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An Exploratory Evaluation of the Ward and Hudson Offending Pathways Model with Sex Offenders who have Intellectual Disabilities

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Abstract

Background

It was predicted that offenders with intellectual disabilities categorised according to Ward & Hudson's (1998b) self-regulation theory as having an Approach goal, as compared to those with an Avoidant goal, would have higher levels of distorted cognitions, less victim empathy, and a history of more prolific offending. Offenders categorised as having a Passive strategy, as compared to those with an Active strategy, were hypothesised to have lower levels of general intellectual functioning, and more known offences and convictions.

Method

Using a cross sectional independent groups design, the offence pathways of thirty-four men with intellectual disabilities who were taking part in group cognitive-behavioural therapy were rated by therapists. Participants assigned to each pathway were then compared using measures of sexual knowledge, distorted cognitions, and victim empathy. Cronbach's alpha for the measures used was found to be acceptable.

Results

Offenders with an Approach goal were found to have higher levels of distorted cognitions and more denial about the negative impact their offending had upon their victims on one measure of distorted cognitions, while on another measure of distorted cognitions there were no differences. There were no differences between Approach and Avoidant

offenders in terms of victim empathy, socio-sexual knowledge, severity of offending, and victim type. Offenders with a Passive strategy were found to have lower levels of general intellectual functioning than offenders with an Active strategy, but did not have more known offences and convictions.

Conclusions

The findings provide partial support for the usefulness of the offending pathways model in understanding the sexual offence processes of men with intellectual disabilities. The difficulties with this study are further discussed along with the theoretical implications.

KEYWORDS: Sexual Offending Pathways; Self Regulation, Intellectual Disability, Learning Disability, Sex Offenders, Child Molesters, Cognitive Distortions, Victim Empathy

An Evaluation of the Ward and Hudson Offending Pathways Model with Sex Offenders
who have Intellectual Disabilities

A variety of models and theories have been developed in an attempt to help understand sexual offending behaviour. Many studies have investigated a single factor or group of factors hypothesised to be related to sexual offending, for examples sexual arousal (Barbaree & Marshall, 1991), value systems (Herman, 1990), intimacy deficits, affect control, and empathy (Ward, Keenan & Hudson, 2000), heterosocial competence (Dreznick, 2003), pornography (Marshall, 2000), along with aggression, hostility, antisocial personality, and sexual experiences (Malamuth, 1986). Such studies are exceptionally important as they help to highlight how these individual factors may be related to sexual offending, and how they may be related to each other, leading to the development of more valid and complex models of sexual offending.

Complex models typically attempt to account for sexual offending by drawing together a variety of factors, and examples of more complex models include Finklehor's (1984) four preconditions model of child sexual abuse, Marshall & Barbaree's (1990) integrated theory of rape, Hall and Hirschman's (1991) quadripartite model, and Malamuth, Sockloskie, Koss & Tanaka's (1991) confluence model of sexual aggression. However, few models have been able to account for all of the factors that are associated with an increased risk of sexual offending. In an attempt to deal with some of the theoretical confusion, Ward & Hudson (1998a) developed a meta-theoretical framework of sexual offending in an attempt to organise the differing theoretical perspectives.

Ward & Hudson (1998a) suggested that multi-factorial models which consider a persons' general propensity to commit a sexually abusive behaviour should be described as *level one* or *comprehensive theories*. They suggested that single factor models should be labelled as *level two* or *middle level theories*, as the presence of these factors increase the likelihood that a person may be a sexual offender and affect the process of committing an offence. Finally, they argued that studies examining the exact processes occurring when a sexual offender commits an offence should be labelled *level three* or *micro-theories*. Appropriately, Ward & Hudson (1998a) suggested it is at this micro level where theory development should begin, and that higher level theories need to take into account the processes that are occurring during the commission of a sexually abusive behaviour.

Several models exist which can be categorised at the micro level which attempt to theorise about the processes that occur during the commission of a sexually abusive behaviour. These include the relapse prevention model (Marlatt & Gordon, 1985; Pither et al., 1983; Pither, 1990), the descriptive model of the offence chain for child molesters (Ward et al., 1995) and rapists (Polaschek, Hudson, Ward, & Siegert, 2001). These descriptive accounts of the offence chain are of specific interest, and although mainly micro theories, they also lead to the generation of hypotheses about a persons' propensity to commit a sexually abusive behaviour.

