



Sex offending and social anxiety: A systematic review



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ABSTRACT

For innovative up-to-date research in an area to be developed, it is important to systematically, and critically evaluate the previous research. Sexual violence against children is one of the most serious crimes, with detrimental psychological and physical consequences on the victims. Contemporary theories of the development and maintenance of sexual offending against children incorporate intimacy deficits and social skill deficits. However, there is a dearth of research addressing the clinical needs of males who commit sexual offenses against children. This systematic review critically evaluates previous research on the association between social anxiety and sexual offending against children. To identify studies relevant databases were searched and selected journals hand searched. Studies were evaluated for eligibility, data extracted and study quality assessed, with a second rater to establish inter-rater reliability. The results indicate eight of the eighteen studies reviewed reported an inconclusive statistical association with child sex offenders and social anxiety. Of the remaining ten studies, one study had a strong statistical association, four studies had a moderate statistical association and five studies had weak statistical association. Overall, the findings indicate methodological inconsistencies and lack of definitional clarity of subgroups of sex offenders, therefore comparison between studies is challenging. Further research in this area with definitional clarity of subgroups is required to inform evidence-based practice for this offender group.

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1. Introduction

Sexual violence and abuse is defined as forcing, or attempting to force any behavior of a sexual nature, which is unwanted by the other person, including cases where he/she does not consent or understand (Scottish Crime and Justice Survey, 2013). Within society, these are considered to be some of the most serious and damaging offenses, particularly when committed against children, which can have significant consequences for the physical, emotional and psychological well-being of the victims (Pérez-Fuentes et al., 2013). Estimations of prevalence are predominantly based on official criminal statistics for all sexual offenses and are unlikely to accurately reflect the prevalence of sexual offenses against children, as these offenses are vastly undetected and unreported (Lussier & Cale, 2013). Victimization surveys in the UK indicate an overall decline of 12.5% in sexual offenses since 2004, with a slight increase of 1% between 2009/10 to 2011/12 (British Crime Survey, 2011/12), which may be due to recent media attention and campaigns to raise awareness of child sexual abuse (CSA). However, victim surveys are also likely to be an underestimation of the prevalence of sex offenses (Lussier & Cale, 2013).

There are concerns over the prevalence of CSA and our ability to predict which people are likely to offend. Understanding why individuals sexually offend has been a driving force for research in the sex offender literature in order to reduce risk and improve clinical interventions. However, sex offender literature almost exclusively focuses on sexual recidivism (i.e. those factors that contribute to repeat offending post-conviction) (Lussier & Davies, 2011), rather than those factors that might be associated with such offending (directly or indirectly). Due to concerns over dangerousness, researchers are driven by public and political demand to understand contact child sex offenders (CCSO) and the factors that are associated with risk and risk management. Thornton (2002) identifies four areas of dynamic risk factors: socio-affective functioning, sexual interests, distorted attitudes, and self-management, this review focuses on socio-affective functioning.

1.1. Theories of sexual offending

Numerous theories have been proposed to identify underlying factors leading to offending by CCSOs (e.g. Finkelhor, 1984; Hall & Hirschman, 1991; Marshall & Barbaree, 1990; Ward & Hudson, 1998; Ward & Siegert, 2002). Theories of sexual offending are multifactorial, involving biological, cultural and developmental factors (Ward, Polaschek, & Beech, 2006). These important theoretical developments include both specific single factor theories, as well more complex integrated models with multiple factors (Thakker & Ward, 2012). Social, interpersonal and intimacy deficits have been highlighted in theories of sexual offending as a cluster of common characteristics among some sex offenders, which results in difficulties establishing or maintaining relationships (Ward et al., 2006).

1.2. Psychiatric disorders

Axis I Disorders in this population have received limited research attention. It is speculated that an increased understanding of these factors within the child sex offender population could serve several functions: assist risk assessment, influence appropriate treatment and increase understanding of individuals' behaviors and motivations. Anxiety disorders are a group of psychiatric diagnoses that may prove relevant. Social Anxiety (SA) can lead to social isolation and lack of intimate relations with adults.

A previous review considers comorbidity of psychiatric Axis I disorders in sex offenders with a pharmacological treatment focus, report that pharmacological treatments for ameliorating comorbid Axis I may reduce sexual impulsivity (Kafka, 2012). The studies reviewed by Kafka (2012) were diverse in sample groups, diagnostic methodologies and settings, with no indication of the quality of the primary research. Not all studies examined the same broad range of Axis I disorders or focused on one specific disorder (e.g. exclusively SA). Hence, although SA is commented on for some of the studies, there is a need for systematic exploration. There is also a need to

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