Female Sex Offenders
Exploring Issues of Personality, Trauma, and Cognitive Distortions
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Few studies have investigated the characteristics of female sex offenders and factors and/or causes of female deviance. Research to date has been descriptive in nature, with few comparison studies. Using a correlational design and three valid instruments, female sexual offenders and a matched group of female nonsexual offenders are compared in the areas of personality disorders, chemical dependency, childhood trauma, sexual trauma, emotional neediness, cognitive distortions, and social competence. A sample of 130 incarcerated females, 60 sex offenders, and 70 nonsexual offenders is used. Significant results are found in the areas of total childhood trauma and severity of sexual abuse suffered and social and sexual adequacy. No differences are found in abuse of substances, personality disorders, emotional neediness, or cognitive distortions.

Keywords: sexual abuse; female sex offenders; personality disorders; childhood trauma; social competence; social work

Sexual abuse has historically been viewed as a male crime against adult women and children, with men committing approximately 95% of the sex crimes in the United States (Tinkelman, Hotaling, Lewis, & Smith, 1990; Knopp & Lackey, 1987). Cultural resistance has hindered the identification of sexual crimes committed by women. Although cases of female sexual abuse of children have been documented since the 1930s (Bender & Blau, 1937; Chideckel, 1935), women sexual offenders have remained well hidden. In cases of female sexual abuse, either the abuse is not found out for many years, or if discovered, it is dismissed or disbelieved. It has been only since the mid-1980s that a small sample of female sex offenders have been described in the scientific literature and only since the 1990s that this group has been studied more systematically (Hislop, 2001). Historically, these crimes have been underreported and unidentified by victims and easily dismissed by adults (Allen, 1991; Hislop, 1999). Sexual abuse by women tends to be minimized and justified as an extension of the women's nurturing role, rather than as harmful or assaultive (Denov, 2001).
The socialization process of women differs from that of men in that it emphasizes attachment, affiliation, and caretaking (Gilligan, 1982). Women tend to base decisions and choices on connection and concern for those around them, rather than on individual autonomy and self-preservation (Zastrow & Kirst-Ashman, 2001). Because males are socialized toward aggression, autonomy, and disconnection (Hyde & DeLamater, 2000), and they commit the preponderance of crimes against others, we believe that women, as a result of their socialized gender roles, dependency, and passivity, are not capable or prone to commit offenses against others. Traditional sexual scripts, depicting women as incapable of committing sexual offences, are responsible for the lack of recognition of the abuse (Denov, 2003; Dunbar, 1999; Mendel, 1995). These scripts exclude males as victims of sexual coercion, simultaneously excluding women as aggressors of sexual assault (Byers & O’Sullivan, 1998; Denov, 2003; Mendel, 1995).

True prevalence of female sexual abuse of children is unknown. To obtain some idea of prevalence, it is necessary to consult numerous sources. In those cases of sexual abuse reported to the authorities, women perpetrators comprise about 4% of the cases (Finkelhor & Russell, 1984). The percentage of female sex offenders identified through Child Protection Agencies ranged from 1.5% to 12.5% (Kercher & McShane, 1985; Margolin & Craft, 1989; Rowan, Langelier, & Rowan, 1988). Victims receiving treatment who have identified female perpetrators ranged from 2% to as much as 39% (Cupoli & Sewell, 1988; Kasl, 1990; Kendall-Tackett & Simon, 1987; Mendel, 1995). In Faller’s (1989) study, female perpetrators molested 8% of the boy victims, whereas 29% were molested by both female and male offenders. Of the female victims, only 1% was molested by a female only, with 18% being molested by both male and female perpetrators. Studies using anonymous surveys have reported that 17% to 75% of respondents were abused by females (Crewdson, 1988; Ethington, 1997; Weber, Gearing, Davis, & Conlon, 1992). In surveys of college students, 1% to 15% of the students surveyed reported sexual contact with women in childhood (Condy, Temple, Brown, & Veaco, 1987; Haugard & Emery, 1989). Females appear to account for even higher percentages of childhood sexual contact than reported by male college students (43% to 60%; Burgess, Groth, Holmstrom, & Sgroi, 1987; Risin & Koss, 1987). In samples of male sex offenders, the percentages of those molested by female perpetrators ranged from 2% to 45% (Allen, 1991; Ryan, Miyoshi, Metzner, Krugman, & Fryer, 1996). In comparison, the percentage of male rapists reporting sexual abuse by a female ranged from 32% to 59% (Burgess, Hazelwood, Rokous, Hartman, & Burgess, 1988; Groth, 1979; Petrovich & Temple, 1984).
The limited research on female sexual offenders has been descriptive in nature and based on single or very small samples. Several studies described the characteristics of these women (Hislop, 1999; Rosencrans, 1997). Researchers have made attempts to organize the data into categories or typologies (Faller, 1987; Mathews, Matthews, & Speltz, 1989; McCarty, 1986) to better understand the nature of these offenses. Women of all ages have abused both male and female children of all ages (Briggs & Hawkins, 1995; Rosencrans, 1997). It has been documented that infants, young children, and adolescents have been the victims for female sex offenders (Ogilvie & Daniluk, 1995). Numerous psychological symptoms have been found in adult female sexual offenders: symptoms of emotional dependence (Hislop, 1999; Matthews, 1993); low self-esteem (Mathews et al., 1989); sexual dysfunction (Wolfe, 1995); childhood abuse (Allen, 1991; Mathews et al., 1989); histories of physical abuse and/or emotional abuse; being the victim of domestic violence; social isolation; and substance abuse (Mathews et al., 1989). Emotional immaturity, strong dependence needs, boundary issues, and internal anger over not getting needs met were found (Hunter & Mathews, 1997). Davin (1999) compared females who acted alone with those who offended with a male codefendant, finding differences between these two groups of female sex offenders. In a study comparing female sex offenders and nonsex offenders, Hislop (1999) found few differences between female sexual and nonssexual offenders in severity of the sexual abuse suffered as children, number of male partners, income, or family-of-origin pathology.

