

# Center for Sex Offender Management

A Project of the Office of Justice Programs, U.S. Department of Justice

## Female Sex Offenders

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### Introduction

Although the vast majority of attention on sex crimes focuses on men as the offenders, an increased awareness of females as sex offenders has surfaced in recent years. Highly publicized cases involving inappropriate and illegal sexual contact between female high school teachers and their male students are a primary source of this growing attention. These cases are not representative of the full nature or scope of sexual abuse committed by females, however, and they have the potential to promote myths and misperceptions about the broader issue of female-perpetrated sex crimes.

This policy and practice brief synthesizes the research and other professional literature about women and adolescent girls who commit sex offenses. This review encompasses what is known about the seemingly low incidence of these crimes and their under-recognition, common characteristics and typologies of female sex offenders, and key considerations relative to assessment, treatment, and supervision strategies. It is intended for a wide range of professionals, including criminal and juvenile justice practitioners, court officials, treatment providers, child welfare personnel, victim advocates, and others who may be involved in the broader management of this special population.

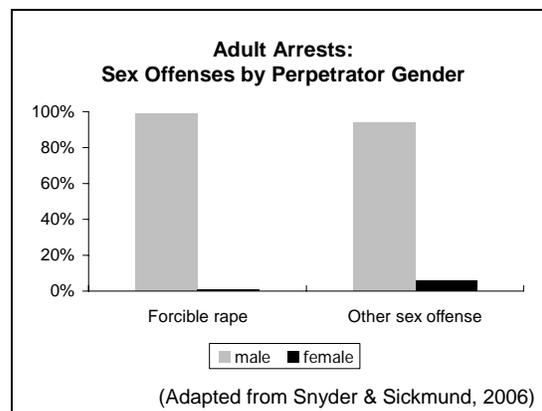
At present, the research and literature about this unique segment of the sex offender population remains in its infancy, and there is no evidence-based guidance or other consensus about the most effective approaches to working with them. Experts do agree, however, that understanding female sex offenders remains a significant area of need within the criminal and juvenile justice fields.

### The Extent of Sex Offending by Females

Because sexual victimization is significantly underreported overall, reliable information about the incidence of sex crimes committed by females is difficult to obtain. Nonetheless, a variety of sources can collectively provide a working estimate of the scope of the problem, including arrest trends, census and caseload data from criminal and juvenile justice agencies, representation in sex offender treatment programs, and victimization reports.

#### Arrest Data

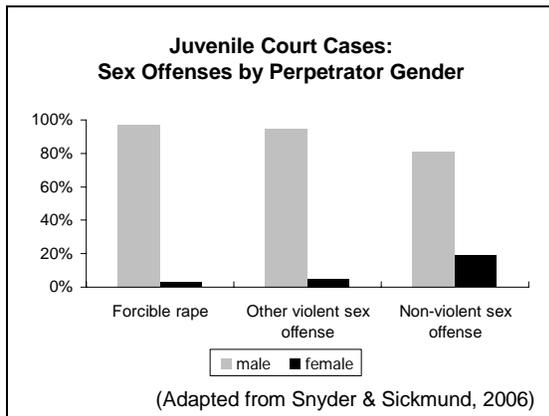
National criminal justice statistics reveal that of all adults and juveniles who come to the attention of the authorities for sex crimes, females account for less than 10% of these cases (FBI, 2006). Specifically, arrests of women represent only 1% of all adult arrests for forcible rape and 6% of all adult arrests for other sex offenses.



Parallel data concerning adolescent sex offenders indicate that females are responsible for 3% of forcible rape cases and 5% of other violent sex offenses – and 19% of non-violent

sex offenses – handled by the juvenile courts annually (Snyder & Sickmund, 2006).

It is of interest to note that while arrests of adult women for sex offenses have decreased in recent years, the number of adolescent girls coming to the attention of the juvenile courts for sex offenses has increased significantly (Snyder & Sickmund, 2006). More specifically, between 1997 and 2002, juvenile cases involving female-perpetrated forcible rapes, other violent sex offenses, and non-violent sex offenses rose by 6%, 62%, and 42%, respectively.



### Census and Caseload Data from Criminal and Juvenile Justice Agencies

In contrast to the approximately 140,000 men incarcerated in prisons nationwide for sex crimes, only 1,500 women are estimated to be imprisoned for these offenses (Harrison & Beck, 2005). They represent only 1% of all adults incarcerated for sex offenses, and 2% of all females in prison. Similarly, adolescent girls represent only 2% of the roughly 7,500 sex offenders placed in juvenile residential facilities nationwide, and they account for only 1% of all girls in residential placements (Snyder & Sickmund, 2006).

