

**HIGH RISK SEXUAL OFFENDERS: THE ASSOCIATION BETWEEN SEXUAL
PARAPHILIAS, SEXUAL FANTASY, AND PSYCHOPATHY**

by

TABATHA FREIMUTH

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ABSTRACT

High risk offenders are a complex and heterogeneous group of offenders about whom researchers, clinicians, and society still know relatively little. In response to the paucity of information that is specifically applicable to high risk offenders, the present study examined RCMP Integrated Sexual Predator Intelligence Network (ISPIN) data to investigate the relationship between sexual paraphilias, sexual fantasy, and psychopathy among 139 of the highest risk sexual offenders in British Columbia. The sample included 41 child molesters, 42 rapists, 18 rapist/molesters, 30 mixed offenders, and 6 “other” sexual offenders. The majority of offenders in this sample were diagnosed with one primary paraphilia (67%). Data analysis revealed significant differences between offender types for criminal history variables including past sexual and nonsexual convictions, number of victims, and age of offending onset. For example, offenders who victimized children (i.e., exclusive child molesters & rapist/molesters) had a greater number of past sexual convictions than did offenders who victimized adults exclusively. Further, there were significant differences between offender types for paraphilia diagnoses, sexual fantasy themes, and levels of psychopathy. For example, exclusive child molesters were significantly more likely to receive a paraphilia diagnosis, were more likely to report having sexual fantasies, and had lower Psychopathy Checklist Revised (PCL-R) scores than other offender types. Results from the current study will serve to facilitate a more refined and informed understanding of sexual offending behaviour, with important implications for future research, assessment, and treatment issues, as well as law enforcement practices when working with high risk sexual offenders.

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Introduction

Literature Review

Sexual violence has a strong adverse effect on society, with long-lasting physical and psychological implications for its victims. Further, a substantial number of sexually motivated violent offences occur within Canada each year. For example, in 2006 there were 22,136 sexual assaults and 2,789 other sexual offences reported in Canada (Statistics Canada, 2006). “Other sexual offences” refer to sexual behaviours including invitation to sexual touching, sexual interference, sexual exploitation, and incest (Statistics Canada, 2005). Moreover, in 1996, the Canadian Centre for Justice Statistics, in collaboration with federal and provincial/territorial corrections authorities, conducted the first and only census of inmates in every adult correctional facility in Canada. Results revealed that 7% of provincial/territorial inmates and 14% of federally incarcerated inmates were sexual offenders (Statistics Canada, 1998). The high number of reported sexual assaults coupled with the large proportion of sexual offenders incarcerated within the federal and provincial justice system illustrates the importance of exploring the criminal histories, offence characteristics, and possible motivational influences among sexual offenders. In particular, it has been proposed that a more informed and refined understanding of high-risk sex offenders would be particularly beneficial for individuals involved within the legal system as this subset of offenders are typically more violent, have a greater number of victims, and are at greater risk for sexual offence recidivism (Levenson, 2004).

In 1993, the Government of Canada established a task force to understand more clearly what needed to be done regarding “high risk” sexual offenders. This task force was established in response to growing public concerns about perceived increases in the numbers of high risk sexual offenders. Based on the report of this task force, the Government of Canada introduced a

comprehensive package of significant and aggressive reforms to the *Criminal Code of Canada* intended to better manage and control dangerous offenders (Solicitor General Canada, 2001).

These dangerous offender provisions stipulate that the most dangerous and violent sexual predators are to remain incarcerated until it is believed that there is no longer a risk to the general public. There has been, however, little research investigating the motivational and offence characteristics of these high-risk sexual offenders. A search of the psychological literature reveals a lack of empirical research studies that have explicitly examined high risk sexual predators. Moreover, the majority of existing studies have focused specifically on issues of risk, and the utility and predictability of using risk assessment measures to foresee offenders' risk for re-offending. While there has been a considerable amount of attention devoted to understanding sexual offending behaviour through the use of psychiatric diagnoses, and the study of treatment factors, and recidivism (Morenz & Becker, 1995; Schweitzer & Dwyer, 2003; Serin, Mailloux, & Malcom, 2001; Seto & Barbaree, 1999), this research has often neglected to consider the specific characteristics and offence patterns of high risk sexual predators.

Sexual offenders are a complex and heterogeneous group of individuals who are likely motivated by a combination of biological, environmental, and psychological factors. The psychological literature reveals that sexual paraphilias (Abel, Becker, Cunningham-Rathner, & Mittleman, 1988; Smallbone & Wortley, 2004), deviant sexual fantasies (Abel & Blanchard, 1974; Deu & Edelman, 1997; Langevin, Lange, & Curnoe, 1998; Looman, 1995; MacCulloch, Snowden, Wood, & Mills, 1983), and psychopathy (Porter, Campbell, Woodworth, & Birt, 2002; Porter, Fairweather, Drugge, Birt, & Boer, 2000) are considered to be possible motivating influences for deviant and criminal sexual behaviour.