This study represents the first study comparing female sexual offenders with other female offenders using standardized, valid, and reliable instruments to collect data on the variables examined. This study seeks to improve on the current scant research in the field of female sexual abusers. Becker, Hall, and Stinson (2002) enumerated the following limitations characterized by the current research literature: (a) small samples and chart reviews, (b) failure to use standard assessment instruments, (c) overreliance on self-report and interviews, and (d) absence of studies comparing abused women who have and have not gone on to sexually abuse others. Using valid and reliable instruments to measure the variables, our purpose for this study is to investigate the differences between females who commit sex crimes and females who commit nonsex crimes. In comparing the two groups, it is hypothesized that significant differences will be identified in childhood trauma histories, including physical and sexual abuse histories, alcohol and drug use, cognitive distortions, personality disorders, social competence, and feelings of neediness and dependence, with the female sex offenders suffering more severe trauma and pathology.
Method

This study compared scores on various outcome measures of women incarcerated in the state prison system of Georgia. The independent variable (group membership) consisted of two groups of female criminals: sex offenders and nonsex offenders. The dependent variables include the presence and type of personality disorders, substance abuse, trauma history, social and/or sexual competence, emotional neediness, and cognitive distortions.

Measures

The Multiphasic Sex Inventory–II Female version (MSI-II; Nichols & Molinder, 1996) consists of 560 items of true/false statements, taking approximately 90 minutes to complete. It has been normed on a sample of “normal” females, female sex offenders, and nonadmitting (but guilty) female sex offenders throughout the United States. For the purposes of this study, the following MSI-II subscales were used: Personality subscale, which produced a profile of personality disorder indicators using the diagnostic criteria from the DSM-IV; Emotional Neediness subscale, designed to tap into an individual’s inner need for love and affection and the need to quell feelings of insecurity, inferiority, loneliness, and separation, and has a reliability coefficient of .88; Social and Sexual Inadequacies subscale, designed to tap into an individual’s pervasive feelings of ineptness and powerlessness about how to relate and be sexual with others, and has an internal reliability coefficient of .80 (this scale was used to assess the individual’s beliefs and adequacies in social and sexual functioning, desire for and emotional bonding with age-appropriate partners, and consensual sexual engagement); and the Cognitive Distortions and Immaturity subscale, designed to measure the level of thinking error patterns ascribed to by the individual (these are of a more general nature than just pertaining to sexual offending and include attitudes of feeling like a victim, displacing blame, and justifying actions; this subscale has an alpha coefficient of .85).

The Substance Abuse Subtle Screening Inventory–3 (SASSI-3; Miller, 1985) is a well known and widely used assessment of chemical dependency, defensiveness, and obvious and subtle attributes of substance abuse. The SASSI-3 has an overall reliability of .93, correctly identifying individuals suffering from Alcohol and Drug Dependency Disorder. The total score was used to compare the two groups.