Within the community, women represent 23% of adult probationers and 12% of parolees (Glaze & Bonczar, 2006). Because sex offenders represent only a fraction of all adults under supervision, the number of adult female sex offenders under probation or parole supervision is extremely small.

### Representation in Sex Offender Treatment Programs

Data from sex offender treatment programs across the country indicate that roughly one third of programs provide services to female sex offenders; well over 300 programs served adult women, and more than 250 provided treatment to adolescent girls (McGrath, Cumming, & Burchard, 2003). While nearly 3,800 adult women and 2,700 adolescent girls were served by those programs, these figures represent less than ten percent of the total number of clients served across all sex offender programs. Nonetheless, this was nearly twice the proportion of female sex offenders that had been served in programs two years earlier.

### Victimization Reports

Information about the low proportion of sex offenses committed by females is fairly consistent, at least when relying on data about female sex offenders known to the criminal and juvenile justice systems. Yet when various individuals are surveyed about their sexual victimization experiences, the incidence of female-perpetrated sex crimes is often higher and much more variable. For example, reviews of multiple sources of victimization data reveal that up to 63% of female victims and as many as 27% of male victims report having been sexually victimized by a female (see, e.g., Schwartz & Cellini, 1995). In addition, although the National Criminal Victimization Survey – which captures information from victims who may or may not have reported the incident to the authorities – indicates that females represent up to 6% of rapes or sexual assaults by an individual acting alone, it also implicates female offenders in up to 40% of sex crimes involving multiple offenders (BJS, 2006).

### Factors Affecting the (Under) Recognition of Female-Perpetrated Sex Offenses

Collectively, the available information suggests that adult women and adolescent girls represent the minority of sex offenders. However, a lingering question remains as to

whether these data truly reflect a relative under-occurrence or if female sex offending is simply under-recognized, with external factors contributing to what seems to be an under-representation of females as sex offenders. It appears that both may be true.

In other words, much like crime in general, for which males comprise the vast majority of all arrests (FBI, 2006), there is no reason to believe that females would necessarily be responsible for a significantly greater proportion of sex crimes. On the other hand, there is evidence that sexual victimization perpetrated by females is likely to be under-identified – even more so than male-perpetrated sex offenses – for several reasons, including societal and cultural stereotypes, professional biases, problems with research methodologies, and unique dynamics that impact victims' disclosures of these offenses.

### **Sociocultural Influences**

At the macro level, sex offending long has been viewed within society as a male-only crime. This is, in part, because of pervasive gender role stereotypes about women as nurturing, caretaking individuals who are, by their very nature, unlikely to engage in aggressive or harmful behaviors toward others (see, e.g., Allen, 1991; Anderson & Struckman-Johnson, 1998; Denov, 2004; Hislop, 2001). Also potentially operating are sexist beliefs that depict males as controlling all sexual encounters and females as passive and submissive recipients (Allen, 1991; Becker, Hall, & Stinson, 2001; Denov, 2004; Schwartz & Cellini, 1995).

Misperceptions also exist about the “ability” of women to sexually victimize males, with some believing that males are incapable of being physically aroused if they are unwilling participants (Anderson & Struckman-Johnson, 1998; Hislop, 2001). This reflects not only a limited understanding of physiological responses, but also suggests a narrow view of female-perpetrated sexual victimization as solely involving members of the opposite sex. Finally, undoubtedly contributing to societal under-awareness of female-perpetrated sex offenses is the sheer volume and imbalance of cases involving males as offenders that are brought to the attention of the authorities.

### **Professional Biases**

Beliefs and perceptions at the macro level can, in turn, influence the perspectives and responses at a more micro level. Indeed, there is evidence that broader cultural biases play a role in the willingness of various criminal justice and treatment professionals to acknowledge female sex offending (see, e.g., Becker et al., 2001; Denov, 2004). For example, researchers found that training for law enforcement officers tends to be geared exclusively around men as sex offenders and women as victims. In combination with the sex role stereotypes that exist within society, this impacts the responses of law enforcement to female-perpetrated sex crimes (Denov, 2004). Specifically, the research revealed that police officers reacted with disbelief to allegations involving women, minimized the seriousness of the reports, viewed the female suspects as less dangerous and harmful, and were prone toward labeling the cases as “unfounded” (Denov, 2004).

Similar patterns have been identified within the medical and mental health fields, in which the interacting effects of training, diagnostic criteria, and cultural stereotypes are believed to impact professionals' considerations about sex offenses committed by females (Becker et al., 2001; Denov, 2004; Denov & Cortoni, 2006; Hunter & Mathews, 1997). When presented to psychiatrists and other clinicians, these kinds of cases have been met with skepticism and marginalization, and the women who committed the acts have been perceived as less culpable and less harmful (Denov, 2004; Hislop, 2001).