For example, Ward et al. (1995) took detailed transcripts of twenty-six child molesters describing their most recent offence, and using Grounded Theory, developed a

descriptive model that consisting of nine stages. This eventually led Ward and Hudson (1998b; Hudson, Ward & McCormack, 1999; Ward, Hudson & Keenan, 1998; Ward et al., 1995) to consider self-regulation theory as relevant in understanding that sex offenders often have differing goals when committing a sexually abusive behaviour (e.g. offenders may try to avoid offending, or they may seek opportunities to offend), and differ in terms of the amount of planning involved in committing an offence (e.g. offenders may plan out and employ strategies to achieve their goals, while others may not). Ward and Hudson (1998b) suggested that sex offenders may have two types of goals, referred to as *approach* or *avoidance* goals, where an approach goal can be characterised as actively seeking to engage in sexual offending, while an avoidance goal can be seen as attempting not to commit a sexually abusive behaviour. They further suggested that sex offenders also have different types of strategies which they may use to help achieve their goals referred to as an *active* or a *passive* strategy. An active strategy is characterised by evidence of planning to commit or avoid offending, while a passive strategy is typified by impulsivity, an external locus of control, lack of coping skills, and difficulties with delayed gratification, in other words, little planning.

These categories led to the formation of four offending pathways categories: 1) Avoidant Passive - an offender who does not want to commit an offence but lacks the necessary skills to prevent an offence from occurring, 2) Avoidant Active – an offender who does not want to commit an offence and employs strategies to try to prevent an offence from occurring (e.g. try to control inappropriate sexual fantasies in some way), 3) Approach Automatic (Passive) – these were seen as offenders who are impulsive with implicit

scripts for sexual offending behaviour. They do not present with a desire to prevent offending, but the behaviour they engage in to facilitate offending behaviour may be poorly planned, and 4) Approach Explicit (Active) - these offenders are those who do not desire to prevent sexual offending and their offending is supported by extensive planning.

Empirical support for Ward & Hudson's (1998b) pathways model is growing, and based on their original qualitative study, it is possible to make predictions about the psychological characteristics of sex offenders who are classified according to the model. Bickley & Beech (2002), for example, reported that child molesters with an approach goal, as compared to offenders with an avoidance goal, present with more distorted cognitions, and higher levels of emotional congruence with children. They also reported some evidence to suggest that approach offenders may view their offending in more of a positive light, as compared to avoidance offenders. Approach offenders also had more convictions and more prolific offending. Considering the strategy employed by a sex offender, offenders with a passive strategy in this study were found to endorse an external locus of control, but little evidence was found to support claims that passive offenders were more impulsive and under-assertive. However, offenders with a passive strategy were more likely to have convictions for sexually abusive behaviours and had lower levels of general intellectual functioning, suggesting that offenders with lower IQ may develop less detailed plans to support or prevent their offending behaviour, or engage in more opportunistic offending. However, Bickley & Beech (2002) did not consider offenders with lower IQ further, although many of the findings were replicated in a second study (Bickley & Beech, 2003).

Other authors have also found some support for the Ward & Hudson (1998b) offending pathways model. Webster (2005), in a qualitative study, conducted interviews with sex offenders who had completed the prison service sex offender treatment programme in the United Kingdom, but went on to commit a later offence. He successfully coded the offence pathways of twenty-five men, and although some difficulty with coding was noted, he concluded that the model had a degree of content validity. Proulx, Perreault & Ouimet (1999) in another study investigated the offending pathways of male child molesters, and compared their pathways to that of Ward et al. (1995). They reported observing two pathways, one which involved sexual fantasy and planning, where the victim was generally not known to the offender, while the other involved little planning, the victim was generally known by the offender, and the offence was of a shorter duration.

In fact, the majority of theories involving sexual offending have not considered sexual offending by people with intellectual disabilities. However, there is a growing body of literature, much of which would be characterised as occurring at *level two* by Ward & Hudson (1998a), regarding factors which differentiate men with intellectual disabilities who are and are not sex offenders. For example, there is some evidence that sexual offenders with an intellectual disability, as compared to non-offenders with an intellectual disability may have lower levels of impulsiveness (Parry & Lindsay, 2003), higher levels of sexual knowledge (Michie et al., In Press; Talbot & Langdon, 2006), and more distorted cognitions (Broxholme & Lindsay, 2003, Langdon & Talbot, 2006). Other

factors have been noted to be associated with recidivism amongst this population, such as antisocial attitudes, poor family relationships, denial of offending, low self-esteem, lack of assertiveness, and poor treatment response (Lindsay, Elliot & Astell, 2004).

Recently, some authors have begun to consider applying the offending pathways model to sexual offending by people with intellectual disabilities. Keeling & Rose (2005) reviewed this model in relation to sexual offending by people with intellectual disabilities. They suggested, following a review of the literature, that offenders with intellectual disabilities may offend via approach-automatic or avoidant-passive pathways. Courtney, Rose & Mason (2006) went on to conduct a qualitative analysis of interviews conducted with nine men with intellectual disabilities who had a history of sexual offending. They concluded that the broad concepts coded from the interviews, such as targeting a victim, planning an offence, attitudes and beliefs were congruent with some existing models of sexual offending. However, there was no explicit investigation into the applicability of Ward & Hudson's (1998b) offending pathways model to a population of people with intellectual disabilities.