The Childhood Trauma Questionnaire–Brief Version (CTQ; Bernstein et al., 2003) was used to assess amount of trauma suffered in childhood.
The measure contains an overall score of total trauma suffered, as well as five subscales assessing physical neglect, emotional neglect, emotional abuse, physical abuse, and sexual abuse. The instrument yields scores for each factor as well as a total score. The five factors displayed high levels of internal consistency (Cronbach's alpha = .79 to .94) and an alpha of .95 on the entire scale.

**Data Analysis**

Chi-Square analyses were conducted to determine if significant differences existed between the two comparison groups on the demographics variables. Bivariate analyses, using independent samples t-tests, were used to test for significant relationships among the variables. Pearson’s r was used to assess the strength of the correlations. The data were analyzed using SPSS software (Version 10.0).

**Participants**

The sample for this study was obtained from the incarcerated female population in the State of Georgia. A purposive sample of both female non-sexual offenders and female sexual offenders was identified. Demographic data were matched for the two groups. The sample consisted of 130 participants, 60 sexual offenders, and 70 nonsexual offenders. This sample size sufficiently met the criteria for statistical power of .86, with a medium effect size and a .05 significance level (Cohen, 1988).

The female sex offender group had committed a sexual offense against a child under the age of 18 years. The sexual offense could range from fondling to forcible rape. Only those females who have committed hands-on crimes were considered. Offenders who committed exposure, prostitution and commercialized vice, voyeurism, or other hands-off crimes were not included in this study. Victims were either male or female. The comparison group of female offenders had committed any serious crime against another person, not involving sexual contact. Participation in this study was strictly voluntary. Participants' identities and any identifying information were kept confidential. This study was approved by the University of Georgia Institutional Review Board and the Georgia Department of Corrections.

**Procedure**

Data were collected at the three women's state prisons in Georgia. In groups of 25, the inmates were read the consent forms. Upon consent, the
women were given 3 hours to complete all the test materials. The MSI-II was sent to Nichols and Molinder Assessments, Inc., for scoring. This researcher hand-scored the CTQ and the SASSI-3.

Results

Demographics

The age of the sample followed a normal distribution, ranging from 20 to 68 years old. The mean age for both groups was 36 years old. The sex offender group tended to be slightly older than the nonsex offender group. No significant differences existed between the two groups. Only 67 of the total sample (N = 130) disclosed their race. Of the responding women, 45 women (69.2%) said they are White, 17 women (26.2%) said they are African American, and only 3 women (4.6%) self-identified as “Other.” Both groups were evenly matched on the race factor. Chi-square analysis revealed no significant differences between the two groups (2; N = 65; \( \chi^2 = 3.31, ns \)). Education level was also measured. Of the total sample (N = 119), 41.2% had not graduated from high school; 30.3% had graduated from high school or had a Graduate Equivalency Diploma (GED); and only 14.3% had some college, trade, or vocational schooling. None of the sample had a college education. The female sex offenders had less education than the nonsex offenders did. They had higher frequencies of leaving school prior to completing the 9th grade and were less likely to complete high school. However, the sex offending group had higher rates of attending some college (20.7% compared to 8.2% for the nonsex offenders). Chi-square analysis revealed no significant differences between the two groups (3; N = 119; \( \chi^2 = 5.34, ns \)).

Sexual orientation was measured on the MSI-II (female version) by endorsement of one of four statements: fear of being gay, states being homosexual, has had sex with both men and women, or states being heterosexual. Twice as many women in the nonsex offender group (n = 63) claimed to be homosexual than in the sex-offending group (n = 54); yet twice as many women in the sex-offending group feared being gay (11.1% compared to 4.8% of the nonsex offender group). A chi-square analysis revealed that these frequencies were not statistically significant. In the highest category endorsed, an equal number of women (26) from both groups said they have had sex with both men and women. Gender identity was measured by endorsements to any of the following seven statements on the MSI-II: as a child felt like a male, as a teen felt like a male, think or feel like a male, always felt like male, feel male
in a female body, wishes had male genitals, and often wishes to be male. The majority of both groups endorsed none of the above statements, illustrating that few women in the sample have gender identity issues.

Both groups were found to be in need of accurate sexual knowledge. With a cut off score of 17, neither the sex offender group \( (n = 53, M = 17.15, SD = 2.85) \) nor the nonsex offender group \( (n = 63, M = 17.08, SD = 3.17) \) had adequate knowledge about sexual anatomy, physiology, and sexual functioning. No significant differences were found between the two groups in alcohol and drug use and abuse. However, on the alcohol scale, the sex offending group \( (n = 56, M = 11.21, SD = 11.16) \) had a higher mean score than the comparison group did \( (n = 70, M = 9.26, SD = 8.73) \); whereas the nonsex offending group \( (n = 70, M = 15.17, SD = 14.09) \) had a higher mean score than the sex offending group did \( (n = 56, M = 11.36, SD = 14.04) \) on the Drug Use Scale.