The Association between Sexual Paraphilias and Sexual Offending

The *Diagnostic and Statistical Manual of Mental Disorders: Text Revision* (DSM-IV-TR), defines paraphilias as mental disorders characterized by recurrent intense sexual urges and sexually arousing fantasies or behaviours involving (a) nonhuman objects (e.g., animals, inanimate objects) (b) the suffering or humiliation of oneself or one's partner (e.g., whipping, biting, verbally abusing), or (c) children or other non-consenting people (e.g., mentally challenged; American Psychiatric Association, 2000). Like all voluntary behaviours, paraphilias run the gamut from the seemingly harmless, such as fetishisms, to the more serious and violent, such as pedophilia, sexual sadism and erotophonophilia, which refers to a lust murder (Healey, 2006).

The investigation of sexual paraphilias within sex offender populations is of great potential benefit as limited previous research suggests that there may be an association between paraphilias and both sexual offending behaviour and increased sexual offence recidivism (Abel et al., 1988; Prentky, Knight, & Lee, 1997). Within North American society, aberrant sexual behaviours, such as having sex with children or rubbing up against non-consenting people for the purpose of sexual pleasure, are deemed inappropriate and are examples of the type of behaviours that are associated with sexual paraphilia.

Sexual deviancies (i.e., sexual paraphilia) have been empirically correlated with sexual recidivism (Hanson & Morton-Bourgon, 2005; Prentky et al., 1997) and are a key consideration in determining issues directly applicable to high risk sexual offenders such as civil commitment in the United States and long-term offender and dangerous offender status in Canada. Evaluators of offenders for high risk offender status legislation typically use the DSM-IV-TR to determine whether an offender is predisposed to sexual violence by way of mental abnormality. Generally,

the most common mental abnormalities cited by professionals regarding sexual predators are the presence of sexual paraphilia and/or antisocial personality disorder (Doren, 2002).

Levenson and Morin (2006) investigated 450 adult male sexual offenders evaluated for civil commitment under Florida's Jimmy Ryce Act (Jimmy Ryce Involuntary Civil Commitment for Sexually Violent Predators' Treatment and Care Act, 1998). They found that higher risk offenders were more likely to be diagnosed with sexual paraphilias than were lower risk offenders. In fact, the diagnosis most frequently identified among mentally disordered sex offenders under dangerous offender legislation in the United States is the presence of sexual paraphilia (most commonly pedophilia or sexual sadism; Quinsey, Harris, Rice, & Cormier, 2006). In the United States, the requisite mental abnormality or personality disorder must predispose the offender specifically to sexual offending, and as a result it has been argued that paraphilia diagnoses should be required for high risk sexual offender designation (Becker & Murphy, 1998). However, there is a lack of empirical research examining the relationship between various sexual paraphilias and actual offending behaviour. For example, while pedophilia has been strongly linked to offences involving children (Hanson & Bussiere, 1998; Hanson & Morton-Bourgon, 2004) there has been little research that has investigated the existence of sexual sadism in rape offences (Yates, Hucker, & Kingston, 2008). Moreover, there is a paucity of information regarding how paraphilias are distributed amongst various offender types, particularly within high risk offender populations. Indeed, from existing sex offender legislation, it is apparent that the implications of being diagnosed with a sexual paraphilia are often profound, demonstrating a need for research and a well-informed understanding of the dynamics behind these types of sexually deviant behaviours and interests.

The issue surrounding sexual paraphilias is complex. For example, there are inconsistencies in the research literature regarding the incidence of sexual paraphilias, and more specifically multiple sexual paraphilias amongst various types of sexual offenders (Hickey, 2006). Although the reasons for these discrepancies are somewhat unclear, some researchers have suggested that these marked differences are the result of differing standards when making paraphilia diagnoses (Marshall, 2007). For example, how one operationally defines sexual paraphilia, whether using DSM-IV criteria or basing conclusions solely on behaviours (e.g., Abel et al., 1988), could result in noticeably different conclusions as to incidence within the same offender sample.

Abel et al. (1988) informed the clinical perception that sexual offenders may have as many as 10 different paraphilic interests. Specifically, Abel et al. (1988) reported that between 54% – 61% of their sex offender sample met formal diagnostic criteria for multiple paraphilias averaging 2.02 paraphilias per offender with child molesters averaging 3 to 4 paraphilias each. This unexpected finding was the catalyst for further research examining the incidence of paraphilias in sex offenders. However, few studies have been successful in replicating such high incidences of multiple paraphilias (see Raymond, Coleman, Ohlerking, Christenson, & Miner, 1999). Moreover, the study by Abel et al. (1988) has been criticized for their less than strict operational definition of paraphilia, which is thought to have contributed to their finding of such high incidences of multiple paraphilia. For example, the authors did not use DSM criteria for diagnosing participants' paraphilic interests; instead, they considered diagnoses on the basis of sexually aberrant behaviour alone (i.e., all child molesters and incest offenders were diagnosed as pedophiles and rape was considered to be a separate paraphilia). Although the Abel et al. study was successful in demonstrating that sexual paraphilias must be more seriously considered

in the treatment process and in sparking an interest among many sexual offender researchers, the majority of recent studies have used more refined criteria (including the DSM-IV) to diagnose sexual paraphilia.

