$ interview time = 52.55; $SD$ = 15.84) were
subjected to *Grounded Theory analysis* (Strauss & Corbin, 1990); a set of standardised qualitative procedures used to abstract basic line—by—line units of meaning into more abstract categories. Thus, basic units of meaning that are conceptually similar become grouped into more general categories which form the generic building blocks of the model. Further refinements, additions, and validity checks are made to these preliminary groupings throughout analysis, until further additions of offence narratives fit into the existing model categories comfortably. This Grounded Theory analysis was conducted manually. It should be noted that we paid special attention to increasing the validity of the self-report information that we received from women. For example, we became familiar with each woman’s file information before interviewing them so that we could probe them on any inconsistencies (e.g., a woman suggesting that she was male-coerced when file information suggested that she was not). Generally, with the use of file information, we were able to clearly decipher women who really had been coerced and those who had offended of their own volition.

The DMFSO may be subdivided into three main sections (1) *Background Factors*; the offender’s childhood, adolescent, and early adulthood experiences (see Figure 1), (2) *Pre Offence Period*; events occurring up to one year previous to the offending behaviour and immediately prior to the offence period (see Figure 2), and (3) *Offence, and Post Offence Period*; factors occurring at the time of, or immediately following the offence (see Figure 3). In brief, the model begins with *Early Family Environment*, which may be either generally negative or positive. *Abusive Experiences* are the next major category; here FSOs experienced or witnessed either sexual, physical, emotional or no abuse. *Lifestyle Outcomes* refer to late adolescence and may be either maladaptive (i.e., a chaotic and unstable lifestyle) or adaptive (a steady lifestyle characterised by, for example, good vocation). *Deviant peer influences, norms, and social supports* all played a contributory role in whether a FSO displayed a maladaptive or adaptive lifestyle. *Vulnerability Factors* is the next
stage of the model and refers to *maladaptive coping styles, poor social supports, offence supportive personality styles*, and *mental health issues* displayed by FSOs early in adulthood. The next stage of the model characterising FSOs’ early adulthood is *Major Life Stressors*. Here women could be characterised by experiences of domestic abuse (physical, sexual, or emotional), associated grooming, and other life stressors (e.g., death of a loved one).

The preoffence phase of the model begins with *Risk Factors*; affective, cognitive and behavioural factors that appear to place a woman at significant risk of sexually offending (these risk factors are grouped under the same four categories as Vulnerability Factors). Risk factors may suddenly develop post *Major Life Stressors* or may reflect existing *Vulnerability Factors* that become further exacerbated as the result of early *Major Life Stressors*. Associated with these risk factors is an *Unstable Lifestyle*, which characterised all of the FSOs we interviewed and typically occurred around six months pre offence. The following stages, which could occur simultaneously, were *Goal Establishment* and *Goal Relevant Distal Planning*. *Goal Establishment* refers to the apparent primary motivators underlying each FSO’s offence (i.e., sexual gratification, intimacy, or instrumental other [including financial reasons and revenge/humiliation]). Intense fear due to pressure from a co-offender was also found to be prevalent for some women (indicated by the broken line to the left of the model). *Goal Relevant Distal Planning* refers to early planning strategies demonstrated by the offenders. As indicated in Figure 2, these could be implicit (not acknowledged to self), directed (i.e., formulated by a co-offender; typically a coercive male), or explicit (i.e., precisely planned). The broken line to the right indicates those individuals who did not appear to make any plans at this stage. Proximal planning refers to the type of planning that occurred immediately prior to the offence and was
either implicit-disorganised (i.e., impulsive and poorly planned), directed (i.e., formulated by a co-offender; typically a coercive male), or explicit (i.e., precisely planned). Group effects, norms, cognition, affect, and values all played contributory roles during the goal establishment and distal and proximal planning stages of the DMFSO.

The final phase of the model—offence and post offence period—begins with the Offence Approach stage which is closely associated with pre-existing goals and planning styles. Offence Approach describes the type of offence style characterising the offender and was labelled as either Maternal Approach (i.e., a woman who typically coerces, and has some emotional connection with her victim; she will use ineffective strategies to halt sexual offending or makes no attempts to desist offending), Maternal Avoidant (i.e., a woman who takes a caregiving role to the child and wishes to ultimately avoid offending; she will coerce the victim under duress), Aggressive Approach (a woman who approaches the offence aggressively rather than coercively), and Operationalised Approach (a women who views sexual offending as necessary in order to achieve a higher order goal such as economic gain). Offence Behaviour refers to the enactment of the sexual offence. Both this, and the Offence Approach were affected by the contributory factors of cognition, affect, sexual arousal, and substance intoxication. Victim Response refers to the victim’s verbal and behavioural response to the abuse which may either be engaged (appearing to partake in the abuse), submissive (passively experiencing the abuse) or resistant (e.g., asking the offender to stop or struggling). Finally, Offence Consequences refers to the affective, cognitive, and behavioural responses evidenced by offenders immediately following the abuse. Affect was typically positive or negative in nature (e.g., excitement or shame respectively), cognition was typically offence supportive or self deceptive (e.g., telling oneself that the offence isn’t really so bad, or pushing negative
thoughts to one side respectively), and \textit{behavioural} refers to whether the participant behaved in a controlled or an uncontrolled manner following the abuse. A controlled response was often the extension of an explicitly executed plan (e.g., tasks implemented to avoid detection) while an uncontrolled response was typically passive in nature (e.g., doing nothing active to either avoid detection or avoid instances of further offending).

The DMFSO is the only offence chain model available—to our knowledge—describing the various factors signifying risk-heightening phenomenon for FSOs. However, it has not yet been subjected to a thorough examination of the pathways or offence patterns taken by FSOs. In other words, we currently have no understanding of the offence patterns typically exhibited by FSO, or how these compare to the approach and avoidant pathways identified in male sexual offenders. Thus, the main aim of this study was to re-examine the DMFSO to investigate the prevalence of specific offence pathways characterising FSOs. In addition to detailing offence pathways and their associated demographic characteristics, we aim to present case studies of each pathway, and discuss attendant treatment needs.