**Childhood Trauma**

The sex-offending women suffered significantly higher rates of total childhood trauma \( (t = 2.89, df = 128, p < .004; \text{ see Table 1}) \). Statistically significant differences were found between the sexual offenders and the nonsexual offenders in the areas of emotional abuse \( (t = 2.42, df = 128, p < .017) \), physical abuse \( (t = 2.52, df = 128, p < .013) \), and physical neglect \( (t = 2.05, df = 128, p < .043) \). Although the sexual offenders \( (n = 60, M = 12.58, SD = 5.29) \) suffered more emotional neglect than the nonsexual offenders \( (n = 70, M = 11.09, SD = 5.35) \), no statistically significant difference was found.

The sex-offending group scored significantly higher on the subscale measuring childhood sexual abuse \( (t = 2.88, df = 128, p < .005) \). The CTQ contains a validity scale to assess denial and minimization. Although not statistically significant, the sex offender group \( (n = 60, M = 47, SD = .77) \) scored lower on this subscale than the nonsex offenders did \( (n = 70, M = 61, SD = 91) \), indicating that nonsex offenders may have presented a more favorable light, being less honest about the abuse suffered.

**Personality Disorder Indicators**

Characteristics of personality disorders were measured using the Personality Disorder Indicator subscale on the MSI-II (female version). The results are not a diagnosis of a personality disorder but rather an indicator of personality traits in the respondent similar to the identified disorders. Results indicated that 21 \( (n = 54, 38.9\%) \) of the sex-offending women had
no personality disorder indicators compared to 16 (n = 63, 25.4%) of the nonsex offending women (see Table 2). No differences were found between the two groups in terms of frequency of dependent and antisocial personality disorder indicators. Both groups have similar personality disorder indicators. One personality disorder was found in only 18 of the 54 female sex offenders, whereas over one half (33) of the 63 nonsex offenders showed only one personality disorder. Multiple personality disorder features were found in 15 of the sex offenders and 14 of the nonsex offenders. Sex-offending women appeared to have slightly more schizoid, borderline, and dependent indicators, whereas the nonsex offending women had slightly more antisocial and significantly more histrionic personality disorder indicators. Incidence of paranoid features was equal for both groups. An interesting finding was that only 1 female sex offender had dependent personality disorder features, but 11 of the 15 with multiple features had dependent as one of the features. Yet 9 of the nonsex offenders had dependent features, illustrating little difference. Little difference existed between the two groups for borderline and avoidant personality disorders.

**Social and Sexual Inadequacies, Emotional Neediness, Cognitive Distortions**

Statistically significant differences were found in the area of social and sexual inadequacies (t = 2.373, df = 115, p < .019; see Table 3). No significant
Table 2
Frequencies of Personality Disorder Indicators

<table>
<thead>
<tr>
<th>Personality Disorder Indicators</th>
<th>Sex Offenders (n = 54)</th>
<th>Nonsex Offenders (n = 63)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>One indicator (n = 18)</td>
<td>More than 1 (n = 15)</td>
</tr>
<tr>
<td>None</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Paranoid</td>
<td>2</td>
<td>10</td>
</tr>
<tr>
<td>Schizoid</td>
<td>0</td>
<td>4</td>
</tr>
<tr>
<td>Antisocial</td>
<td>6</td>
<td>1</td>
</tr>
<tr>
<td>Borderline</td>
<td>5</td>
<td>13</td>
</tr>
<tr>
<td>Histrionic</td>
<td>3</td>
<td>1</td>
</tr>
<tr>
<td>Avoidant</td>
<td>1</td>
<td>4</td>
</tr>
<tr>
<td>Dependent</td>
<td>1</td>
<td>11</td>
</tr>
</tbody>
</table>

Table 3
Social or Sexual Inadequacies, Emotional Neediness, and Cognitive Distortions