In contrast to Abel et al. (1988), Smallbone and Wortley (2004) found that while nearly half of their child molester sample reported some paraphilic urge, fantasy, or behaviour in the course of their lifetime, relatively few (12%) would have met formal diagnostic criteria for any individual paraphilia other than pedophilia and only 5% would have met formal diagnostic criteria for two or more paraphilias. The inconsistency in research findings demonstrates that more refined research needs to occur in order to determine how paraphilias are represented within different sex offender groups. For example, while it has been repeatedly demonstrated that pedophilia is associated with child molestation, it is still relatively unclear from the present research literature whether there are significant relationships between different offender types and possible paraphilia diagnoses. Specifically, it is unclear how these differences and/or relationships play out in terms of offence history and offence characteristics.

There is much research that suggests that sexual paraphilias influence the number of victims perpetrated against and the age at which an individual begins offending (Abel et al., 1988; Abel & Rouleau, 1990; Daleiden, Kaufman, Hilliker, & O'neil, 1998; Marshall, Barbaree, & Eccles, 1991; Smallbone & Wortley, 2004). Dunseith, Nelson, Brusman-Lovins, Holcomb, Beckman, Welge et al. (2004) identified that, in their sample of 113 men convicted of sexual offences, 74% met diagnostic criteria for at least one sexual paraphilia and that sexual offenders who had a greater number of sexual paraphilia reported more victims and were more likely to offend incestuously than were offenders who did not have any sexual paraphilias. More recently, Briken, Habermann, Kafka, Berner, and Hill (2006) investigated the presence of paraphilia and

paraphilia-related disorders among a sample of 161 sexual murderers. They found that offenders who were diagnosed with both paraphilia and paraphilia-related disorders (i.e., non-paraphilic sexually excessive behaviours such as compulsive masturbation, use of pornography, and promiscuity) had the highest number of previous sexual offences and were more likely to be diagnosed with sexual sadism, suggesting greater sexual preoccupation and offence persistence. Though the aforementioned studies demonstrate the strong influence sexual paraphilias have on offence history and characteristics, none specifically considered how sexual paraphilias influence the characteristics and offence patterns among various types of high risk sexual offenders.

To summarize, the investigation of sexual paraphilia within sexual offending behaviour is very important to the understanding of a sex offender's underlying motivations. Specifically, it is essential that sexual paraphilias be understood not only within the context of sexual offending behaviour but also by understanding which types of offenders are more predisposed to these paraphilias and how they influence offence history and offence characteristics among the different offender types.

The Association between Sexual Fantasy and Sexual Offending

The DSM-IV considers sexual fantasy to be a prominent feature of sexual paraphilia and as a result, much of the literature on paraphilias revolves around the presence of deviant sexual fantasies. In recent years there has been an increase in the number of research studies and theoretical articles that have sought to understand the role sexual fantasy plays in sexually aberrant behaviour (Deu & Edelman, 1997; Hazelwood & Warren, 1995; Langevin et al., 1998; Looman, 1995). The content of sexual fantasies varies greatly between individuals and is thought to be highly dependent on internal and external stimuli, such as what individuals see, hear, and directly experience (e.g., Jones & Barlow, 1990). Fantasies are personal to the individual and

depending on sexual interests, they may include such things as confirmation of sexual power, irresistibility, imagery with past, present, and future lovers, aggressiveness, or submissive/masochistic tendencies (Arndt, Foehl, & Good, 1985; Crepault & Couture, 1980). The potential relationship between sexual fantasy and sexual offending behaviour has resulted in an increased effort to determine whether sexual fantasy does in fact act as a motivational influence in the commission of sexual violence.

Many professionals have proposed that deviant sexual fantasies are elemental in facilitating sexual offending and are important contributors to both the etiology and dynamics of sexual offending (Deu & Edelmann, 1997; Laws & Marshall, 1990; MacCulloch et al., 1983; Prentky et al., 1989). Abel and Blanchard (1974) were among the first to emphasize the importance of targeting sexual fantasies as a means of changing sexual preferences and reducing sexual violence. More recently, it has been demonstrated in a small number of studies that deviant sexual fantasies appear to directly impact the offending process (Deu & Edelmann, 1997; Gee, Devilly, & Ward, 2004; Prentky et al., 1989). For example, MacCulloch et al. (1983) found that repetitive sadistic masturbatory fantasies spilled over into overt sexual behaviour among 13 psychopathic hospital patients as a result of offenders' compulsions to seek and enact increasingly dangerous try-outs of their sexual fantasies. As a result of these findings, coercive sexual fantasies that lead to deviant sexual arousal are considered by some to be a primary motivating factor for aggression and rape offences (Drieschner & Lange, 1999; Laws & Marshall, 1990).