Method

Participants

Our analysis is based upon the interview data provided from the same 22 FSOs reported in Gannon et al. (2008). Women were defined as sexual offenders if they had ever committed an offence under the Sexual Offences Act (2003). There were two exceptions to this. First, if women were selling their own sexual services we excluded them from participation and did not regard them as sexual offenders. However, we did include women in our sample who had been convicted of sex
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trafficking (buying and selling) children or vulnerable persons. Second, we included two women who had not been convicted of an offence under the Sexual Offences Act, but whose file information demonstrated a strong sexual element to their crime (i.e., they were being referred for sexual offender treatment services). These FSOs were asked to describe their index offence and life history—in detail—to either the first or second author. In terms of demographic characteristics, FSOs’ ages at the time of interview ranged from 21 to 78 ($M = 37.05; SD = 12.89$), and their mean estimated IQ score, measured via the Wechsler Abbreviated Scale of Intelligence™ was 98 ($SD = 17.13; \text{range 71 to 126}^1$). The sentences participants were serving ranged from 4 months to indeterminate ($M = 5.68 \text{ years;} SD = 4.47$) and most participants were white (91%; $n = 20$). No FSO had previous convictions for sexual offences. According to index offence records, however, participants had offended against 38 victims in total (13 male, 25 female). The majority of victims were children (76%; $n = 29$). Just under half of victims (47%; $n = 18$) were related to their offender through blood or marriage (i.e., the offender was a mother, aunt, or step relative), the rest were acquainted with their victims through caretaking responsibilities, work, or via their community. A good deal of the FSOs had co-perpetrated (23%, $n = 5$, were male coerced, 27%, $n = 6$, were male accompanied, and 23%, $n = 5$, offended in groups of three or more people according to file information). A further 27% ($n = 6$) had offended alone$^2$ (one against an adult victim, two against teenagers, and three against pre-pubescent children). Eight participants either denied that the offences had occurred or acknowledged that the offences had taken place but denied any significant role in the offence. Four of these FSOs did not provide enough interview

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$^1$ IQ estimates were unavailable for three participants.

$^2$ This figure is extremely low compared to male sexual abusers. For example, Ward et al.’s (1995) model of the male child molestation process was developed from 26 male child molesters and none of these had co-offended.
information for us to track them completely through the DMFSO\(^3\) (our treatment of these cases is discussed later).

**Results**

Pathway Identification

The main aim of this study was to closely examine each FSO’s progression throughout the DMFSO to identify any specific patterns or pathways taken by FSOs. Towards this aim, two raters (the first and second authors) independently examined each offence narrative and classified the progression of each FSO throughout the DMFSO to see if there was evidence of offender “subtypes” who progressed through the model via discrete pathways. Very quickly, we found that phase 1 of our model—Background—failed to highlight any discrete pathways of women. In brief, the vast majority of FSOs had experienced negative *Early Family Environments* (73%, \(n = 16\)), *Abusive Experiences* (77%, \(n = 17\)) or both (73%, \(n = 16\)) and over three quarters of women evidenced one or more *Vulnerability Factors* during early adulthood (77%, \(n = 17\)). In other words, the homogeneity of dysfunction we identified in these FSOs appeared only to reflect the severity and frequency of developmental abuse typically noted in FSOs (Allen, 1991; Mathews, Hunter, & Vuz, 1997; Miccio-Fonseca, 2000; Pothast & Allen, 1994) and was not obviously linked to FSOs’ offence styles.

Independent inter-rater analysis did, however, highlight distinct pathways characterising the pre offence, and offence stage of the model. The heterogeneous nature of our sample was easily captured via three stable offence patterns; no other patterns throughout the model were evident. The three offence patterns were generally distinguishable using the *Goal Establishment*, *Distal* and *Proximal Planning*, and *Offence Approach* categories of the DMFSO (see interrater reliability figures reported below). In the descriptions that follow, we describe each FSO subtype according to these defining categories, paying particular attention to the

\(^3\) Note that participants from different pathways did not appear to differ meaningfully on the time it took them to tell us their “story.”
presence of contributory factors (e.g., affect, cognitions, and values) across and within each pathway. For each pathway description, we will provide a detailed case study description (see Figure 4), including elements that are not necessarily distinguishable across pathways (e.g., background characteristics). Our aim is to provide real life examples of FSO pathways, rather than simplistic and often unrealistic case examples stripped of relevant context. We have, however, amended some details about the offenders, their victims, and their offences to protect the identity of our participants. Finally, we examine possible differences between the pathways using basic demographic comparisons (See Table 1). Given the numbers of individuals involved, however, such information will be provided descriptively and should be viewed cautiously by readers.

**Interrater Reliability**

Interrater reliability for overall pathway allocation was excellent (Kappa = 0.91, \( p < .001 \), 95% CI 0.74, 1.0\(^4\)). Interrater reliabilities were also examined for each of the categories contained within the pathways (i.e., goal establishment, distal and proximal planning, and offence approach) irrespective of pathway membership. The reliabilities were as follows: Goal Establishment; Kappa = .86, \( p < .001 \), 95% CI (0.67, 1.0), Distal Planning; Kappa = .70, \( p < .001 \), 95% CI (0.45, 0.95), Proximal Planning; Kappa = .82, \( p < .001 \), 95% CI (0.59, 1.0), Offence Approach; Kappa = .76, \( p < .001 \), 95% CI (0.51, 1.0). These values are substantial (.60 - .79) or outstanding (> .80) according to Landis and Koch (1977). All disagreements between coders were resolved following discussion.

Final Pathway Descriptions

*Unclassifiable Individuals* (F6, F27, F30, F31)

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\(^4\) In cases where offenders displayed more than one goal or planning style, the most prominent goal or planning style was selected by each independent rater for the purpose of this analysis.
As previously noted, a small number of individuals—typically deniers—did not provide enough information about the stages associated with their offending behaviour for us to assign them to a pathway (18% of the total sample; \( n = 4 \)). All of these individuals were either solo (\( n = 2 \)) or male accompanied child molesters (\( n = 2 \)) who did not differ from FSOs assigned to a pathway in any notable way.