As a result, cases of sexual abuse perpetrated by adult women and adolescent girls may be less likely to be reported, and even if they are reported, they may not be aggressively pursued within child welfare, criminal justice, or juvenile justice systems (Becker et al., 2001; Bumby & Bumby, 2004; Denov, 2004; Hislop, 2001).

“The lack of public and professional cognizance of female sexual offending and its detrimental effects serves to deprive both the victims and the females who perpetrate against them of needed familial and professional support and intervention.”

(Hunter & Mathews, 1997, p. 465)

## Research Limitations

The recognition of female sex offending is further limited by the way in which research is designed (Anderson & Struckman-Johnson, 1998; Becker et al., 2001; Johansson-Love & Fremouw, 2006). Specifically, investigators may inadvertently define sexual victimization in a manner that reflects only behaviors that involve male perpetrators. In other instances, researchers examining sexual victimization simply fail to inquire about the gender of the perpetrator. The potential also exists for gender bias in research methods, whereby males are asked only about perpetration experiences and females are asked only about victimization experiences (Anderson & Struckman-Johnson, 1998; Hunter & Mathews, 1997).

Finally, the ability to increase awareness of this often neglected population of sex offenders is hampered considerably by the low numbers of adult and adolescent female sex offenders readily available for research. As the previously highlighted statistics indicate, male sex offenders far outnumber female sex offenders in prisons, juvenile correctional facilities, and specialized treatment programs. These considerably larger sample sizes of male sex offenders – which make research findings more robust, generalizable, and publishable – coupled with accessibility, efficiency, and methodological convenience, can make studying female sex offenders less “attractive” to researchers.

## Individual Concerns

Without question, these cultural, professional, and research influences create barriers to reporting female-perpetrated sexual abuse at the level of the individual victim.

Underreporting is also the result of an interaction between these unique dynamics and various factors already known to negatively impact victim disclosures of sexual abuse in general (e.g., shame, guilt, fear, and threats).

For example, adolescent girls may be reluctant to disclose experiences of sexual abuse perpetrated by a woman or female peer because they may begin to question – and fear that others may question – their sexual identity. Similarly, adolescent boys who are sexually abused by an adult woman may feel

emasculated and may worry about how others will perceive their masculinity (Hislop, 2001). In addition, particularly if they experienced physiological arousal, adolescent boys may feel ashamed, question whether their experience was in fact sexual abuse, and fear that their disclosures will be met by disbelief or minimization.

These concerns are certainly not without merit, given the evidence that sexual contact between an adult woman and an adolescent boy is considered by some to be a rite of passage, or even a “lucky” encounter for the boy (Becker et al., 2001; Denov, 2004; Hunter & Mathews, 1997). Moreover, some victims report that professionals dismiss, overlook, or show discomfort with the topic when victims disclose their abuse by a female (Denov, 2004; Hislop, 2001).

## Understanding Female Sex Offenders

In contrast to the burgeoning body of literature describing male sex offenders, the research on female sex offenders is considerably underdeveloped. Much of what exists is purely descriptive in nature and tends to be based on small samples of women and adolescent girls in clinical settings, making it impossible to draw reliable inferences about any defining characteristics, risk factors, or offense dynamics of female sex offenders as a whole. In addition, as is the case with male sex offenders, the research on female sex offenders thus far suggests that they are a heterogeneous population (see, e.g., Becker et al., 2001; Grayston & De Luca, 1999; Hunter, Becker, & Lexier, 2006; Johansson-Love & Fremouw, 2006).

## Adults: Characteristics and Typologies

Keeping in mind the limitations of the current state of the research as well as the diversity of the population, some preliminary findings about adult women who commit sex offenses suggest that they may have the following characteristics:

- Histories of childhood maltreatment, including sexual victimization;

- Mental health symptoms, personality disorders, and substance abuse problems;
  - Difficulties in intimate relationships, or an absence of intimate relationships;
  - A propensity to primarily victimize children and adolescents (rarely adults);
  - A tendency to commit offenses against persons who are related or otherwise well known to them; and
  - An increased likelihood of perpetrating sex offenses in concert with a male intimate partner.
- Predisposed: Histories of incestuous sexual victimization, psychological difficulties, and deviant sexual fantasies were common among these women, who generally acted alone in their offending. They tended to victimize their own children or other young children within their families.
  - Teacher/lover: At the time of their offending, women in this subtype were often struggling with peer relationships, seemed to regress and perceive themselves as having romantic or sexually mentoring “relationships” with under-aged adolescent victims of their sexual preference, and, therefore, did not consider their acts to be criminal in nature.