Nonetheless, not all researchers are in agreement regarding the exact effect sexual fantasy has on sexual offenders' behaviours. Langevin et al. (1998) studied 201 male sexual offenders and found that two thirds (66.7%) did not report any deviant sexual fantasies; instead the

majority reported strictly non-deviant adult fantasies. Research such as this serves to question the opinion that deviant sexual fantasies may be a primary motivator of sexual offending behaviour. In fact, Langevin et al. (1998) have proposed that sexual fantasy may serve a number of other more positive purposes including wish fulfillment, curiosity, alleviating sexual frustration in the absence of a suitable partner, and/or prevention of additional offending. Moreover, research has established that deviant sexual fantasy is not exclusive to sexual offenders, and that non-offenders also engage in deviant sexual fantasy. For example, Crepault and Couture (1980) reported that a considerable number of non-offending men ($n = 94$) also engaged in sadistic sexual fantasy. Specifically, 39.4% reported fantasizing about binding, 33% about rape, 26.6% about aggression, and 14.9% about humiliation. More recently, Gray, Watt, Hassan, and MacCulloch (2003) found that 46% ($n = 23$) of non-offending participants reported sadistic sexual fantasies and interests, suggesting that deviant sexual fantasy may not be as elemental in sexual offending etiology as is currently believed or alternatively, that what distinguishes non-offenders from offenders may be their degree of sadistic interest and fantasy or their willingness to act on their sadistic fantasies.

In the last decade, there has been a slight increase in the number of studies devoted to understanding the different types of sexual fantasies reported by sexual offenders. However, perhaps because of the public's extreme fear of child predators, the preponderance of fantasy information available tends to focus on the fantasies reported by child molesters exclusively, or instead, on sexual offenders as a single unit with very little distinction of offender type (Dutton & Newlon, 1988; Marshall et al., 1991; Proulx, Pereaault, Ouimet, 1999; Rokach, 1988). Not surprisingly, research has demonstrated that child molesters disclose deviant sexual fantasies around children to a much greater extent than rapists and non-offenders (Looman, 1995).

Looman (1995) also found no significant difference between child molesters and rapists in their reports of non-deviant sexual fantasies. Specifically, intra-familial child molesters have been found to have more age appropriate sexual attractions and therefore are more prone to having non-deviant age appropriate sexual fantasies than are extra-familial child molesters (Quinsey, Chaplin, & Carrigan, 1979). Similarly, phallometric studies with rapists reveal that rapists may not have a preference for depictions of aggressive sex over consensual sexual intercourse (Looman & Marshall, 2005) suggesting that some rapists may entertain non-deviant sexual interests and fantasies. Looman (2001) found that high risk rapists readily admitted their deviant sexual fantasies to a greater extent than lower-risk rapists and child molesters suggesting that reports of sexual fantasy may differ not only between different types of offenders but also by levels of risk.

The existing literature remains limited in its understanding of how sexual fantasy is associated with sexual offending behaviour. It has been repeatedly demonstrated that sexual offenders do disclose deviant sexual fantasies (Deu & Edelman, 1997; Langevin et al., 1998). However, the available evidence fails to support any exclusive association between different sexual fantasies and the offences perpetrated by sexual offenders. Further research needs to be conducted to determine which types of sexual fantasies are reported by various offender types, whether deviant sexual fantasy is more or less prevalent among high risk offenders and psychopaths, and how those fantasies are related to the types of offences that offenders perpetrate.

The Association between Psychopathy and Sexual Offending

A better understanding of the relationship between psychopathy and sexual offending has only recently begun to develop (e.g., Porter et al., 2003). Psychopathy is a serious mental

disorder characterized by a distinct pattern of interpersonal (e.g., deceitfulness, manipulation), affective (e.g., lack of remorse, lack of empathy or guilt), and behavioural (e.g., irresponsibility, impulsivity) characteristics found in approximately 1% of the general population (Hare, 1991, 1996). It has consistently been found to be predictive of criminal behaviour and violent recidivism (Looman, Abracen, Serin, & Marquis, 2005; Serin, Mailloux & Malcolm, 2001). Seto and Barbaree (1999) found that sexual offenders who scored higher on the PCL-R (Hare 1991, 2003) were more likely to re-offend violently and much more likely to re-offend sexually than offenders who scored lower. Due to the adverse effects psychopaths inflict on society, psychopathy has become a fundamental consideration in dangerous offender legislation within Canada and the United States. Although Hare's PCL-R is not an actuarial risk assessment measure, it is often included in sexually violent predator (SVP) assessments in the United States (Levenson, 2004). In particular, the prevalence of psychopathy appears to be especially high among offenders deemed by the courts and society to be "sexually dangerous" (Hare, 1996). Prentky and Knight (1991) found that 45.3% of 95 rapists and 30.5% of 59 child molesters identified by the State as dangerous met diagnostic criteria for psychopathy. Furthermore, while psychopathy has been repeatedly demonstrated to be associated with violent and sexual recidivism (Quinsey et al., 1998), a combination of psychopathy and sexual deviance is especially risky (Harris, Rice, Quinsey, Lalumiere, Boer, & Lang, 2003).