**Pathway 1: Explicit Approach** (F1, F2, F12, F14, F16, F17, F21, F26, F36)

Explicit Approach offenders comprised 50% (\( n = 9 \)) of the remaining classifiable sample (see Figure 4 for descriptive case studies). The goals evidenced by these women were various and included sexual gratification, intimacy, revenge/humiliation, and financial motivations. Offences following this pathway were committed by women who abused children alone or in the presence of a male, women who sex trafficked, and women who offended against adults either in a group or alone. Distal planning tended to be explicitly preorganised (e.g., inviting a child to the house or preparing an extensive kidnapping plan for future implementation) as did the proximal planning elements of the offence (i.e., explicit-precise planning). The women characterised by this pathway generally wished to offend (hence the term *Explicit Approach*) and approached their offence via a number of offence styles (maternal, aggressive, or operationalised approach). Maternal offenders were child abusers who approached the offence coercively rather than aggressively. Aggressive approach offenders typically used aggression in their offences. Women who offended against children within this pathway tended to be characterised by cognitions relating to children being dominant, sexual and adult-like, and were likely to experience some positive affect around the time of their offence. Women who offended against adults tended to be characterised by strong values concerning morality, and acceptability of behaviours (e.g., infidelity), experienced cognitions associated with entitlement and retribution (e.g., some people need to be taught a lesson), and strong positive affect in anticipation of—and satisfaction—regarding their sexually offensive behaviour. A
small number of offenders approached their offence operationally, seeing the offence as necessary to obtain their non-sexual financial goal (i.e., sex traffickers). The variety of offenders characterised by this pathway are unified by their wish to pursue offending rather than avoid it, and, as such can generally be viewed as effective regulators. However, because of the variety of offenders unified by this pathway, a theoretically helpful division that can be made is Explicit Approach Child FSOs who offend against children (F2, 12, 17, 26) and Explicit Approach Adult FSOs who offend against adults (F1, 14, 16, 21, 36). In fact, our examination of basic demographic and offence history information supported this distinction (see Table 1). In terms of previous offence history, we found that Explicit Approach Adult offenders’ total number of previous recorded non sexual offences ranged from 0 to 72 ($M = 12.06$, 5% trimmed mean, $SD = 31.64$), while Explicit Approach Child offenders’ previous recorded non sexual offences ranged from 0 to 5 ($M = 1.25$, $SD = 2.5$). Thus, in relation to pathway 2 and pathway 3 offenders described later, Explicit Approach Adult appeared the most antisocial of all, and Explicit Approach Child were one of the less generally antisocial groups. However, Explicit Approach Child offenders had received the greatest number of counts of sexual offending against a child victim ($M = 13.75$, $SD = 11.96$) relative to Pathway 2: Directed Avoidant ($M = 9.8$, $SD = 5.45$) and Pathway 3: Implicit Disorganised individuals ($M = 2.25$, $SD = 2.06$). In terms of victim gender, Explicit Approach Adult offenders typically targeted adult women (only 1 of the 7 total victims was male) and victims were typically similar in age to the offender (victim ages ranged from 16 to 20 years). The median length of sexual offending associated with Explicit Approach Adult offenders was the shortest of all pathways at 1 day ($SD = 556.16$). Explicit Approach Child offenders appeared to target females (only 2 out of 7 total victims were male), of a variety of age ranges (victim ages ranged from 3 to 16 years). Their median length of sexual offending was the second longest of the pathway groupings at 715 days ($SD = 587.61$). Note, however, that it is possible that length of offending is also an artefact of victim access.
Thus, readers should bare this in mind when assessing these reported differences between groups.

Explicit Approach FSOs are likely to have a number of treatment needs associated with the goals they aim to pursue. Explicit Approach Child FSOs who are pursuing intimacy and sexual gratification may well require work around deviant sexual interests, healthy intimate relationships, sexual norms, and offence supportive cognitions. Explicit Approach Adult FSOs who abuse for humiliation purposes will require a somewhat different focus, examining aggressive norms, and beliefs and values regarding entitlement and retribution. Furthermore, these women are likely to require some substantial treatment surrounding antisocial characteristics and their criminal versatility. Finally, Explicit Approach Adult FSOs who sex traffic are likely to require education surrounding sexual norms, and social problem solving (to ensure they are able to obtain financial remuneration in more pro social ways). They may also require some substantial work regarding their beliefs about “consent” and coercion. Relevant work could revolve around questions such as “is it possible for under age individuals to “consent” to their own sex trafficking?” and “what issues may increase the likelihood of a vulnerable person consenting to their own sex trafficking?”

Pathway 2: Directed Avoidant (F11, F19, F25, F29, F32)