Certainly, not all of these characteristics apply to all sexually abusive women, and there are additional features and offense patterns that have been identified in some studies but not in others.

As a means of further categorizing groups of female sex offenders based on potential commonalities, a few professionals have attempted to identify typologies of sexually abusive women (Mathews, Matthews, & Speltz, 1989; Nathan & Ward, 2002; Vandiver & Kercher, 2004). In the seminal work of Mathews and her colleagues – which remains the most influential and commonly cited framework for female sex offender typologies – three primary subtypes emerged (Mathews et al., 1989):

- Male-coerced: These women tended to be passive and dependent individuals with histories of sexual abuse and relationship difficulties. Fearing abandonment, they were pressured by male partners to commit sex offenses, often against their own children.

As the authors acknowledged, these original typologies were not statistically generated and were based largely on the clinical observations of a sample of only 16 women, thus limiting the ability to generalize the findings to the larger population of female sex offenders. However, subsequent investigations have continued to support their applicability (Matthews, 1998; Nathan & Ward, 2002; Vandiver & Kercher, 2004).

Most recently, Vandiver and Kercher (2004) added considerably to the research by employing a statistical approach to identify subtypes, using the largest sample of female sex offenders to date. From the over 450 female sex offenders in the study, six statistically-derived clusters were revealed, some of which were consistent with the Mathews et al. (1989) typologies.

#### **Co-Offending Women Versus Solo Female Offenders**

Particularly unique to female-perpetrated sex offenses is the increased potential for a male co-offender. Until recently, little was known about the differences between male-accompanied female sex offenders and women who acted alone. In a comparative study of over 200 female sex offenders, several differences were identified (Vandiver, 2006). Specifically, co-offending women were more likely than female solo offenders to:

- Have multiple young victims;
- Victimize females – or both females and males – as opposed to males only;
- Target family members including their own children, versus solo offenders, who often target acquaintances; and
- Have been charged with non-sex crimes at the same time the sex offense charge occurred.

Unfortunately, because the data were limited to basic demographic and criminal record information, no specific features could be identified with respect to the motivating, psychosocial, or other characteristics of these women. Nevertheless, these findings converge around the notion that women who commit sex offenses are a heterogeneous population, and support the belief that there may be distinct subgroups of female sex offenders.

### **Adolescents: Characteristics and Typologies**

Perhaps even more so than with adult female sex offenders, the research on adolescent girls who commit sex offenses is very limited. Thus far, researchers have revealed the following common characteristics (see Bumby & Bumby, 2004; Frey, 2006; Hunter et al., 2006; and Robinson, 2006 for reviews):

- High prevalence of sexual victimization;
- Instability and dysfunction within the family and home;
- Co-occurring psychiatric disorders, including Post-Traumatic Stress Disorder;
- Victimizing young children within the family or with whom they are familiar;
- Targeting victims of either gender; and
- Acting alone, often offending within the context of care-giving activities.

Based on the current available literature, it appears that many of the characteristics of adolescent female sex offenders parallel those of their adult counterparts, although further research that explicitly examines their unique developmental circumstances is needed.

In terms of typology research, only one published study has offered a differentiation between subgroups of adolescent girls who have committed sex offenses (Mathews, Hunter, & Vuz, 1997). The following three preliminary subtypes were identified from the sample of 67 adolescent females:

- Those who engaged in a limited number of incidents against a non-related child within the context of babysitting. They were relatively inexperienced, naïve,

and somewhat fearful with respect to sexual matters, and their offending behaviors appeared to be motivated primarily by experimentation or curiosity. Histories of maltreatment, family dysfunction, and psychological difficulties were fairly limited within this subtype.

- Girls who appeared to be sexually reactive, generally abusing younger children in a manner that mirrored their own victimization. Although some in this subtype evidenced emotional, psychological, and other difficulties, these issues generally were not severe, and many of these youth possessed adequate social skills and other personality strengths.
- Adolescent females who engaged in more extensive and repetitive sex offending behaviors and who manifested much greater levels of emotional and psychosexual disturbance. Many had experienced considerable developmental trauma, including sexual victimization often beginning at an early age, which likely contributed to their significant difficulties with adjustment and stability.

### **Female Versus Male Sex Offenders: Similar or Different?**

Given the nature and dynamics of sex crimes, it should come as no surprise that individuals who commit sex offenses – regardless of gender – have several features in common. Indeed, many sexually abusive women and men show evidence of poor coping skills, relationship difficulties, cognitive distortions, and victim empathy deficits (see, e.g., Allen, 1991; Denov & Cortoni, 2006; Grayston & De Luca, 1999; Mathews et al., 1989; Nathan & Ward, 2001, 2002). In addition, with adolescents, co-occurring behavioral health needs, delinquency, low self-esteem, substance use, and family difficulties are common among samples of both girls and boys who have committed sex offenses (see, e.g., Bumby & Bumby, 1997; Mathews et al., 1997; Kubik, Hecker, & Righthand, 2002).