The PCL-R consists of 20 items that measure the interpersonal, affective, and behavioural characteristics of psychopathy. In Canada, it is now considered customary, though not mandatory, for violent offenders to be assessed using the PCL-R either during intake assessments or for purposes of conditional release or treatment (Porter et al., 2000). Numerous studies have cited a clear association between psychopathy and interpersonal violence (Brown & Forth, 1997;

Gretton, Catchpole, & Hare, 2004; Webster, Harris, Rice, Cormier, & Quinsey, 1994; Woodworth & Porter, 2002). Moreover, because the PCL-R has been found to be effective in the prediction of both crime and violence, psychopathy is considered to be one of the most important psychological constructs within the Canadian criminal justice system (Hare, Clark, Grann, & Thornton, 2000). In particular, offenders who score high on the PCL-R show a distinctive pattern of criminal behavior, violence, and poor conditional release (Porter et al., 2002; Porter & Woodworth, 2007) which has both clinical and applied implications when determining issues around sentencing and treatment for convicted sexual offenders.

Psychopaths are arrogant, grandiose, superficially charming, and callous; they lack the ability and/or capacity to experience emotion, and they are characteristically impulsive in nature (Hare, 1991, 1996; Porter et al., 2002). These characteristics arguably provide psychopaths with the means to perform heinous and appalling acts without feeling concern or empathy for their victims. It has been argued that the extreme of callousness is sexual sadism, whereby indifference towards others is replaced with sexual pleasure resulting from victims' displeasure or distress (Meloy, 2002). For example, criminal sexual sadists (who may or may not be psychopaths) prefer anal sexual intercourse to vaginal sexual intercourse as it is an act that dominates and controls the victim from behind and serves to humiliate and dehumanize the victim (Meloy, 2002). In the most extreme scenario, Cooke (2001) asserted that the salience of the affective deficits in psychopaths is most evident amongst the most prolific serial killers that tortured and humiliated their victims prior to ending their lives (see also Porter et al., 2003).

Psychopathy is one of the most widely researched personality disorders, yet there are a limited number of research studies that have specifically examined psychopathy within the context of sexual crimes (Brown & Forth, 1997; Firestone, Bradford, Greenberg, & Serran, 2000;

Porter et al., 2000; Porter, Woodworth, Earle, Drugge, & Boer, 2003). However, it has been demonstrated that in addition to committing more diverse sexual offences, psychopaths are also more likely to engage in more severe forms of sexual violence than non-psychopaths (Barbaree, Seto, Serin, Amos, & Preston, 1994; Porter et al., 2002). For example, Porter et al. (2003) demonstrated that psychopaths' sexual homicide offences contained a significantly higher level of both gratuitous and sadistic violence than those of non-psychopaths. It has also been proposed that a significant proportion of sexual offending heterogeneity (e.g., criminal diversity, impulsivity, degree of empathy, victim types) may be directly related to the presence or absence of psychopathy (Brown & Forth, 1997; Porter et al., 2000; Porter et al., 2002).

Porter et al. (2000) examined whether psychopathy was an important component for understanding sexual violence heterogeneity within a diverse sample of 329 incarcerated sexual and nonsexual offenders. Results demonstrated that the rapist and mixed rapist/molester groups (offenders who offended against both adults and children) scored higher on psychopathy indices than exclusive child molesters. Moreover, mixed rapist/molesters were between 2 and 10 times as likely as other offenders to meet the diagnostic criteria for psychopathy. Though there is still much to be understood regarding the relationship between psychopathy and sexual violence it is apparent from research thus far that psychopathy plays a significant role in the perpetration of sexual violence. Further research needs to be conducted to delineate specific patterns of psychopathy among various offender types and how these patterns may be represented amongst high risk offender groups.

The potential association between psychopathy and sexual paraphilias is still relatively unclear. Few studies have specifically examined the relationship between these two disorders, and even fewer have examined that relationship within a heterogeneous sample of sexual

offenders (Firestone, Bradford, Greenberg, & Larose, 1998; Firestone, Bradford, Greenberg, Larose, & Curry, 1998). Hill, Habermann, Berner, and Briken (2006) found that sexual murderers with multiple victims demonstrated more incidences of psychopathy and were more likely to be diagnosed with a paraphilia such as sexual sadism and voyeurism. Similarly, Firestone, Bradford, Greenberg, and Larose (1998) and Firestone, Bradford, Greenberg, Larose et al. (1998) found that homicidal sexual offenders (including homicidal child molesters) rated significantly higher on the PCL-R and had greater incidences of sexual paraphilia than did non-homicidal incest offenders.