The Directed Avoidant pathway accounted for over a quarter of women who were classifiable (28%; n = 5) and is characterised by women who have been explicitly directed to commit their offence(s) by a coercive male (see case study presented in Figure 4). In other words, these FSOs ultimately wish to avoid sexual offending (hence the label Directed Avoidant). Typically, these women are characterised by passive or dependent personality traits which appear to result from many years of physical and/or emotional abuse at the hands of their co-offender or previous relationships. These women were directly groomed by a co-offender either
during an abusive personal relationship, or directly following one. Women following this pathway described early directive planning by their partner and intimacy or fear related goals. They also reported cognitions relating to nature of harm (e.g., “She’s too young to remember this”), strong negative affect (e.g., anxiety), and strong values relating to intimacy and relationships (e.g., it is impossible to be happy or feel emotionally fulfilled if you are not in a relationship with a man). Most notable, perhaps, was the importance women placed upon men’s opinions in relation to their own. Some women, for example, would doubt their own thoughts and feelings if their coercive male partner challenged or contradicted these experiences. Women within the Directed Avoidant pathway typically experienced directed proximal planning in which men played a crucial if not sole part in the planning stages immediately prior to the offence itself. However, such women could shift towards exhibiting explicit type planning during subsequent sexual offences (e.g., to please their partner, or simply because they had learned the behavioural script for preparing sexual offences). Women characterised by this pathway typically displayed an offence approach that was maternal avoidant. Interestingly, when we examined the previous offence histories of these women, we found that—relative to FSOs from other pathways—the Directed Avoidant women held the fewest number of previous non-sexual offences (i.e., these women had no previous non-sexual offences on their records). In terms of victim sex, like pathway 1 offenders, Directed Avoidant FSOs appeared most likely to target female child victims (only 2 out of 9 total victims were male). Further, relative to other pathways, Directed Avoidant FSOs always offended against their own offspring, beginning the offence behaviours when the children were very young (age range of victims was 2-15 years $M = 8.25$ years). These women also offended for the most extended period of time (median length of offending = 1440 days, $SD = 1119.42$). Although victim characteristics may well reflect the preferences of the coercive males who directed the abuse, it is exceptionally worrying that such women were coerced into committing such serious offences, against their own
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children, for lengthy periods of time, often beginning when the children were exceptionally young. In terms of treatment, women from this pathway are likely to benefit from therapeutic work associating their own abusive experiences to their self esteem, development of coping strategies, and beliefs and values associated with adult intimate relationships (e.g., avoidance, fear, dependency). Such women are also likely to require substantial education regarding risk awareness, and recognition of the signs associated with men who target both them and their children. We also found that the majority of these women experienced mental health difficulties; a factor that is also likely to require attention during treatment.

[Place Figure 4 and Table 1 about here]

Pathway 3: Implicit Disorganised (F5, F13, F15, F35)

Implicit Disorganised offenders made up 22% of the classifiable sample (see Figure 4 for associated case studies). The goals evidenced by these offenders were various and included intimacy, sexual, or instrumental goals. However, unlike the other previously categorised offenders, women in this pathway were characterised by either a lack of planning or implicit planning at the distal stage. Further, like Directed Avoidant individuals, these women could not be characterised as wishing to offend (as evidenced by their lack of systematic planning). For example, one participant had not even thought about the victim or offence-relevant information in the days leading up to the offence, while another described wanting to “test” herself with teenage boys to see if she had paedophilic interests (i.e., implicit planning). The immediate planning associated with Implicit Disorganised offenders tended to be implicit disorganised. In other words, it appears that these women were all unable to self regulate themselves in the moments preceding the offence often acting in an impulsive, disorganised fashion. For example, one participant, who group offended against two adults described sudden and impulsive aggression towards their victims.
(i.e., *Aggressive Offence Approach*) in which other offence related behaviours (e.g., directing the adults to perform sexual acts upon one another) occurred hastily, and without explicit planning (e.g., “We should do to them, what they made the little kids do”). The cognitions and affect experienced by individuals within this pathway were various; for revenge goal offenders strong negative affect appeared to drive the offence process, while for women who offended against children, the offence was sometimes associated with fleeting positive affect. Implicit Disorganised FSOs had offended against seven victims in total, but—in contrast to the other pathways—only two of these victims were female. Further, when they targeted children, they appeared to target slightly older children than those targeted by Pathway 1: Explicit Approach Child offenders or Pathway 2: Directed Avoidant offenders (Implicit Disorganised victims’ ages ranged from 10-19 years) and offended for relatively short periods of time (Median length of sexual offending was 4 days, SD = 29.14; the second shortest of all the groups). Implicit Disorganised FSOs had also been convicted of the fewest counts of sexual offending against a child ($M = 2.25, SD = 2.06$) relative to Explicit Approach Child and Directed Avoidant FSOs. Interestingly, when we examined the previous non sexual offence histories of these women, we found that relative to Pathway 1: Explicit-Approach Child and Pathway 2: Directed Avoidant FSOs, who held total previous offences of 5 and 0 respectively, Implicit Disorganised FSOs had 12 total previous offences on file (the second highest total of previous non sexual offences following Explicit Approach Adult FSOs). Of course, it is possible that this number is misleading since only four individuals make up the Implicit Disorganised group. It is also possible, however, that this relatively large number of previous non-sexual offences is simply an indicator of Implicit Disorganised FSOs’ global inability to self-regulate themselves. Clearly further FSOs are required in order to specify the potential treatment needs of women within this pathway. However, we anticipate that the women within this pathway are all unified by self regulatory failure, and—as such—will require extensive work on this aspect.
Discussion

Our pathway analysis of the DMFSO has highlighted three main pathways that FSOs take to their offending: (1) Explicit Approach, (2) Directed Avoidant, and (3) Implicit Disorganised. In other words, although FSOs—like males—display extremely heterogeneous offence behaviours, these behaviours may be usefully summarised by common offence pathways characterised by relatively distinct planning behaviours, offence styles, and motivational goals. In the section that follows, we briefly reiterate each pathway and discuss defining characteristics, comparing and contrasting each with current literature on male sexual offenders. We also discuss the treatment implications of each pathway, limitations of our research, and ideas for future research.

Pathway 1: Explicit Approach FSOs accounted for the largest group of FSOs. Put another way, 50% of our classifiable sample made no explicit efforts to avoid sexually offending, and often went out of their way to explicitly plan victim encounters, and specifically groom their victims. Explicit Approach FSOs who offended against children showed some similarities to the male approach pathway child molesters described by Ward et al. (1995). Thus, Explicit Approach FSOs who offended against children generally wished to offend sexually, were able to effectively plan such encounters, and experienced significant positive effect prior to, and as a result of such encounters. Ward et al. (1995) described their male approach pathway molesters as resembling prototypical paedophilic offending profiles. Our female approach pathway molesters appear similar since they appeared typically to be seeking either sexual gratification or intimacy through their sexual encounters with children. Explicit Approach FSOs who offended against adults, on the other hand, did not appear to be characterised by sexual gratification or intimacy related goals. Instead, we found motivations typically more prevalent in male rapists and generally antisocial offenders (see Gannon, Ward, Beech, & Fisher, 2007; Polaschek & Hudson, 2004), such as revenge, humiliation, and financial goals. Explicit Approach adult
FSOs experienced strong positive affect associated with their offending and also strong motivating values and beliefs surrounding the acceptability and morality of others’ actions (e.g., infidelity, child sexual abuse).