Lindsay (2005) has reviewed our theoretical understanding of the motivation of people with intellectual disabilities to commit sexually abusive behaviours. In his paper, he outlines the marked importance sociological and criminological factors may have in the development of criminality amongst people with intellectual disabilities, including such factors as stigma, rejection, and social isolation. Lindsay (2005) also considers the role of quality of life within the development of criminality within this population,

considering how the development of community integration and pro-social attitudes may play a role in preventing offending.

However, with the exception of Courtney et al., (2006) there has been little attention paid to how well current theories of sexual offending work with people who have intellectual disabilities. Clearly, Ward & Hudson's (1998b) offending pathways model which incorporates self-regulation theory has the potential to allow clinicians and researchers to further understand and predict sexual offending. This model may describe the offending processes that occur with people who have intellectual disabilities (Keeling & Rose, 2005), and Bickley & Beech (2002) have noted that sexual offenders who employed passive offending strategies had lower levels of general intellectual functioning, although their sample could not be described as having an "intellectual disability". Given this, we decided to further investigate the utility of Ward and Hudson's (1998b) offending pathways model of sexual offending with men who also have an intellectual disability.

In a similar way to Bickley & Beech (2002), we hypothesised that 1) men classified as having an approach goal, in comparison to those with an avoidance goal, would have higher levels of distorted cognitions, less victim empathy and have a history of engaging in more prolific offending behaviour as evidenced by offending involving people outside their immediate family and a higher number of offences; and 2) we also hypothesised that men employing passive strategies, as compared to men employing active strategies, would have a lower level of general intellectual functioning, and have more known offences and convictions. The rationale for this hypothesis is that men employing passive

strategies are more likely to have made use of poor planning when committing their offence, and therefore would be more likely to get caught.

Method

Participants

Thirty-four men referred for group based cognitive behavioural therapy as a result of their history of inappropriate sexual behaviour took part in the study. All of these men were also participating in the Sex Offender Treatment Services Collaborative – Intellectual Disabilities Group (SOTSEC-ID) research trial. The mean age of participants was $M=39.06$ ($SD=11.99$; Range=20-69), and the mean adult intelligence quotient score of participants was $M=68.17$ ($SD=7.93$; Range=55-83).

Inclusion criteria for the study were that men had to have a significant intellectual disability as evidenced by a Full Scale IQ between 55 and 80¹, or a history of contact with intellectual disabilities service. Participants also had to have a history of sexually abusive behaviour, and be aged between eighteen and sixty years. Participants were excluded if they did not meet the above criteria, or they had a score on the British Picture Vocabulary Scale II (Dunn, Dunn, Whetton & Burley, 1997) less than that expected from a normally developing five-six year old child.

Considering sexual abusive behaviour, the mean number of sexually abusive behaviours perpetrated by the group was $M=3.86$ ($SD=4.44$). Fifty-six percent of the sample had committed offences involving children, while 44% had committed sexually abusive behaviours involving adults, including other adults with an intellectual disability. On average, the group had been interviewed by the police $M=1.80$ ($SD=2.33$) times, with

¹ All of the participants has a history of involvement with health and social services for people with intellectual disabilities, but on testing, not all, technically had an intellectual disability. That is, not all had an $IQ < 70$ with significant impairments in adaptive behaviour.

59% of the sample having been interviewed by the police at some time regarding their sexual offending. Forty-four percent of the sample had received a conviction or police caution for sexual offending by a British court, and excluding the most recent sexual abusive behaviour, 47% had a history of engaging in previous sexually abusive behaviour.

Design and Procedure

The study employed a cross sectional independent groups design. Each participant included in the study was classified according to one of the four offending pathways identified by Ward & Hudson (1998b) by therapists who were participating in the SOTSEC-ID trial. Therapists received training by the first and second author in how to rate participants. A training pack was prepared outlining Ward & Hudson's (1998b) theory and offending pathways and included examples of sexual abusive behaviour and accompanying classification. Data were collected regarding the most recent sexual abusive behaviour that each participant had committed before they entered treatment and this behaviour was used to determine the offending pathway. A checklist was also prepared and used which was similar to the one employed by Bickley & Beech (2002).

At least two therapists rated each participant to determine their offending pathway. Two independent raters then checked the information used for classification and determined the final offending pathway. The process of classification was checked and monitored. Inter-rater reliability was calculated as excellent at $k=0.81$. Final classification with respect to the disagreements was determined by the first and second authors.

Following the completion of classification, differences between the participants were examined on a series of psychological assessment tools. Differences were also examined on various demographic and offence related variables. All of this data was generated before the participants began treatment.