The above studies provide some evidence that increased levels of violence involved in the commission of sexual offences appear to be indicative of a psychopathic personality style. However, research specifically examining patterns of psychopathy within different offender types leaves much to be understood regarding which offenders are more likely to demonstrate psychopathic traits and how psychopathy translates into offence characteristics. Further, there is a relative lack of information surrounding the relationship between the incidence of psychopathy and diagnoses of sexual paraphilia and reports of sexual fantasies. In order to clearly identify what motivates offenders into engaging in sexual violence, it is important to consider possible relationships between the motivational influences.

Limitations of Previous Research

In spite of the substantial body of literature devoted to examining sexual offenders and their offending behaviours, there is still very little known about what motivates high risk sexual offenders. There have been only a small number of research studies that specifically consider the criminal histories, possible motivational influences, and offence characteristics of high risk sexual offenders. Levenson (2004) and Levenson and Morin (2006) found that offenders

earmarked by the United States' criminal justice system as sexually dangerous and selected for civil commitment scored higher on actuarial risk assessment measures, had higher frequencies of sexual paraphilia diagnoses, and psychopathy. While the findings of Levenson (2004) and Levenson and Morin (2006) provide much insight into the factors considered for designation as a high risk sexual offender, without additional empirical investigations into the influence of paraphilia, fantasy, and psychopathy on offending behaviours and offence characteristics, limited conclusions can be drawn about ways to prevent continued offending and to reduce the financial, emotional, and psychological impact on society.

A second limitation is that past research examining sexual offenders has relied very heavily on investigating "sexual offenders" as a single group rather than as a heterogeneous sample of offenders made up of various types of sexual offenders. In addition, much research focuses on offenders who victimize children exclusively and those who victimize adults exclusively (e.g., Brown & Forth, 1997; Looman, 1995; Smallbone & Wortley, 2004) as opposed to also investigating indiscriminate offenders or mixed offenders (e.g., Porter et al., 2000). By not differentiating across offender types or levels of risk it is not possible to fully understand what drives offenders into engaging in criminal sexual behaviours. Sexual offenders are "a highly heterogeneous mixture of individuals who have committed violent sexual assaults on strangers, offenders who have had inappropriate contact with family members, individuals who have molested children, and those who have engaged in a wide range of other inappropriate and criminal sexual behaviours" (Bynum, 2001, pg. 2).

Finally, inconsistent results pose a major problem in the existing sex offender literature surrounding potential motivating influences. While there is a general consensus that sexual paraphilias are a common phenomenon among sexual offenders (Abel et al., 1988) there are

contradictory theories and perceptions regarding their incidence and influence on criminal behaviour. These contradictions need to be explored further to determine whether paraphilias are important to the understanding of sexual offending. Similarly, as mentioned previously, there is a paucity of research that investigates the prevalence of sexual fantasies among sexual offenders and specifically amongst various types of offenders. More importantly there are markedly divergent views about the role fantasy plays in sexual behaviour, let alone sexual offending behaviour, making it evident that investigators need to do a more in depth examination of the presence and types of fantasies reported by various types of sexual offenders.

The Present Study

Research that focuses on sexual paraphilias, sexual fantasy, and psychopathy in relation to high risk offenders' sexual offending behaviour is very important for several reasons: First, researchers may gain a more refined insight into the influence of paraphilic interests on the types of sexual crimes that are committed by offenders; second, the relationship between psychopathy and paraphilias, and the potential effect of motivation and fantasy on sexual offending could lead to a greater understanding of offence patterns; third, expanding our knowledge of how paraphilias specifically interact with and influence sexual offending behaviour may aid mental health clinicians in developing new treatment methods; and finally, results of the proposed study could potentially assist law enforcement agencies in their investigations of sexual offences and offending behaviours in general.

In summary, the present study was developed to expand upon previous research as outlined in the literature review and to provide insight into the sexual offending behaviour of an extremely high risk sample of sexual offenders by focusing on criminal histories, offence characteristics, and offence motivations. The present study focused on three main themes: first,

the investigation of the incidence and types of sexual paraphilias and deviant sexual fantasies reported within high risk sexual offenders in British Columbia; second, determining the influence of sexual paraphilias and deviant sexual fantasies on criminal history variables; and third, the investigation of the potential relationship between psychopathy, paraphilias, and sexual fantasy on offence characteristics.

Hypotheses

Paraphilias. Given the association between sexual paraphilias and sexual offending behaviour, it was predicted that the majority of high risk offenders would show evidence of having at least one sexual paraphilia and a sizeable proportion would have multiple paraphilias. Further, it was hypothesized that a positive relationship would exist between the number of diagnosed paraphilias, the number of sexual and nonsexual convictions, as well as the number of victims as determined from offence histories.