All of the offenders characterised by Explicit Approach offence styles appear strongly motivated to offend as a result of problematic goals and associated cognitions and values. Thus, these women are unlikely to require extensive work on their self-regulatory coping styles, since their offence style appears to reflect effective regulation (via explicit distal and proximal planning) in the service of higher order motivating goals. In Ward et al.’s (1995) work with male molesters, they noted a tendency for approach goal offenders to hold positive affect relating to their early experiences and current lifestyles. However, unlike male sexual offenders, we found overwhelming evidence of negative developmental experiences, unstable lifestyle indicators and negative affect six months prior to offending. We believe that these negative features may well have played an important role in priming goal development. In other words, unstable and impoverished lifestyles may have played a major role in activating goals aimed at alleviating boredom, lack of social stimulation, and meeting sexual needs. Thus, a major concern for professionals aiming to rehabilitate Explicit Approach FSOs should be the offender’s unique motivating goals, paying specific attention to how these goals developed, and the underlying affective, cognitive and value components supporting such goals. For Explicit Approach FSOs who target children, core underlying goals are likely to mirror those identified in males (i.e., sexual gratification and intimacy). However, the contributory factors which lead to goal development, appear subtly different to those documented in men. An apparent contributory factor for women, for example, is not only the experience of childhood abuse (which is likely to encourage inappropriate sexual norms, and cognitions), but the extension of such abuse into adulthood, in the form of domestic abuse at the hands of males. For these women, then, who may have developed life-long inappropriate sexual norms, treatment will require extensive
work examining the development of such norms, the activation of such norms, and the development of methods required to achieve satisfying sexual and intimate relationships with appropriate partners. Subcategories of women driven by sexual gratification—akin to male molesters—are also likely to require sexual arousal re-training. Finally, treating professionals should remain mindful that many Explicit Approach Child offenders target children in the company of a male; and are not necessarily coerced into the offending by that male.

Explicit Approach FSOs who target adults will require similar emphasis upon their underlying goals and associated constructs. However, because these women lead fairly antisocial lifestyles and offend in order to humiliate victims they believe are deserving of such treatment, these offenders are unlikely to view their offending as wrong. Such women—akin to male violent offenders (see Cooper, 2006; Polaschek, Calvert, & Gannon, in press)—are likely to be driven by extremely strong values and cognitions concerning the acceptability of others’ behaviours, and are likely to hold strong beliefs of entitlement concerning their “rights” to punish others for such transgressions. Such women will require extensive work investigating the development and function of their driving values and cognitions, the role of deviant peer influences on their offending, and their ability to seek positive affect in other, more prosocial ways (see The Good Lives Model; Ward & Gannon, 2006). In general, then, treatment for these women is likely to centre less around conventional sexual offender concepts, and more upon managing their value perceptions and future resolutions of perceived value violations; especially perceived violations at the hands of peer-related women.

Pathway 2: Directed Avoidant FSOs accounted for the second largest group of FSOs. Thus, in stark contrast to Explicit Approach FSOs, over a quarter of women in our classifiable sample (28%; \( n = 5 \)) were characterised by intentions to avoid sexual offending but offended following extreme coercion from sexual offending males. The most interesting aspect of this identified pathway is that it bears no resemblance to
male sexual offending patterns (see Polaschek & Hudson, 2004; Ward et al., 1995); seemingly because male sexual offenders are not commonly groomed by other men, or intimate partners. Women who fitted the Directed Avoidant offending pattern in the DMFSO were characterised by passive or dependant personality traits (see Mathews et al., 1989; Matthews et al., 1991), and were directly groomed by a co-offender either throughout an abusive relationship, or directly following one.

Directed Avoidant FSOs strongly valued intimacy, and would do anything to maintain their male partner’s support, including abusing their own children. Such women were very impressionable, appearing to view men as extremely powerful and all-knowing forces. These women were also characterised by extremely dysfunctional coping styles, and lacked assertiveness. Because Directed Avoidant women were often socially isolated and dependent individuals who offended to obtain intimacy with their partner and/or child, they appeared often to deceive themselves that offending behaviour was acceptable. For example, they appeared highly susceptible to assimilating and accommodating offence supportive cognitions provided by their partners, and began using similar cognitions to facilitate their offending against their own, very young children. Such thinking patterns also appeared to become exacerbated when these women failed to detect any extreme or obvious discomfort from the very young children they abused. For these FSOs, treatment should focus upon their traits of passivity, and dependency, and their dysfunctional preoccupation with men in order to achieve intimacy. Such women would benefit from assertiveness and problem skills training, education to improve awareness surrounding male grooming strategies, and restructuring of their relational constructions of male versus female characteristics (i.e., powerful versus powerless respectively). Some significant probing will also need to be conducted by treatment professionals to assess whether such women—who have typically been offending for months or years—have begun to develop any approach goal behaviours or sexual arousal towards child-related sexual activity. We found that such women may begin to
develop offence styles similar to Explicit Approach offenders given enough rehearsal and this is likely to be characterised by lone offending while the co-offending male is absent from the household.

The final pathway we noted—Pathway 3: Implicit Disorganised FSOs—accounted for the smallest number of classifiable FSOs (22%; \( n = 4 \)). Of all the pathways, this is the only one which appeared to resemble the original male sexual offender avoidance pathway described by the Relapse Prevention Model (Laws, 1989; Pithers, 1990), Ward et al.’s (1995) offence chain research with child molesters, and Polaschek and Hudson’s (2004) examination of rapists. Like male avoidance pathway offenders then, Implicit Disorganised FSOs exhibited severe self-regulatory deficits characterised by sudden and impulsive offence-related behaviours towards their victims. Unlike Explicit Approach pathway offenders, such women showed very limited evidence of planning, and could not generally be characterised as intending to offend, appearing to lose control over their behaviours in the moments preceding the offence. Unlike avoidant male sexual offenders, however, it is unclear whether the FSOs characterised by this pathway held any sexual fixations (e.g., using sex as a coping strategy), and in fact, we found evidence that some women characterised by this pathway offended in order to obtain revenge, or to secure intimacy-related goals.