Measures

There are very few measures in existence which have been appropriately standardised for use with people who have intellectual disabilities which measure the constructs under consideration. All of the measures chosen had been developed for use with people who have intellectual disabilities, although there is little data on their psychometric properties. Cronbach's alpha was calculated for the measures where data regarding psychometric properties was unknown, and is reported below.

Sexual Attitudes and Knowledge Questionnaire (SAK, Author Unknown). The SAK consists of nineteen pictures with accompanying questions regarding sexual knowledge and attitudes, and was designed for use with people who have intellectual disabilities. The questions are spread across four sub-scales which are, 1) understanding relationships, 2) social interaction, 3) sexual awareness, and 4) assertiveness. There are no previous reliability and validity data relating to this scale known to the authors. This measure was chosen because it assessed, in addition to sexual knowledge, some socio-sexual skills and attitudes, and was reasonably easy and short to administer. Cronbach's alpha for this questionnaire was calculated to be $k=0.82$, which is acceptable.

Questionnaire on Attitudes Consistent with Sexual Offending (QACSO; Broxholme & Lindsay, 2003; Lindsay, Carson & Whitefield, 2000). The QACSO is a 63 item questionnaire specifically designed for use with sex offenders who have intellectual disabilities. The questionnaire attempts to assess distorted cognitions relating to sexual offending spread across several different offending categories, which include 1) rape, 2) voyeurism, 3) exhibitionism, 4) dating abuse, 5) homosexual assault, 6) pedophilia, and 7) stalking and sexual harassment. Higher scores indicate increased endorsement of distorted cognitions associated with sexual offending. The QACSO has been found to effectively discriminate between sex offenders and non-offenders with an intellectual disability, and has generally good levels of test-retest reliability for all of the offending categories, with the exception of the rape category (Broxholme & Lindsay, 2003).

Sexual Offenders Self Appraisal Scale (SOSAS; Bray & Foreshaw, 1996). The SOSAS is another questionnaire which has been designed to examine cognitions about sexual offending. The instrument consists of 20 statements which respondents are asked to post into boxes to signify their degree of agreement or disagreement. Items are scored on a five point scale and collapsed into four subscales labelled 1) denial, 2) victim blaming, 3) minimisation, and 4) realism. The authors are unaware of any published reliability and validity data for this questionnaire. An additional measure of cognitions relating to sexual offending was included in the study because there were differences in the manner in which the QACSO and the SOSAS are administered. Firstly, responses are gained from items on the SOSAS using post-boxes to signify the degree of agreement or disagreement on a five-point scale, while the QACSO relies on verbal communication

(‘yes’, ‘no’ or ‘don’t know’ answers). Secondly, there are differences between the SOSAS and the QACSO in terms of item content. The items on the SOSAS are more general and require the participant to make responses in consideration of their own sexual offending behaviour, while the QACSO attempts to measure attitudes to sexual offending behaviour of differing types, without directing the respondent to consider the items in relation to the own sexual offending behaviour. Cronbach’s alpha for this questionnaire was $k=0.68$, which is barely acceptable

Victim Empathy Scale- Adapted (VESA; adapted from Beckett & Fisher, 1994)

The VESA was originally developed for use with sexual offenders who do not have intellectual disabilities. The Victim Empathy Scale-Adapted has been modified for use with sexual offenders who have intellectual disabilities by reversing the wording and scoring of some of the statements to reduce double negatives as people with intellectual disabilities may find these especially difficult to understand. Respondents are asked to consider how they and their victim feel about a series of statements regarding the respondents’ sexual offending. Responses to the items are rated on a four point Likert type scale represented by four columns of varying heights to indicate degree of agreement or disagreement. This visual-analogue rating scale is also a modification over the original version of the scale, and is intended to assist men to understand the scale. There are no previous reliability or validity data for the revised version of the measure, but the internal consistency of the original scale has been reported as 0.89 with child molesters (Fisher, Beech & Browne, 1999), and Cronbach’s alpha has been found to be 0.90 for child molesters (Fisher, Beech & Brown, 1999) and 0.91 for child molesters and

0.93 for sexual offenders targeting adults by other authors (Tierney & McCabe, 2001). For the current study, which made use of the revised instrument, Cronbach's alpha was high, being $k=0.91$.

Ethical Opinion

This project was approved as an amendment to the main SOTSEC-ID project by the South West Multi-Centre Research Ethics Committee. Informed consent had previously been sought from all of the participants who took part in the current research project as part of the procedures associated with the SOTSEC-ID trial. No further new data were collected for this present study other than through therapists rating of the offending pathways. All data were stored and analysed such that the identity of participants was not known to the researchers.

