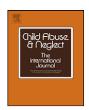
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Child Abuse & Neglect



Risk factors for the perpetration of child sexual abuse: A review and meta-analysis[☆]

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ABSTRACT

Objectives: Since the late 1980s, there has been a strong theoretical focus on psychological and social influences of perpetration of child sexual abuse. This paper presents the results of a review and meta-analysis of studies examining risk factors for perpetration of child sexual abuse published since 1990.

Method: Eighty-nine studies published between 1990 and April of 2003 were reviewed. Risk factors were classified into one of the following six broad categories: family factors, externalizing behaviors, internalizing behaviors, social deficits, sexual problems, and attitudes/beliefs. Sex offenders against children (SOC) were compared to three comparison groups identified within the 89 studies: sex offenders who perpetrated against adults (SOA), non-sex offenders, and non-offenders with no history of criminal or sexual behavior problems.

Results: Results for the six major categories showed that SOC were not different from SOA (all d between -.02 and .14) other than showing lower externalizing behaviors (d = -.25). Sex offenders against children were somewhat different from non-sex offenders, especially with regard to sexual problems and attitudes (d = .83 and .51). Sex offenders against children showed substantial differences from non-offenders with medium sized effects in all six major categories (d's range from .39 to .58).

Conclusion: Child sex offenders are different from non-sex offenders and non-offenders but not from sex offenders against adults.

Practice implications: This study suggests that the presence of general risk factors may lead to a variety of negative behavioral outcomes, including the perpetration of child sexual offending. Family factors were strongly related to the perpetration of child sex offending (vs. non-sexual offending or non-offending) and may be valuable intervention points for interrupting the development of child sex offending, as well as other negative behaviors. Other potential points for intervention may focus on the development of appropriate social and emotional skills that contribute to sexual offending.

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Introduction

There is a growing recognition that the prevention of child sexual abuse is a critical public health concern (Daro, 1994; Hammond, 2003; McMahon & Puett, 1999; Mercy, 1999; Whitaker, Lutzker, & Shelley, 2005). State-based reports of child maltreatment collected by the Office on Child Abuse and Neglect found over 83,000 cases of child sexual abuse perpetrated in 2005 (U.S. Department of Health and Human Services [US DHHS], 2007). Most sexual abuse goes unreported (Hanson, Resnick, Saunders, Kilpatrick, & Best, 1999). A recent survey by Finkelhor, Ormrod, Turner, and Hamby's (2005) using a nationally representative sample of parents and children found that 82 per 1000 children and youth had experienced a sexual victimization in the year prior to the survey.

Being a victim of child sexual abuse has been associated with a variety of psychological, social, behavioral and physical problems. Psychological impacts include depression, somatization, PTSD, and personality disorders (Paolucci, Genuis, & Violato, 2001; Putnam, 2003). Social and behavioral consequences include sexualized behaviors (Nagy, Adcock, & Nagy, 1994), which may lead to early or unintended pregnancy (Dietz et al., 1999; Widom & Kuhns, 1996) or HIV-infection (Brown, Lourie, Zlotnick, & Cohn, 2000), substance abuse, and bulimia (Putnam, 2003). Physical consequences include neurobiological effects (Putnam, 2003) and long-term impact on health, such as heart disease, lung disease, and cancer, at least when experienced in combination with other adverse child experiences (Felitti et al., 1998).

Recently, attention has focused on understanding the development of perpetration of child sexual abuse. Such work is critically important for primary prevention. Most programs for the prevention of child sexual abuse have focused on potential victims, teaching them to avoid child molesters. Such programs can be important, but they are likely only part of a broad solution. Programs focusing on potential victims put much of the prevention burden on the child, who may have limited ability to engage in prevention behaviors. Moreover, most child sexual abuse is perpetrated by relatives and acquaintances (Finkelhor et al., 2005; US DHHS, 2007), which makes it particularly difficult for children to control these interactions. Consequently, broad prevention efforts for child sex offending must include addressing the perpetrator's behavior.

There has been considerable theory and research focused on those who perpetrate child sexual abuse. This work has developed methods to classify known sex offenders against children (e.g., Knight & Prentky, 1990), and evaluate their recidivism risk (e.g., Beech & Ward, 2004; Hanson & Morton-Bourgon, 2005). For primary prevention, however, it is necessary to understand the factors that lead to the development of the *initial* perpetration of child sex offending. Recently, a number of different theories have been developed that describes how a variety of biological, psychological, and interpersonal factors may lead to child sex offending. For example, Finkelhor's (1984) preconditions model points to four factors that, when combined, can lead to child sexual abuse perpetration: an emotional attachment or congruence with children, sexual arousal to children, "blockage" from normal sexual relationships, and a disinhibition to perpetrate child sexual abuse. Other theories (Hall & Hirschman, 1992; Marshall & Barbaree, 1990; Ryan, 1998; Ward & Seigert, 2002) also discuss biological, psychological, and social factors, and some theories highlight the need to consider the developmental and contextual environments when understanding the development of sexual offending (Marshall & Barbaree, 1990; Ryan, 1998). On the whole, it seems clear there are likely multiple factors and multiple pathways involved in the development of perpetration of child sexual abuse (Ward and Seigert (2002). These theoretical advances have outpaced data collection, and there are little empirical data to indicate which risk factors are most important, and/or how they interact to produce child sexual abuse perpetration.

The purpose of this paper is to present the results of a meta-analysis of recent empirical studies of risk factors for the perpetration of child sexual abuse. We conceptualized this review and meta-analysis broadly to include the range of potential risk factors described by the major theories of child sexual abuse perpetration. Because the theoretical advancement that has occurred since the early 1990s has focused strongly on intra and interpersonal factors, we limited our review to studies published since 1990, and focused on several categories of risk factors most pertinent to recent theory. Those six categories included the following: family history variables (e.g., history of abuse, parent-child relationship, discipline, attachment); externalizing behaviors (e.g., violence, delinquency); internalizing behaviors (e.g., depression, low self-esteem, poor coping); maladaptive sexual behaviors (e.g., sexual interest in children, deviant sexual fantasies); problems in social deficits (e.g., social skills, empathy, loneliness); and attitudinal/cognitive variables (e.g., attitudes toward rape, rationalizations).

Research on risk factors for child sex offending must be discussed in the context of the specific comparison groups appropriate for the research questions. For example, one current debate in the literature is the extent to which child sex offending is part of a broader pattern of antisocial behavior (Hunter, Figueredo, Malamuth, & Becker, 2003; Johnson & Knight, 2000; Lalumiere, Harris, Quinsey, & Rice, 2005). Becker (1988) suggested that some juvenile sex offenders are of the conduct disorder type, whereas others are primarily motivated by pedophilic interests. Such a hypothesis would be examined by comparing sex offenders against children (SOC) with offenders who have perpetrated non-sex offenses and with non-offenders. In this review, three major comparison groups emerged: offenders who perpetrated sex crimes against adult victims; offenders who perpetrated non-sexual offenses, and samples of individuals with no known history of criminal or sexual offending. Examining the patterns of differences across three different comparison groups is useful for identifying the risk factors that are common to broader groups of sex-offenders (i.e., sex offenders who perpetrate against children vs. adults) and the even broader group of offenders (sexual and non-sexual).

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