At the same time, several differences between female and male sex offenders have been noted, including the following (see, e.g., Becker et al., 2001; Davin, Hislop, &

Dunbar, 1999; Grayston & De Luca, 1999; Nathan & Ward, 2001; Vandiver, 2006):

- Sexual victimization histories are exceedingly more common among adult and adolescent female sex offenders than with male sex offenders, and their maltreatment experiences are often more longstanding, extensive, and severe;
- Adult women are more likely than men to commit sex offenses with a co-offending male, either in concert with the male or as a result of coercion by the male;
- Offending by adult and adolescent females is more likely to occur within the context of caregiving situations;
- Acts of rape are less common among female sex offenders, but when they occur, the victims tend to be the same gender, unlike the victims of male-perpetrated rapes;
- The victims of adolescent female perpetrators more often than adolescent male offenders tend to be young children; and
- When child victims are involved, adolescent female offenders are more likely than adolescent males to target both genders, whereas adolescent males more commonly target children of the opposite sex.

These similarities and differences have implications for the ways in which these women and girls are managed in the criminal and juvenile justice systems.

## **No Easy Answers About Effective Management Strategies**

The knowledge base about female sex offenders has increased in recent years, although the current state of the research still leaves professionals responsible for managing sexually abusive females with only a rudimentary understanding of this special population. In addition, the identified heterogeneity found within samples of adult and adolescent female sex offenders –

coupled with the various similarities among and differences between female and male offenders – increases the complexity of management efforts.

Furthermore, specialized risk and needs assessment tools are lacking for female sex offenders, making key decisions difficult at various points throughout the system (e.g., sentencing/disposition, inpatient or correctional programming, release planning, community supervision, and treatment progress). And with respect to treatment and supervision specifically, the literature offers only preliminary recommendations about gender-responsive practices, the majority of which remain empirically untested. Put simply, best-practice or evidence-based guidance with female sex offenders does not exist at this time. Taken together, these realities often raise more questions than answers about how to intervene most effectively with this population.

## **The Importance of Gender-Responsiveness**

Historically, when direction is lacking for special populations, criminal and juvenile justice professionals have tended to rely on existing management strategies designed for those in the majority. While this is not ideal, it is perhaps understandable. This, too, has been the case with female sex offenders, whereby interventions have been largely modeled after approaches used with male sex offenders. In some ways, this may have been a logical starting point because, as the preceding review indicated, several commonalities exist among sexually abusive females and males.

At the same time, identified differences indicate the need to develop gender-responsive management strategies specific to this population. Indeed, the unique risk and protective factors, distinctive developmental pathways to crime and delinquency, and fundamental differences between genders necessitates that the criminal and juvenile justice systems take into account the needs of women and girls overall (see, e.g., Bloom, Owen, & Covington, 2003; Chesney-Lind & Sheldon, 2004; Moffitt, Caspi, Rutter, & Silva, 2001). And in recent years, key findings from the research and other professional literature

with general female offenders – both adult and juvenile – have formed the basis for recommendations about the implementation of gender-responsive services, including the following (Bloom et al., 2003):

- To maximize effectiveness, policymakers and practitioners must acknowledge that gender makes a difference;
- The environments in which management strategies are implemented must ensure safety, respect, and dignity;
- Because relationships play a key role in the lives of women and girls, their importance must be incorporated into the ways in which the criminal and juvenile justice systems operate;
- The interrelatedness of substance abuse, trauma, and mental health needs are particularly germane to this population, and must be addressed through integrated management efforts;
- The commonly identified socioeconomic challenges for women offenders warrant a dedicated focus on providing them with specific opportunities and services that can improve these conditions; and
- Collaborating to provide a system of holistic and comprehensive services within the community is critical to effective outcomes.

This and other influential work on gender-responsiveness, in combination with lessons from the broader sex offender management field, provides an ideal foundation for assessment, treatment, and supervision strategies for sexually abusive females. Developing appropriate management approaches for this special population also requires consideration of the sociocultural influences, professional biases, and various individual factors that impact the ways in which systems respond to female-perpetrated sex offenses. But as outlined briefly in the sections that follow, this has proven to be easier said than done.

## Assessment

As is the case with any individual who has committed a sex offense, decisionmaking with sexually abusive females should be informed by comprehensive assessment information. Ideally, such an assessment includes information from a range of sources and takes into account multiple factors including – but not limited to – the nature and extent of the sexual behavior problems, psychosocial functioning, healthcare needs, quality of interpersonal relationships, family and environmental circumstances, and developmental experiences, such as a history of victimization or other trauma and its associated impact.