Whatever the driving goals underlying Implicit Disorganised offending are, treatment for this pathway is likely to require a significant focus upon equipping offenders with the skills to cope with major life stressors, and strong negative affect. Most helpful, perhaps, would be relapse awareness work with such offenders, to heighten their awareness of potential risky thoughts, affect, and situations. Nevertheless, because of the small number of women comprising this pathway, further pathway validation work is necessary before more specific treatment needs can be established.

Although the pathways we have identified hold treatment potential, there are some unavoidable limitations which threaten both the validity and reliability of our identified pathways. One potential limitation was our reliance upon the qualitative
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self-reported information originally used to develop the DMFSO (see also Gannon et al., 2008). Clearly, self-reported narratives of offending, although often used in clinical practice, are highly susceptible to memory distortions and impression management strategies. Nevertheless, we attempted to minimise these potential validity threats during our initial data collection through (1) checking the veracity of FSOs’ self-reported information by probing the offender regarding inconsistencies between their narrative and file information, and (2) dropping information from the original analysis that varied significantly from file information. These techniques ultimately strengthened the validity of our original DMFSO model, and subsequently, the associated pathways identified in this paper. In particular, these techniques ensured that we clearly discriminated between those women who were coerced and directed by males (Directed Avoidant) and those who were male accompanied but who offended of their own volition.

A second issue relates to our sample size. Although we managed to recruit 22 FSOs, which represents almost half of the population of imprisoned FSOs in England and Wales (45 by December 2007; National Offender Management Service, 2007), inevitably some FSO offenders were underrepresented. Most notably, there were relatively few women who offended alone, or who offended against adults. In addition to this issue, we were unable to assign four of our 22 women to an offending pathway because their interviews did not contain enough information about their offences. These women were either solo or co-offenders and in all of these cases, the problem was one of denial. In other words, these FSOs would happily talk in great lengths about their childhood, and of their lifestyles before they were “falsely accused” but would flatly refuse to talk about their offending. Given the small numbers of FSOs we had originally been able to recruit, this gap in our data is frustrating, but is an all too common reality for researchers investigating sexual offending. A related sample-size limitation was our inability to use quantitative statistical procedures to compare core demographic or offence features across the differing pathways. Clearly, there are
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some theoretically important hypotheses that we have touched upon which require
future exploration and validation. There are also further hypotheses concerning
psychological and risk related characteristics that could be tested across our
identified pathways in future given enough data. In fact, a core strength of the
preliminary pathways we have developed is their ability to expand, and to
accommodate or become further modified as a result of addition FSO data. Thus,
future validation work is required, and should be completed to ensure that the
preliminary offence pathways we have developed really do capture the essence of
FSOs’ offence styles.

A final limitation we would like to highlight is the possibility that labels such
as Directed Avoidant may become used by researchers and professionals as static
structures for guiding treatment. While such labels characterise the offence styles
FSOs typically displayed during their offences, it is important to note that offending
characteristics and pathways are not static, but are flexible, and are likely to change
and become modified both within and across offences. Thus, it is important that
treating professionals remain flexible in their thinking, and do not become
constrained by the preliminary pathways identified here; offenders will not
consistently fit into artificial offending categories, however appealing it is to us as
psychologists.

In summary, the pathways to offending that we have noted in FSOs
represent—to our knowledge—the very first attempt to document patterns in FSOs’
offence behaviours. Interestingly, we found that our FSO sample, like males,
evidenced both approach and avoidant pathways to their sexual offending, although
the specific goals, values, and cognitions driving each pathway were subtly different
to those commonly described in men. Such pathway descriptions have become
invaluable to practitioners working with male sexual offenders since they enable the
effective organisation and tailoring of treatment modules (see Ward et al., 2006).
While we recognise that the results of our pathway analysis with FSOs are clearly just
the beginning, we hope that researchers and practitioners will further validate and amend these pathways so that professionals working with FSOs can begin to finally use the scientist-practitioner model in their work with FSOs.
References


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Please note that the views reflected within this manuscript do not necessarily reflect those of HM Prison Service.
Figure 1. Background Factors

Early Family Environment

Negative  Positive

Abusive Experiences

Sexual  Physical  Emotional

Lifestyle Outcomes

Vulnerability Factors

Maladaptive  Adaptive

Maladaptive Coping Style  Personality Issues  Poor Mental Health

Impoverished Social Support  Social Support

Major Life Stressors

Physical, Emotional Abuse  Other

Grooming

No Abuse

Low Vulnerability

Deviant Peer Influences  Sexual and Violent Norms

Physical, Sexual Exploitation

Norms
Female Sexual Offending

Risk Factors

- Personality Issues
- Poor Mental Health
- Impoverished Social Support
- Maladaptive Coping Style

Unstable Lifestyle with Negative Affect

6 months prior to offence

Goal Establishment Motivations

- Sexual Gratification
- Intimacy
- Instrumental other

Goal Relevant – Distal Planning

- Implicit
- Directed
- Explicit

Proximal Planning

- Implicit - Disorganised
- Directed
- Explicit - Precise

Figure 2. Pre Offence Period

Fear

Group Effects
Norms
Cognition/Affect
Values

Financial
Revenge/Humiliation

No Planning

32
Figure 3. Offence and Post Offence Period

- Offence Approach
  - Maternal Approach
  - Maternal Avoidant
  - Aggressive Approach
  - Operationalised Approach