Data Preparation and Analysis

Following the completion of the therapist ratings for the offending pathways, and research checks on this data, participants were assigned to one of the four offending pathway groups. Data were entered onto SPSS and visually inspected for departures from the normal distribution, and kurtosis and skewness statistics were examined. Given that some of the data violated the assumptions of normality, non-parametric statistics were employed to examine the differences between groups. Specifically, to compare the interval data associated with offenders who were categorised as Approach and Avoidant offenders, the Mann Whitney U statistic was used; this was also employed to investigate the statistical significance of any differences between offenders categorised as Active and

Passive. The χ^2 statistic was used to investigate the statistical significance of any differences between groups with regard to frequency data.

Results

Classification of Participants According to Offending Pathways

Considering the sample of N=34, and the final classification, four (12%) participants were found to fall within the avoidant-passive offending pathway, two (6%) within the avoidant-active pathways, 12 (35%) within the approach-automatic pathway, and 16 (47%) within the approach-explicit pathway (Table 1).

TABLE ONE ABOUT HERE

Sexually Abusive Behaviour Directed at Children or Adults

The difference between offenders whose index offence was against children or adults was examined. Significant differences were found with respect to the number of court appearances (Mann Whitney U=19.50, p=0.02, two tailed), police interviews (Mann Whitney U=22.00, p=0.05, two tailed), and number of previous sexual offences (Mann Whitney U=16.50, p=0.009, two tailed). Participants who engaged in sexually abusive behaviour against adults scored significantly higher on all of these variables (Table 2).

There was also no significant difference between participants who had committed sexually abusive behaviour against adults or children on the SOSAS, QACSO, VESA, or the SAK, with the exception of the Sexual Awareness section on the SAK, where participants who committed sexually abusive behaviour against children scored significantly higher (Mann Whitney U=70.50, p=0.02, two tailed; Table 2).

INSERT TABLE TWO ABOUT HERE

Offence Related Data: Approach vs. Avoidant

There were no significant differences between those offenders categorised as Approach, compared to those categorised as Avoidant, with respect to the number of previous sexual abusive behaviours (excluding the most recent behaviour) or number of police interviews (Table 3). However, those categorised as Avoidant had appeared in court significantly more times as a consequence of their sexual abusive behaviour than those categorised as Approach (Mann Whitney $U=11.50$, $p=0.04$; Table 3).

There was also no significant difference between Approach and Avoidant offenders with regard to victim gender, or relationship to the victim (Table 3). There was also no difference between these two groups regarding whether or not they were interviewed by the police, or had previously committed a sexually abusive behaviour.

INSERT TABLE THREE ABOUT HERE

Offence Related Data: Active vs. Passive

There were no significant differences between those offenders categorised as Active, compared to those categorised as Passive, with respect to the number of previous sexually abusive behaviours (again, excluding the most recent behaviour), or number of police interviews (Table 3).

There was also no significant difference between Active and Passive offenders with regard to victim gender, and whether or not they had been interviewed by the police, appeared in court, or had previously committed a sexually abusive behaviour was examined (Table 3). Although all Active offenders had committed sexual assaults against victims outside their immediate family in comparison to Passive offenders, who had committed both intra- and extra-familial offences, this difference was not statistically significant.

General Intellectual Functioning

Examining the intellectual functioning of offenders revealed that Approach offenders had a significantly higher Full Scale IQ (Mann Whitney $U=18.50$, $p=0.04$) and Performance IQ (Mann Whitney $U=17.00$, $p=0.04$) than Avoidant offenders (Table Three).

Considering the offending strategy employed by participants revealed that Active offenders also had a significantly higher Full Scale IQ (Mann Whitney $U=43.50$, $p=0.03$), and Verbal IQ (Mann Whitney $U=39.50$, $p=0.03$) than Passive Offenders (Table 4).

Sexual Knowledge and Relationships

There were no significant differences between Approach and Avoidant offenders on the SAK (Table 4). Similarly, there were no significant differences between Active and Passive offenders on most sections of the SAK, with the exception of the “Understanding Relationships” section where Active Offenders scored significantly higher on this section (Mann Whitney $U=89.50$, $p=0.04$), possibly an effect of their higher level of general intellectual functioning.

Cognitive Distortions and Victim Empathy

Offenders categorised as having an Approach goal scored significantly higher than offenders categorised as having an Avoidant goal on the “Denial” section of the SOSAS (Mann Whitney $U=30.00$, $p=0.02$) and on the Total Score for the SOSAS (Mann Whitney $U=32.50$, $p=0.03$; Table 4). There were no significant differences between Approach and Avoidant offenders on the QACSO or the VESA (Table 4).

INSERT TABLE FOUR ABOUT HERE

Comparing offenders with an Active strategy to those with a Passive Strategy revealed that there were no significant difference between these two groups on the SOSAS, nor on almost of the sections of the QACSO, with the exception of the Homosexual Assault section, where Passive offenders scored significantly higher than Active offenders (Mann

Whitney $U=96.00$, $p=0.05$; Table 4). There was no difference between Active and Passive offenders on the VESA (Table 4).