In addition to record reviews and clinical interviews with offenders and collaterals to obtain this and other relevant information, the use of various assessment instruments can provide objective data to guide intervention planning. Although many general psychological assessment instruments have been validated on samples of women and girls and are often used to assess intellectual, personality, and psychological functioning with females in the criminal and juvenile justice systems, they provide no specific information with respect to sexually deviant attitudes and behaviors. Unfortunately, most tools that assess sex offense-specific issues have been developed for and normed on male sex offenders, making their use with female sex offenders questionable, at best.

### *Risk assessment*

Similarly, in contrast to the availability of several empirically validated risk assessment instruments designed specifically for adult male sex offenders – and a few promising tools for adolescent male sex offenders – no such measures have yet been developed for sexually abusive females, either adult or adolescent. The extremely low numbers of female sex offenders that come to the attention of the authorities and that are available for follow-up studies significantly impedes researchers' attempts to identify specific risk factors associated with sexual recidivism among this population (Denov & Cortoni, 2006; Nathan & Ward, 2001).

### Key Examples of Risk Factors for Women and Girls

#### Women

- Low self esteem
- Self-injury, suicidal attempts
- Victimization during childhood and/or adulthood
- Employment difficulties
- Low educational attainment
- Difficulties in intimate relationships
- Antisocial peers and attitudes
- Mental health difficulties
- Substance abuse

#### Adolescent Girls

- Sexual and physical victimization
- Dysfunctional family
- Parent/child relationship difficulties
- Antisocial peers
- Academic failure
- Pregnancy
- Early onset of puberty
- Mental health difficulties
- Substance abuse

(see, e.g., Blanchette & Brown, 2006; Chesney-Lind & Shelden, 2004)

The literature on risk factors and crime-producing needs with adult women and adolescent girls in the criminal and juvenile justice systems can, however, be instructive with respect to risk considerations with female sex offenders. Indeed, many sexually abusive females share a number of psychosocial needs with other justice-involved women and girls, many of which are associated with risk for further criminal or delinquent behavior (see, e.g., Denov & Cortoni, 2006; Grayston & De Luca, 1999; Hunter et al., 2006; Robinson, 2006). For example, the links between victimization and other trauma, mental health difficulties, substance abuse, and crime and delinquency have been established with adult women and adolescent girls (see, e.g., Bloom et al., 2003; Chesney-Lind & Shelden, 2004) and, as noted previously, these factors are commonly identified among sexually abusive women and girls as well.

Even with the awareness of these factors and needs, empirically validated tools for women offenders and delinquent girls remain lacking, with very few exceptions. For example, the Level of Service Inventory-Revised and the Youth Level of Service/Case Management Inventory have been validated on adult and adolescent females, respectively (Andrews & Bonta, 1995; Hoge, Andrews, & Lescheid, 2002; Schmidt, Hoge, & Gomes, 2005). However, these tools were largely developed based on the identified risk factors and criminogenic needs of males. Even though many of the risk factors and needs have relevance for females, these and other measures validated with females are not explicitly framed around the unique risk and

needs of female offenders, and, therefore, may not adequately and accurately capture the experiences of women and girls and the ways in which various risk factors and needs interact (see, e.g., Blanchette & Brown, 2006; Hollin & Palmer, 2006; Van Voorhis & Presser, 2001). Notwithstanding their limitations – and keeping in mind that the risk of sexual recidivism is not specifically addressed – these tools can provide broad guidance for the assessment and intervention planning with sexually abusive females.

#### *Physiological assessment*

A final note regarding assessment involves the use of physiological methods to identify the potential presence of deviant arousal, interests, or preferences. For example, with adult male sex offenders, the penile plethysmograph and viewing time measures are often used as part of a comprehensive assessment. Identifying these factors among sexually abusive men is important because of their significant correlation with recidivism (Hanson & Bussiere, 1998; Hanson & Morton-Bourgon, 2004). Deviant interests and preferences are also believed to be associated with recidivism among adolescent males (see, e.g., Worling & Langstrom, 2006).

Yet for female sex offenders, little is known about whether these elements are a driving factor in their offense patterns or whether they are correlated with reoffending (Grayston & De Luca, 1999; Hunter & Mathews, 1997; Nathan & Ward, 2001, 2002). Intuitively, deviant arousal, interests, and preferences would be important assessment targets with

sexually abusive females, but only through further empirical research can this be confirmed. Moreover, because of a lack of research on the reliability and validity of physiological measures to assess deviant arousal and interests with female sex offenders (i.e., vaginal photoplethysmography, viewing time), their use with adult women is questionable (Hunter & Mathews, 1997), and with adolescent girls they are inadvisable (see, e.g., Robinson, 2006).