- Offence Behavior
  - Cognition
  - Affect
  - Sexual
  - Arousal
  - Alcohol

- Victim Response
  - Engaged
  - Submissive
  - Resistant

- Offence Consequences
  - Affective
  - Cognitive
  - Behavioral

- Offence Outcome
  - Community Response
  - Disclosure
  - Arrest
**Female Sexual Offending**

**Pathway 1: Explicit Approach Child Case Study: Ms A**

Ms A is a 35 year old woman who sexually assaulted her own two children (aged 4 and 6 years respectively) alongside her husband over a period of 18 months. Ms A was brought up by foster parents who strongly favoured their own biological child (Negative Early Family Environment), was physically abused by her mother (Physically Abusive Experiences), and sexually abused by a family member over a prolonged period of time (Sexually Abusive Experiences). Ms A emerged from this environment having developed a series of norms surrounding unusual sexual behaviours that she did not realise were atypical. She also began hanging around with deviant peers during her late teenage years and received various convictions for theft and fraud-related activities (Maladaptive Lifestyle Outcome). By early adulthood, Ms A had begun to rely on substances for coping, and had blurred boundaries concerning appropriate sexual relations (Vulnerability Factors—Coping and Personality [norms]). By the time Ms A was 21 years of age she had two children and was expecting another child. Ms A was married, but her husband was not the father of any of her children since they had a turbulent relationship characterised by numerous break-ups. Ms A’s husband was emotionally abusive during their relationship (Major Life Stressor – Domestic Abuse). Approximately six months prior to the offences, Ms A’s lifestyle was unstable; she was trying to care for her young children alone because her husband had left and she was drinking (Unstable Lifestyle). Thus, similarly to earlier in her life, Ms A was relying on alcohol to cope, and held poor sexual boundaries (Risk Factors – Coping and Personality [norms]). Ms A appeared to hold two main goals or motivations for her abusive behaviour which were associated with her previous experiences of abuse and blurred sexual boundaries. First, she found the thought of watching her estranged husband interact sexually with her children arousing (Goal Establishment—Sexual Gratification), and second, she felt that there was nothing wrong with showing love to her children sexually (Goal Establishment—Intimacy). Thus, Ms A experienced positive affect in anticipation of the abuse, and felt that her children enjoyed the interactions (cognitions). Ms A, in the company of her husband—whom she briefly unified with—explicitly planned the offences on numerous occasions, both distally and proximally (Explicit Distal and Proximal planning). Thus, Ms A made no efforts to avoid the offending behaviour (Offence Approach — Maternal Approach) and would often drink alcohol around the offences and become so highly sexually aroused that she ignored her young daughters’ resistance (Victim Response). In short, Ms A believed post offence that because her daughter had engaged during previous non intrusive sexual abuse (i.e., posing for indecent photographs), more serious intrusive behaviours would be equally unharmful (Offence Consequences –Cognitions). Thus, Ms A generally responded to the abuse positively (Offence Consequences – Affective) and made no efforts to stop the abuse (Offence Consequences – Behavioural).

**Pathway 1: Explicit Approach Adult Case Study: Ms B**

Ms B is a 23 year old woman who physically assaulted an adult female; her offence contained sexual elements. Ms B was brought up by strictly religious parents, with vastly differing parenting styles (Negative Early Family Environment). She also experienced excessive physical punishment from her mother on a regular basis (Physically Abusive Experiences). Ms B’s mother told her that she beat her because she loved her and by her late teens, Ms B appeared to have developed anti-social norms supporting violence. Ms B subsequently left home and began hanging around with friends who shoplifted; her lifestyle was fairly unstable characterised by minor criminal activity, and sporadic vocational efforts (Maladaptive Lifestyle Outcome). By early adulthood, then, Ms B appeared to be exhibiting an aggressive problem solving style evidenced by her aggressive interactions with an intimate partner (Vulnerability Factors—Personality). When Ms B was 19 she became the victim of physical domestic violence very soon after the birth of her son (Major Life Stressors—Domestic Abuse). This relationship continued for sometime and was characterised by conflict, and extreme aggression. Ms B’s personality appeared to become more aggressive and confrontational throughout this relationship, and she reported visiting her doctor due to depression (Risk Factors—Personality and Mental Health). Around six months prior to her offence she was constantly arguing and battling with her partner who she had previously thrown out; she was also working hard and lacking social stimulation (Unstable Lifestyle). Around two weeks before the offence Ms B comforted a friend who was upset over her partner’s infidelity with a family member. Ms B was outraged by this behaviour since it was unclear whether the family member was now pregnant (Values). Ms B began talking with her friend and another acquaintance about ways to rectify the situation, and, by the end of the night had decided that they should teach the woman a lesson by taking her to an abandoned warehouse and humiliating her (Goal Establishment – Revenge/Humiliation, Distal Planning - Explicit and influenced by group effects). Immediately prior to the offence, Ms B implemented each aspect of their agreed plan precisely, experiencing positive affect in the form of excitement (Proximal Planning - Explicit-Precise). Throughout the offence Ms B removes the victim’s undergarments, hits the victim, and rips the victim’s clothes (Offence Approach – Aggressive). The victim initially resists, but this only appears to escalate the violence (Victim Response –Resistant). After humiliating the victim, Ms B feels a sense of satisfaction (Offence Consequences – Positive Affect) and leaves the victim in the warehouse semi clothed (Offence Consequences-Cognitive Entitlement). She and her gang then proceed to clean their car in order to avoid detection (Offence Consequences-Controlled Behavioural Response) and are greeted by exuberant members of the community who praise her for them bravery and antisocial activity (Community Response).
Pathway 2: Directed Avoidant Case Study: Ms C