Discussion

Although the self-regulation model (Ward & Hudson, 1998b) was not developed using sexual offenders with an intellectual disability, the current study does suggest that this population can be reliably classified using this model. Considering the hypotheses of the current study, offenders with an Approach goal presented with higher levels of cognitive distortions as measured by the Sex Offenders Self Appraisal Scale. However, Approach offenders did not score significantly higher on the Questionnaire on Attitudes Consistent with Sexual Offending, the Victim Empathy Scale, nor was there any evidence that they had engaged in more prolific offending. Therefore, there is only partial support for our hypotheses that Approach offenders with an intellectual disability would have higher levels of distorted cognitions, less victim empathy, and a history of engaging in more prolific offending behaviour as evidenced by offending involving children outside their immediate family, and a higher number of previous offences.

Considering offenders with a Passive (Automatic) strategy, in comparison to offenders with an Active (Explicit) strategy, they were found to have a lower level of general intellectual functioning, and to have scored lower on the “Understanding Relationships” section of the Sexual Knowledge and Attitudes Scale. There was no evidence to suggest that offenders with a Passive strategy had more known offences or convictions. There is support for our hypothesis that offenders with a Passive strategy would have a lower level of general intellectual functioning, but there was no evidence to suggest that this group had more known offences and convictions.

Interestingly, offenders with an Approach goal were also found to have higher levels of general intellectual functioning, in comparison to offenders with an Avoidant goal. This result was not expected and has not been previously reported, although it does make sense, in that offenders with an Approach goal are thought to make more extensive use of planning to commit offence. For example, although Bickley & Beech (2002) reported that offenders with a Passive strategy had a significantly lower level of intellectual functioning as compared to offenders with an Active Strategy, there was no difference in their study between offenders with an Approach and Avoidant goal in terms of intellectual functioning. Bickley & Beech (2002) did not include participants who would be classed as having an “intellectual disability” in the United Kingdom, while the majority of the participants in the present study would be seen to have a “Borderline” or “Mild” intellectual disability. There is no theoretical reason why sexual offenders with an Avoidant goal, that is those offenders who do not wish to commit a sexually abusive behaviour, should have a lower level of general intellectual functioning in comparison to offenders with an Approach goal. Hence, theoretically, these results are surprising. However, it may be possible that raters were biased toward classifying offenders with higher levels of general intellectual functioning as having an Approach goal; for example, raters may have seen these offenders as having more skills, and more complex plans around their offence, and therefore, increased responsibility for their behaviour.

Considering Ward & Hudson’s (1998b) self-regulation theory more closely, there are two offending pathways which appear more likely to describe the processes that occur during the commission of a sexually abusive behaviour by a person with an intellectual

disability. Specifically, offenders who fall within the Avoidant-Passive pathway have a desire to avoid offending, but do not have the required skills to prevent an offence from occurring, while the Approach Automatic (Passive) offender does not have a desire to prevent an offence, has a degree of impulsivity, an external locus of control, and engages in behaviour to support offending which is poorly planned. However, within the current study, most offenders (47%) were classified as Approach Explicit (Active), while 35% were classed as Approach Automatic (Passive), 6% being classed as Avoidant Active and 12% being classed as Avoidant Passive. The percentages of offenders classified into these different categories is not overly dissimilar from that reported by Bickley & Beech (2002) who used a sample of sexual offenders without an intellectual disability referred for treatment. Hence, there is little support to suggest that sex offenders with an intellectual disability are much more likely to be classed as Avoidant Passive or Approach Automatic (Passive). It may be the case that because we made use of a sample of sexual offenders who were referred for treatment we have included participants that have a more serious history of sexual offending and are considered to be at risk of engaging in future sexual offending, and therefore more likely to have Approach goals. It would be interesting to compare how therapists would classify sex offenders with and without intellectual disabilities using Ward & Hudson's (1998b) self-regulation theory, as in comparison to offenders without an intellectual disability, the current participants may be seen to have strategies that would be more likely to be categorised as Passive in comparison to the strategies employed by people without intellectual disabilities.

Although it was possible to categorise the participants included in the current study according to Ward & Hudson's (1998b) self-regulation theory, there was only limited support for the hypotheses generated as part of this study. There are several potential reasons for the lack of significant findings. The first involves the sample size included in this study. Although the sample size is reasonably large (N=34) in comparison to many other studies that have involved sexual offenders with an intellectual disability, the classification of offenders by goal led to fewer participants with an Avoidant goal as compared to an Approach goal. As previously mentioned, this may be associated with making use of a treatment sample, and if it had been possible to recruit a much larger sample size, further statistically significant differences between groups may have been detected.