Sexual fantasy. The present study expands on previous research by investigating not only the prevalence of both general sexual fantasy and deviant sexual fantasy within a sex offender sample, but also attempts to determine whether a relationship exists between offenders' fantasy themes and the offences they perpetrate. Further, it specifically considers the influence and prevalence of fantasy within a group of sex offenders who have been identified as being at high risk for re-offending. The present study predicted that similar to Looman (2001) the prevalence of deviant sexual fantasy would be more apparent in high risk rapists than in child molesters. It also explored other potential relationships between the prevalence and type of sexual fantasies and the sample's sex offending behaviour.

Psychopathy. Considering previous research demonstrating that psychopaths recidivate sexually and nonsexually at a higher rate than do non-psychopaths, it was hypothesized that

sexual offenders with higher PCL-R scores would have a greater number of both sexual and nonsexual convictions in their histories than would offenders with lower PCL-R scores. Further, considering the present sample's high risk status and the contribution of psychopathy in the prediction of offender risk it was presumed that a large number of offenders from the present study would present with a significant degree of psychopathy and that offenders with higher psychopathy scores would engage in a greater diversity of sexual offences in comparison to offenders who scored lower on the PCL-R. Specifically, offenders who engaged in sexual violence against both children and adults were predicted to have higher PCL-R scores than offenders who offended against children or adults exclusively.

Psychopathy and sexual deviancy. Previous research has demonstrated that psychopathic offenders characteristically engage in a wider range of offences that are typically of a more serious or violent nature. The current study hypothesized that offenders meeting diagnostic criteria for psychopathy would report a variety of sexual fantasy themes which would invariably include violence. Further, the present study hypothesized that because psychopaths are typically more violent and sadistic in both their nonsexual and sexual offences, offenders considered psychopathic would be more likely than non-psychopaths to be diagnosed with sexual sadism and less likely to be diagnosed with the lesser violent paraphilias such as exhibitionism and pedophilia.

Methodology

Sample

Offender information was extracted from the Integrated Sexual Predator Intelligence Network (ISPIN) accessed through the RCMP E Division's Behavioural Sciences Group (BSG) in Surrey, British Columbia. There were in total 139 offenders included. The researcher scrubbed and sanitized all data for identifiable information for both offenders and victims, thus ensuring confidentiality. The researcher had no personal contact with the offenders or their victims.

Materials

ISPIN is a research-based intelligence network that targets and investigates sexual predators. Presently there are 1,158 high risk offenders (HROs) in the high risk offender identification program (HROIP) in BC. These HROIP files are the primary source of information that Crown uses for dangerous offender and long-term offender applications. It has been estimated that 97% of offenders classified in the HROIP files are sexual offenders. ISPIN systematically examined 33% of offenders from the HROIP through an assessment template allowing the Criminal Justice System to focus on the highest risk predators in our communities.

The assessment template was designed to rate offenders' risk levels based on a 10-point scale. The ISPIN template consisted of tombstone data, actuarial scores, and other research-based risk factors (i.e., deviant arousal, mental health, substance use, etc.) to place these already high risk sexual offenders into lower, moderate, and higher risk categories (see Appendix A). Offenders categorized as 7.5 and higher are considered to be the highest risk group. The present study included only those sexual offenders from the ISPIN database that had an ISPIN score of

7.5 or higher. This group of offenders is considered to be the highest of the high risk sexual offenders.

Procedure

Data collection occurred over a period of 30 days at the RCMP BSG in Surrey British, Columbia. All information taken from the ISPIN database was transferred into an SPSS data file. Although no identifiable information was present in the ISPIN database, each offender report was given an identification number to ensure the ability to cross reference between the ISPIN database and the SPSS data files. The document containing the master link between the ID code and the ISPIN file is held by Staff Sergeant Logan at the RCMP BSG.

Coding. A coding scheme was developed prior to attending the RCMP BSG. For each offender, the researcher developed an identification code and placed it on the first page of the coding scheme. The researcher examined each file and coded information according to the coding scheme. Missing information pertaining to areas of interest was coded as “not specified” for that section and was not included in the analyses (see Appendix B).

Offence type. The present study adopted the offender type categorization outlined by Porter et al. (2000): extra-familial child molesters (EF), intra-familial child molesters (IF), rapists, rapist/child molester, mixed offenders, and non-physical and/or other sexual offenders. In the context of this thesis, rape (i.e., sexual assault) is referred to as forced oral, vaginal, and/or anal intercourse. Rape/child molestation on the other hand is the sexual assault of children (persons < 14 years) and the sexual assault of an adult by the same offender. In order to categorize each offender, all of their offences (that resulted in a conviction) were considered. These categories are discrete and mutually exclusive making it possible to analyze each group separately or together depending on the question needing to be answered. Mixed offenders refer

to those offenders who have committed a number of different types of sexual crimes and do not fit precisely into just one type of offence category. The category of “non-physical and/or other sexual offender” includes sexual offenders who primarily engaged in non-contact sexual offences but who also committed other sexual offences that do not fit into any of the other five categories. See Appendix C for examples of mixed offenders and non-physical and/or other sexual offenders.