<table>
<thead>
<tr>
<th>Scale</th>
<th>Type of Offender</th>
<th>M</th>
<th>Significance</th>
<th>r</th>
</tr>
</thead>
<tbody>
<tr>
<td>Social or sexual</td>
<td>Sex offenders (n = 54)</td>
<td>6.33</td>
<td>.019</td>
<td>-.216</td>
</tr>
<tr>
<td>inadequacies</td>
<td>Nonsex offenders (n = 63)</td>
<td>4.78</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Emotional neediness</td>
<td>Sex offenders (n = 54)</td>
<td>8.89</td>
<td>.438</td>
<td>ns</td>
</tr>
<tr>
<td></td>
<td>Nonsex offenders (n = 63)</td>
<td>8.22</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cognitive distortions</td>
<td>Sex offenders (n = 54)</td>
<td>7.72</td>
<td>.893</td>
<td>ns</td>
</tr>
<tr>
<td></td>
<td>Nonsex offenders (n = 63)</td>
<td>7.62</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

differences were found for emotional neediness. However, mean scores for both groups were found to be in the loneliness and neediness evident category. The sex-offending women (n = 54, M = 8.89, SD = 4.98) scored slightly higher than the nonsex offenders did (n = 63, M = 8.22, SD = 4.30). Although no significant differences were found on the Cognitive Distortions and Immaturity subscale, both groups scored in the highest category possible of "marked lack of accountability and a blaming outlook" (female sex offenders n = 54, M = 7.72, SD = 4.42; nonsex offenders, n = 63, M = 7.62, SD = 3.87). Scores above 7 reveal emotional immaturity and feelings of being victimized and mistreated throughout life. This finding
revealed that both groups in this sample of incarcerated women engage in a victim-stance response style, including a pattern of blaming others for their circumstances.

Discussion

The major findings of this study can be summarized as follows. The severity of childhood trauma, and sexual abuse in particular, are significant risk factors for the future development of sexually deviant behaviors for females in adulthood. Findings indicate that women who became sexual abusers suffered greater overall trauma as children, as well as more physical abuse, emotional and sexual abuse, and more physical neglect, than female offenders of nonsexual crimes did. Previous studies have found childhood deprivation and abuse in samples of female sex offenders (Allen, 1991; Mathews et al., 1989). The current study’s findings contradict those of the Hislop (1999) study, comparing incarcerated female sex offenders and nonsex offenders, which found that no differences existed between the two groups in terms of childhood abuse. Hislop relied on a self-report questionnaire developed for the study. No differences were found in the severity of sexual abuse suffered as a child, the number of male partners, income, or family-of-origin pathology. Due to the unreliability of self-report data, the current study used the Child Trauma Questionnaire to overcome the limitations of the Hislop study in evaluating the differences in overall childhood trauma and sexual abuse.

The results of this study suggest that the female sex offenders come from more deprived backgrounds than the other female offenders do. They were subject to poor living conditions, food deprivation, and lack of medical care. They suffered extreme emotional, physical, and sexual abuse. Trauma disrupts the normal developmental pathways needed to build appropriate coping skills, healthy personality organization, communication skills, social relationships, and feelings of self-worth. Childhood trauma has been linked to numerous adult dysfunctions, including the development of personality disorders and posttraumatic stress disorder (Widom, 1999), depression (Brown, Cohen, Johnson, & Smailes, 1999), psychopathy and aggression (Weiler & Widom, 1996), substance abuse (McClellan, Farabee, & Crouch, 1997), and intellectual and academic deficits (Perez & Widom, 1994).

The female sexual abusers in this study experienced greater physical abuse as children than did the nonsexual offenders. The families of individuals who experience physical abuse are fraught with violence and dysfunction. These families are unable to provide them with the guidance,
security, and social skills needed to adequately form new and supportive adult relationships. Female sex offenders who have suffered family violence and physical abuse may experience great difficulty negotiating interpersonal relations. These learned patterns of social isolation and social inadequacy affect a woman's ability to couple with a love partner in a satisfying and reciprocal relationship.

The sexual offenders exhibited more inhibitions, more insecurities, and inferiorities in the areas of social and sexual contacts, as evidenced by the significant elevations on the Social and Sexual Inadequacies scale. These feelings of inadequacy would sharply affect the women's abilities to find and choose healthy and appropriate partners. Because social and sexual negotiations require assertiveness, confidence, and communications skills, these women are at a disadvantage.

The severe sexual abuse suffered by the female sex offenders may play a role in the development of sexually deviant interest in children. Sexual abuse in females has been found to contribute to the development of low self-esteem and role confusion (Gelinas, 1983), sex and relationship difficulties (Maltz, 2003), and higher rates of sexual dysfunction (Laumann, Paik, & Rosen, 1999). Alexander, Teti, and Anderson (2000) found that women who suffered from childhood sexual abuse and had unsatisfactory intimate relationships were more likely to exhibit role-reversal behavior in the parenting of their children, characterized by an overdependence on her children to meet her emotional needs. This finding suggests a unique and significant development of sexually deviant behavior toward children by women who have suffered childhood sexual abuse.