Secondly, there is the possibility that some of the measures employed as part of the study may have not been reliable and valid instruments. There is a lack of satisfactory psychometric instruments which can be used to assess people who have intellectual disabilities and a history of sexual offending behaviour. This is beginning to change, and there is some evidence to suggest that the QACSO is reliable and valid (Broxholme & Lindsay, 2003). Cronbach's alpha calculated as part of the current study for the VESA, and SAK was satisfactory, while it was just about satisfactory for the SOSAS. Clearly, urgent work needs to take place to generate further psychometric data for questionnaires that can be used with people who have intellectual disabilities.

Thirdly, there is the possibility that Ward & Hudson's (1998b) self-regulation theory is not entirely valid for use with people who have intellectual disabilities and a history of committing sexually abusive behaviours. However, there was some support suggesting that Approach offenders have higher levels of distorted cognitions, and engage in higher levels of denial about the negative impact their offending has had upon their victims. The suggestion that Passive offenders would have a lower level of intellectual functioning was also supported. These findings lend partial support the validity of this model for use with sex offenders who have intellectual disabilities. However, other aspects of the hypotheses were not supported, specifically, predictions regarding victim empathy and the severity of offending according to classification. This may have resulted from our inclusion of offenders who have engaged in sexually inappropriate behaviour against both children and adults. The original model was developed using child molesters, and although self-regulation theory is likely to be applicable to sexual offences involving other vulnerable victims (e.g. adults with intellectual disabilities), it may not predict offences processes quite as well for this type of sexually abusive behaviour. However, on the majority of the measures employed during the current study there were no significant differences between participants who had a history of sexually abusive behaviour directed at children as compared to those who had a history of sexually abusive behaviour directed at adults. However, participants with a history of engaging in sexually abusive behaviour directed at adults had more police interviews, more court appearances, and more previous incidents of sexually inappropriate behaviour. Although we have no evidence, this difference may have resulted from the differing reactions of authorities

toward sexually abusive behaviour directed at children, as opposed to adults (Holland, Clare & Mukhopadhyay, 2002).

Finally, it would therefore be worthwhile to complete a qualitative study investigating the processes that occur during the commission of an offence by sexual offenders with intellectual disabilities. Some of this work has already been completed by Courtney et al., (2006), but a larger qualitative grounded theory study would allow for the development of sexual offending pathway models specific for this population which could then be subject to empirical investigation.

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Table One: Therapists ratings of the offending pathways of participants.

RATER TWO	RATER ONE				Total
	Avoidant-Passive	Avoidant-Active	Approach-Automatic	Approach-Explicit	
Avoidant-Passive	4	-	-	-	4
Avoidant-Active	-	2	-	-	2
Approach-Automatic	-	-	9	2	11
Approach Explicit	-	-	2	15	17
% Agreement	100%	100%	82%	88%	88%
Final Classification	4	2	12	16	34

Table Two: Significant differences between participants who had a history of sexually abusive behaviour against children or adults.

	Participants		Mann Whitney U=	p= (two tailed)
	Offences against children (N=19)	Offences against adults (N=15)		
	M= (SD)	M= (SD)		
Number of Sexual Assaults	2.69 (4.71)	5.75* (3.41)	16.50	0.009
Number of Police Interviews	0.85 (1.28)	3.57* (3.95)	22.00	0.05
Number of Court Appearances	0.38 (0.87)	2.71* (3.40)	19.50	0.02
Sexual Knowledge and Attitudes Questionnaire – Sexual Awareness	29.39* (2.70)	26.90 (3.91)	70.50	0.02

Table Three: Offence related information for participants categorised into the four different offending pathways.

	Approach (N=28)	Avoidant (N=6)	Mann Whitney U	(1 tailed) p=	Active (N=18)	Passive (N=16)	Mann Whitney U	(1 tailed) p=
Number of Sexual Assaults	M= (SD) 3.65 (4.54)	M= (SD) 4.75 (4.50)	30.50	0.38	M= (SD) 5.08 (5.25)	M= (SD) 1.88 (1.36)	35.00	0.11
Number of Police Interviews	1.06 (1.24)	4.75 (5.19)	19.00	0.10	2.42 (3.40)	0.88 (1.13)	37.00	0.19
Number of Court Appearances	0.63 (1.02)	3.50* (4.51)	11.50	0.04	1.75 (2.86)	0.38 (0.74)	32.50	0.08
	Approach (N=28)	Avoidant (N=6)	χ^2	(1 tailed) p=	Active (N=18)	Passive (N=16)	χ^2	(1 tailed) p=
<i>Victim Gender</i>	Percent	Percent			Percent	Percent		
Male	36	17	0.86	0.33	33	31	0.03	0.49
Female	53	67			56	56		
Both	11	16			11	13		
<i>Police Interview?</i>								
Yes	84	100	0.73	0.20	93	75	1.55	0.11
No	16	0			7	25		
<i>Court Appearance?</i>								
Yes	71	50	0.62	0.22	71	57	0.43	0.26
No	29	50			29	43		
<i>Previous Sexually abusive behaviours?</i>								
Yes	68	67	0.07	0.40	67	75	0.17	0.34
No	32	33			33	25		
<i>Relationship to Victim</i>								
Intrafamilial	4	17	1.53	0.11	0	13	2.39	0.06
Extrafamilial	96	83			100	87		