Ms C is a 35 year old woman who sexually abused her 1 year old daughter—over a period of months—in the company of a male intimate partner. Ms C’s childhood does not appear to have been characterised by any particular family disturbance (Positive Early Family Environment), although she was bullied in secondary school relentlessly (Emotional Abusive Experiences). When Ms C left school, however, she found work in a shop and stayed there for a significant period (Adaptive Lifestyle Outcome). Although Ms C functioned well vocationally, by early adulthood, she was displaying some mental health difficulties as a result of her earlier childhood bullying and passive personality characteristics (i.e., Vulnerability Factors- Mental Health and Personality). Ms C had her first child when she was 27 years old, and experienced some significant emotional (and sometimes physical) abuse from her partner (Major Life Stressor-Domestic Abuse) as well as severe financial hardship (Major Life Stressor-Other). Following the break down of this relationship, Ms C found herself socially isolated with little support, was severely depressed, and was having difficulties coping with her young daughter. Ms C’s traits of passivity and dependency were also still present illustrating that Ms C held many major Risk Factors (Coping, Social Support, Personality, and Mental Health) prior to her offending. Ms C did not like to be alone at this time, and was experiencing negative affect associated with her Unstable Lifestyle. She appears to have been targeted by a male acquaintance—Jim—who developed an intimate relationship with her. Jim carefully groomed Ms C, persistently sending her texts suggesting he would like to see indecent photographs of her and her daughter together. Jim bought a digital camera as a present for Ms C, and told her that her young daughter would not be harmed or hurt because she was too young to remember (Distal Planning-Directed). Initially, Ms C avoided Jim’s requests, but then realised that she didn’t want to lose him, and wanted to make him happy (Goal Establishment-Intimacy). Because Ms C strongly valued men, and their opinions, she began to take on board Jim’s reasoning, telling herself that her daughter was too young to be harmed by the abuse (cognitions). However, Ms C experienced great anxiety and dissonance prior to the abuse (negative affect). Jim orchestrated the offence behaviours (Proximal Planning Directed), and Ms C describes being unable to say no (Offence Approach-Maternal Avoidant). Ms C described looking carefully for any negative responses made by her daughter during the abuse, but saw none (Victim Response-Submissive), this appeared to reduce Ms C’s initial anxiety and further entrenched her cognitions surrounding victim harm. Ms C described feeling happy that she had made Jim happy (Offence Consequences – Affective), and thinking that her daughter was fine with what had happened (Offence Consequences – Cognitive). She made no controlled attempt to stop the abuse from continuing (Offence Consequences – Behavioural).

Pathway 3: Implicit-Disorganised Case study: Ms D

Ms D is a 40 year old woman who sexually abused a 14 year male neighbour one evening after she had been drinking. Ms D was brought up by her mother—who was emotionally neglectful—and her step father, who was strict and controlling (Negitive Early Family Environment). She also describes witnessing her stepfather beating her mother on many occasions (Physically Abusive Experiences). Because of this, Ms D left home at the age of 16 years and proceeded to work in a variety of jobs for very short periods (Maladaptive Lifestyle Outcome); she did not appear to evidence any notable Vulnerability Factors at this stage. Ms D got married at 19 years and had a son. She was happy in this relationship but later found out that her husband had been cheating on her for a lengthy period of time (Major Life Stressor – Domestic Abuse). Soon after, Ms D began drinking very heavily (Risk Factor – Coping Style) and went to a detox centre. She later met a new partner who turned out to be violent and abusive (Major Life Stressor –Domestic Abuse); the detox did not work and she was still drinking heavily (Risk Factor – Coping Style). Thus, six months prior to the offence she was binging and unemployed (Unstable Lifestyle). Ms D did not appear to engage in any distal planning—either implicit or explicit—prior to the offence (Distal Planning-None) and her motivations for the offence are unclear although it seems likely that she was seeking either sexual gratification or intimacy (Goal Establishment). To illustrate, on the day of the offence, Ms D had been drinking heavily (Alcohol) and was attempting to clean her car when she was approached by the victim who offered to help. Because Ms D was so intoxicated she does not know the full details of what happened next, but she appears to have invited the victim into her house. Ms D kissed the victim, and took him to bed with her (Offence Approach – Maternal Approach), she does not recall thinking anything at the time because she was so intoxicated. However, she believes that her victim engaged with her advances at some stage (Victim Response – Engaged). Ms D recalls a moment of clarity in which she realised what she had done and felt shocked (Offence Consequences – Cognitive Awareness; Negative Affect). Ms D asked her victim to leave the house (Offence Consequences –Behavior Controlled).
Table 1. Demographic information for each of the identified pathways.

<table>
<thead>
<tr>
<th>Demographic Information</th>
<th>Pathway 1 Explicit Approach</th>
<th>Pathway 2 Directed Avoidant</th>
<th>Pathway 3 Implicit Disorganised</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Child</td>
<td>Adult</td>
<td></td>
</tr>
<tr>
<td>Mean IQ Estimate (SD)</td>
<td>102.5 (24.77)</td>
<td>102.75 (8.96)</td>
<td>103 (18.74)</td>
</tr>
<tr>
<td>Total Previous Non Sexual Offences (M/SD)</td>
<td>5 (1.25/2.5)</td>
<td>72 (12.06*/31.64)</td>
<td>0</td>
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<tr>
<td>Median Length of Sexual Offending in days</td>
<td>715</td>
<td>1</td>
<td>1440</td>
</tr>
<tr>
<td>Mean Counts of Sexual Offending Against a Child (SD)</td>
<td>13.75 (11.96)</td>
<td>n/a</td>
<td>9.8 (5.45)</td>
</tr>
<tr>
<td>Victim Age Range</td>
<td>3-16 years</td>
<td>16-20 years</td>
<td>2-15 years</td>
</tr>
<tr>
<td>Total Number of Victims (Range per FSO)</td>
<td>7 (1-2)</td>
<td>7 (1-2)</td>
<td>9 (1-4)</td>
</tr>
<tr>
<td>Total Number of Female Victims (Range per FSO)</td>
<td>5 (1-2)</td>
<td>6 (0-2)</td>
<td>7 (1-2)</td>
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<tr>
<td>Total Number of Male Victims (Range per FSO)</td>
<td>2 (0-1)</td>
<td>1 (0-1)</td>
<td>2 (0-2)</td>
</tr>
</tbody>
</table>

* = 5% Trimmed mean