## Treatment

Initially, many treatment programs for female sex offenders mirrored programs for males and, in some instances, female sex offenders were placed in treatment groups *with* males (Mathews et al., 1989). Over time, however, the field began to witness a gradual movement away from exclusively male-modeled programs (and placement in treatment programs with males) in favor of more gender-responsive sex offender treatment. And particularly in the past few years, the need for such tailoring has been emphasized in the literature pertaining to sexually abusive women (Denov & Cortoni, 2006; Hislop, 2001; Hunter & Mathews, 1997; Mathews, 1998; Nathan & Ward, 2001) and adolescent girls who have committed sex offenses (Bumby & Bumby, 2004; Frey, 2006; Hunter et al., 2006; Mathews et al., 1997; Robinson, 2006).

Based on their unique needs and differing typologies, the following treatment goals are particularly salient for female sex offenders:

- Establishing and maintaining trusting, supportive, and equitable intimate relationships;
- Promoting autonomy and self-sufficiency;
- Developing a positive self-concept;
- Enhancing assertiveness and social competency;
- Increasing effective emotional management;
- Reducing self-destructive/self-injurious behaviors; and

- Ensuring healthy sexual development, expression, and boundaries.

With adolescent girls, it is also important to understand their overall development within the context of family, peers, and schools, and ensure that targets of intervention take into account those multiple determinants (Frey, 2006; Hunter et al., 2006; Robinson, 2006).

The comparatively high rates of sexual victimization and trauma that are common to both adolescent and adult female sex offenders also suggest that treatment will often need to include an emphasis on addressing trauma and its impact on emotional, social, psychological, and sexual adjustment. For example, identifying and treating co-morbid psychiatric conditions such as Post Traumatic Stress Disorder (PTSD) is critical for female sex offenders who have experienced significant trauma, especially given the higher prevalence of this disorder among women and adolescent girls (Bloom et al., 2003; Hunter et al., 2006). But as always, practitioners must take great care to effectively and compassionately address victimization issues without minimizing or justifying sexually abusive behaviors (see, e.g., Denov & Cortoni, 2006; Hislop, 2001; Nathan & Ward, 2001).

These gender-responsive targets and considerations – together with the more “traditional” expectations of sex offender treatment, such as accepting responsibility, modifying cognitive distortions, enhancing empathy, identifying risk factors and triggers, and developing effective coping responses – are consistent with the overarching goal of ensuring that these women and girls are able to lead productive, meaningful, and satisfying lives without compromising the safety and wellness of others (Eldridge & Saradjian, 2000; Nathan & Ward, 2001).

### *Current programming trends*

In light of advances in the treatment literature about female sex offenders, the question arises as to whether accompanying changes in actual practices have followed. Unfortunately, recent national data from sex offender programs suggest that the way in which treatment is designed for sexually abusive females and males remains very similar in

### The Building Blocks of Gender-Responsive Sex Offender Treatment

- Recognize the heterogeneity of sexually abusive females;
- Develop interventions that are based on the unique pathways to female offending;
- Appreciate the similarities among and differences between male and female sex offenders;
- Understand the developmental differences between adult and adolescent females who commit sex offenses;
- Acknowledge the victim-offender duality that exists among many women and girls who sexually abuse;
- Consider the potential impact of the unique sociocultural messages to which women and girls are exposed and which can affect their sense of identity; and
- Honor the role of relationships and family – both within and outside of the therapeutic context.

many ways (McGrath et al., 2003). To illustrate, reported practices with female and male sex offenders – both within adult programs and within adolescent programs – appear nearly identical in terms of the primary theories driving treatment, the core and ancillary targets of treatment, and the frequency of group, individual, and family sessions provided per week.

On a more optimistic note, however, and consistent with some of the suggestions in the literature specific to female sex offenders, a few key differences were identified (McGrath et al., 2003). Most notably:

- Treatment programs for adult and adolescent females were much less likely than programs for males to report using arousal control methods;
- Programs serving women were more likely to report addressing sexual victimization or trauma, family reunification, and intimacy and relationship skills; and
- Treatment programs providing services for adolescent females were more likely to employ expressive and experiential approaches (e.g., art therapies, drama therapy), and to address family reunification and intimacy and relationship issues.

Although these data are somewhat promising, it remains difficult to ascertain the extent to which programs are truly responsive to the unique needs of adult women and adolescent girls. Factors that may shed additional light on this issue, such as program integrity variables (e.g., staff training and supervision, and individualized treatment planning) and process-related variables (e.g., therapist gender and style, and program climate) have

not yet been explored within female sex offender treatment. And unfortunately, most notably lacking are data about treatment outcomes for female sex offenders, making it impossible at this time to offer any defensible inferences about the effectiveness of these interventions.