The results of this study did not uphold previous speculations regarding personality disorders in women who commit sex offenses. It has been suggested that female sex offenders suffer from traits associated with personality disorders, particularly borderline and dependent personality indicators (Allen, 1991; Hislop, 1999; Mathews et al., 1989; McCarty, 1986). Avoidant and dependent personality disorders were noted more frequently in a group of female sex offenders, compared with a higher frequency of antisocial personality features in the nonsexual offending group (Green & Kaplan, 1994). However, the current study found that borderline personality disorder was not unique to the female sex offenders. Borderline personality features were the most commonly found in both groups, followed by paranoid personality features. However, the paranoid finding may be an artifact of the sample being made up of women in prison. Paranoia may be a condition of this circumstance. Avoidant personality features were the least frequently found. Considering that this sample experienced much childhood trauma and sexual

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abuse, this finding refutes previous studies finding significant frequencies of avoidant personality features in samples of female survivors of childhood abuse. Female sex offenders, although victims of severe childhood sexual abuse, did not develop avoidant personality features at high rates, indicating that perhaps sexual offending was a strategy to engage with others, albeit inappropriate others. Although psychopathic personality disturbance appears to be linked to male sexual offending (Quinsey, Lalumiere, Rice, & Harris, 1995), little support for psychopathy as a risk factor for female sex offending was been found in this study.

Both groups had increased scores on the Cognitive Distortions and Immaturity Scale, indicating emotional immaturity and feelings of being victimized and mistreated throughout life. This distortion can result in poor control of feelings and therefore poor behavioral control. Coupled with the severity of sexual abuse and childhood abuse suffered by the female sex offenders, the severity of cognitive distortions has significant consequences for women’s view of themselves and their efficacy in the world. These offenders see themselves as having little power to affect change in their lives. The sexually abusive behavior may be an attempt to gain some power and control.

This study found that female sex offenders tended to use and abuse drugs and alcohol at the same rates as the nonsex offender group, uphold the findings of other studies (Green & Kaplan, 1994; Travin, Cullen & Proctor, 1990). Although no statistically significant differences were noted in the two groups on measures of alcohol and drug use and abuse, it is of interest to note that the sexual offenders had higher rates of alcohol use and abuse, whereas the nonsex offenders had indicated higher rates of drug use and abuse. The sex offenders may tend to be more conventional and practical, using alcohol at higher frequencies, because it is cheaper and more accessible than illegal drugs. In addition, because many women are incarcerated due to involvement in drug use, the control sample may be skewed in that direction.

Implications

This study has treatment implications for both prison and community settings. It appears that female sex offenders need sex offender–specific treatment, including attention to sexuality; trauma resolution; social skills; and increasing arousal to appropriate, consenting, and age-appropriate sexual encounters. These services should focus on severe childhood deprivation, the effects of sexual abuse, increasing social competence and self-efficacy, and appropriate socialization for interactions with significant others, as well as adequate and accurate sexual knowledge.
Limitations

Limitations of the study should be considered. Although statistically significance was found, the strength of those associations was rather weak. The study was limited to bivariate analysis. Additional insights into the more significant variables involved in female sexual offending may be obtained by using more sophisticated statistical methods. Furthermore, using an incarcerated sample limits the generalizability and candidness of the responses from the respondents. Further study into the relationship between female sex offenders and the dynamics of their relationships with victims may shed light on the coercion, lack of assertiveness, feelings of powerlessness, and need to please others that appear to be characteristic of women who molest children. Emotional neediness appears throughout the literature as a common and important etiological factor in female sex offending. However, this study failed to find any differences on this factor, suggesting that the variable may need further operationalization or better measurement.

Conclusion

From the study data, a profile begins to emerge with some possible risk factors. Female sexual offenders, due to overall severe childhood trauma and deprivation, including severe sexual abuse, have few skills to negotiate their social and sexual contacts. Distorted sexual values, beliefs, and knowledge, coupled with emotional neediness and dependency issues, increase their risk for engaging in dysfunctional relationships. They lack the necessary skills to get their emotional and sexual needs met with appropriate partners—namely healthy, consensual adults. This inability increases their risk of getting their sexual needs met by children.

References


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