Table Four: General level of intellectual functioning, sexual knowledge, distorted cognitions, and victim empathy data for offenders categorised into the four offending pathways.

	Approach (N=28)	Avoidant (N=6)	Mann Whitney U	(1 tailed) p=	Active (Explicit) (N=18)	Passive (Automatic) (N=16)	Mann Whitney U	(1 tailed) p=
	M= (SD)	M= (SD)			M= (SD)	M= (SD)		
Weschler Full Scale IQ	69.33* (7.72)	61.50 (6.03)	18.50	0.04	70.36* (7.67)	65.18 (7.60)	43.50	0.03
Weschler Verbal IQ	68.90 (8.37)	64.50 (4.43)	24.50	0.11	70.23* (7.76)	65.73 (7.82)	39.50	0.03
Weschler Performance IQ	73.90* (9.26)	64.75 (6.95)	17.00	0.04	74.54 (10.43)	69.82 (7.85)	53.00	0.15
<i>Sexual Knowledge and Attitudes Scale</i>								
Understanding Relationships	4.91 (1.10)	4.83 (1.17)	77.50	0.43	5.19* (0.91)	4.53 (1.22)	89.50	0.04
Social Interaction	2.35 (0.79)	2.67 (0.52)	64.00	0.19	2.58 (0.60)	2.20 (0.88)	100.50	0.09
Sexual Awareness	28.13 (3.68)	28.83 (2.64)	75.00	0.39	28.94 (2.69)	27.43 (4.20)	107.00	0.15
Assertiveness	8.15 (1.76)	8.17 (2.14)	71.00	0.32	8.50 (1.38)	7.73 (2.18)	109.50	0.17
Total	43.54 (6.20)	44.50 (4.76)	79.50	0.47	44.94 (4.19)	41.90 (7.18)	92.00	0.06
<i>Questionnaire on Attitudes Consistent with Sexual Offending</i>								
Rape	10.36 (5.67)	7.67 (5.72)	62.00	0.16	8.72 (6.11)	11.19 (5.05)	108.00	0.11
Voyeurism	4.93 (2.34)	4.00 (2.19)	67.00	0.22	4.50 (2.73)	5.06 (1.77)	123.00	0.24
Exhibitionism	6.64 (4.06)	6.67 (3.27)	81.00	0.45	6.50 (4.54)	6.81 (3.12)	130.50	0.323
Dating Abuse	7.43 (4.00)	7.17 (5.81)	83.00	0.48	6.50 (4.31)	8.38 (4.13)	108.50	0.11
Homosexual Assault	5.71 (3.25)	6.00 (3.79)	78.50	0.40	4.89 (3.31)	6.75* (3.09)	96.00	0.05
Paedophilia	8.79 (6.13)	9.67 (4.46)	72.00	0.61	8.06 (6.62)	9.94 (4.78)	103.50	0.08
Stalking & Sexual Harassment	11.04 (6.59)	15.00 (8.17)	60.50	0.14	11.39 (8.15)	12.13 (5.46)	122.50	0.23
Total	54.83 (24.81)	56.17 (26.87)	79.00	0.42	50.56 (28.55)	60.13 (19.32)	107.50	0.11
<i>Sexual Offenders Self Appraisal Scale</i>								
Denial	15.00* (4.82)	10.67 (3.67)	30.00	0.02	14.43 (5.64)	13.71 (4.18)	90.50	0.49
Victim Blaming	15.00 (5.25)	14.67 (3.93)	64.00	0.47	14.43 (5.92)	15.43 (3.86)	83.00	0.36
Minimisation	14.77 (5.89)	11.00 (4.69)	43.00	0.10	13.29 (5.44)	14.64 (6.25)	78.50	0.28
Realism	10.82 (3.97)	10.00 (3.95)	55.00	0.27	10.79 (4.34)	10.50 (3.59)	87.00	0.43
Total	55.59* (10.02)	46.33 (11.55)	32.50	0.03	52.93 (11.75)	54.29 (10.27)	87.00	0.44
<i>Victim Empathy Scale</i>								
Total	34.95 (19.48)	31.00 (8.41)	69.50	0.45	36.80 (20.54)	31.51 (14.73)	105.00	0.39