### Community Supervision

As has been noted several times, the research and practice literature on assessment and treatment for female sex offenders remains in its infancy. As such, the field is still awaiting the development of specific and evidence-based guidance about how to supervise this unique population. Even with male sex offenders, professional writings about community supervision are comparatively lacking, with very few exceptions pertinent to adults (CSOM, 2000; Cumming & McGrath, 2000, 2005; English, Pullen, & Jones, 1996) and adolescents (Bumby & Talbot, in press; CSOM, 1999, 2007; Hunter, 2006; NAPN, 1993).

As a result, supervision officers have been left to extrapolate from the approaches used with sexually abusive males and the strategies emerging for general women offenders. For example, given the common dynamics involved in the commission of sex offenses, experts have suggested that the specialized conditions of supervision commonly imposed on male sex offenders – such as restricting employment or other activities that may increase exposure to potential victims, prohibiting unsupervised contact with minors, and limiting access to pornographic or sexually exploitive materials – may be equally applicable to female sex offenders (Cumming & McGrath, 2005).

Research with male offenders in the general correctional field reveals consistently that recidivism is reduced when supervision strategies complement or support rehabilitative programs and services (see, e.g., Aos, Phipps, Barnoski, & Lieb, 2001). Similar evidence exists within the gender-specific criminal justice literature, with investigators identifying better outcomes for female offenders when supervision approaches include a human services component in contrast to an exclusively surveillance-oriented or sanctions-driven approach to supervision (Dowden & Andrews, 1999).

In light of these findings, experts have argued for a balanced approach to supervising adult and adolescent sex offenders (Bumby & Talbot, in press; CSOM, 2000; Cumming & McGrath, 2005). This balanced supervision philosophy recognizes that when offenders – whether male or female – are provided necessary resources to address their needs, they are more likely to be successful and stable in the community, and successful, stable offenders translates into increased community safety. Therefore, establishing effective supervision approaches for sexually abusive females should also incorporate the use of a balanced and rehabilitative-focused philosophy, rather than a sole focus on surveillance, monitoring, and sanctions.

To maximize the success of female sex offenders, it is important that supervision officers assume a role that extends beyond enforcement tasks by also including supportive functions. For example, a key responsibility should center around understanding the specific needs of their clients and ensuring that appropriate resources are available to address those needs (see, e.g., Berman, 2005). This requires the development of formal and informal partnerships with a range of relevant professionals experienced with providing specialized services to justice-involved women and girls, including the following:

- Mental health and substance abuse treatment providers;
- Domestic violence and other victim services organizations;
- Healthcare agencies;
- Educational and employment programs;

- Child care assistance and other services for women with children; and
- Sex offense-specific treatment providers.

With adolescent females who have committed sex offenses, additional collaborative partners may include school personnel, family therapists, and mentors, each of whom can play a unique role in the support and monitoring of these youth.

Establishing networks of other key individuals in the community who can serve as sources of support and accountability may also enhance supervision efforts with female sex offenders. From this perspective, it is particularly critical to work closely with non-offending partners, parents or caregivers, or other family members to ensure that they understand the ways in which they can support supervision and treatment efforts. Fostering these types of relationships will also complement the approach that should be modeled by supervision officers – one in which accountability and support are carefully blended.

Taken together, these and other philosophies and practices have begun to shape the ways in which female offenders are managed in the community and hold promise for ensuring that sexually abusive women and girls are supervised in a more tailored and gender-responsive manner. Indeed, in some jurisdictions, supervision agencies have invested in gender-specific caseloads or, at the very least, specialized training for officers about the unique risk factors and needs of women and girls (see, e.g., Berman, 2005).

These promising approaches to supervision are relatively new within the general criminal and juvenile justice fields, and newer still as applied specifically to female sex offenders. As is the case with the attempts to develop gender-responsive assessment and treatment practices with sexually abusive females, the ultimate value and impact of specific community supervision strategies with this population will only be determined through additional research.

## Conclusion

The effective management of sex offenders has been a longstanding focus within the criminal and juvenile justice systems, yet the overwhelming majority of the policies, research, and resources have been directed toward males who commit these crimes. Until recently, females who perpetrate sex offenses have been largely overlooked for a host of reasons. As a result, comparatively little is known about sexually abusive females, and the strategies for assessing, treating, and supervising this population remain in the early stages of development. Without question, additional research is needed. In the meantime, the application of gender-specific principles and practices with women offenders and delinquent girls – when coupled with lessons learned from the broader sex offender management field – holds promise for management of this special population.

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