Number of sexual offences and number of victims. The researcher examined each offender’s ISPIN record to determine the number of sexual offences an offender had committed. Only those offences for which the offender was convicted were used to account for the total number of sexual offences. Similarly, the total number of victims from offenders’ sexual offence histories was identified solely from those offences for which the offender was convicted of in a court of law.

Psychopathy. Psychopathy was coded for by specifically looking for information pertaining to the PCL-R. The PCL-R has been widely adopted in the assessment of psychopathy in forensic populations. In fact, the vast majority of offenders who commit a serious offence are now scored on the PCL-R, which is currently considered to be the most reliable and valid indicator of psychopathy (Hare, 2003). Psychopathy as measured by the PCL-R is characterized by 20 criteria, scored as 0, 1, or 2, allowing for a maximum score of 40. Because a score of ≥ 30 is typically considered to be the cut-off criteria for a diagnosis of psychopathy (Hare, 1991), the present study used the same criteria to determine whether offenders were psychopathic or non-psychopathic. PCL-R information was available for 60% ($n = 83$) of the sample; however, actual PCL-R scores were only available for 70 offenders. Thirteen offenders had psychopathy information identifying them in the low, moderate, and high categories but actual scores were not

available. Quantitative analyses that required a continuous psychopathy variable included only those offenders with actual PCL-R scores.

Paraphilias. The researcher examined each offender's psychological file to determine whether offenders had been diagnosed with any sexual paraphilia. Paraphilias were identified and/or diagnosed by Psychologists and clinicians using DSM-IV-TR criteria.

Pedophilia, voyeurism, exhibitionism, and frotteurism were diagnosed if the person had acted on sexual urges specific to the paraphilia or if the urges or sexual fantasies caused marked distress or interpersonal difficulty (APA, 2000). For sexual sadism, the diagnosis was made if the person had acted on their sexual urges with a non-consenting person or if the urges and/or sexual fantasies and/or behaviours caused marked distress or interpersonal difficulty (APA, 2000). For example, the specific criteria for pedophilia are that (a) over a period of at least 6 months, the individual must have recurrent, intense sexually arousing fantasies, sexual urges, or behaviours involving sexual activity with a prepubescent child or children and (b) the individual must have acted on these sexual urges, or the sexual urges or fantasies cause marked distress or interpersonal difficulty (APA, 2000). Similarly, the diagnostic criteria for sexual sadism stipulate that (a) over a period of at least 6 months, the individual be afflicted with recurrent intense sexually arousing fantasies, sexual urges, or behaviours involving acts in which the psychological or physical suffering of the victim is sexually exciting to the person and (b) the person has acted on these sexual urges with a non-consenting person, or the sexual urges or fantasies cause marked distress or interpersonal difficulty (APA, 2000). The researcher also coded for whether the offender had been identified by the evaluating psychologist as having any possible sexual paraphilias even if they did not meet one or more of the DSM-IV-TR requirements for such diagnoses. For example, some offender files revealed the possible

presence of pedophilia, however, for one reason or another the psychologist and/or clinician were unable to definitively provide a paraphilia diagnosis (i.e., did not meet one or more diagnostic criteria contradicting clinical judgment). Further, after identifying the presence/absence of paraphilia diagnoses, the researcher identified which paraphiliac interests and/or behaviours were present.

The paraphilias of primary interest were exhibitionism, voyeurism, pedophilia, fetishism, frotteurism, masochism, sexual sadism, and paraphilia NOS (Not otherwise specified; i.e., necrophilia, partialism, and scatologia). For the purpose of this study, after identifying each type of paraphilia present, the paraphilias were grouped according to Shaffer and Penn's (2006) paraphilia classification system: nonviolent physical paraphilia, sadistic paraphilia, and Paraphilia NOS (see Table 2 of results).

Sexual fantasy. The researcher examined each offender's ISPIN file to determine whether it contained information on the content of the offender's sexual fantasies. If no information on fantasy was available, each fantasy related variable was coded as "not specified." In accordance with the present literature on fantasy themes (e.g., Looman, 1995, 2001; Looman & Marshall, 2005), the present study used the available information to code offenders' sexual fantasies into four main themes: consensual sexual activities, violent and aggressive sexual activities, sexual activities involving children, and a combination of sexual fantasies.

Consensual sexual fantasies were coded only if the offender self-reported fantasizing about adult consensual relations including heterosexual and/or homosexual behaviours. Violent fantasies were coded if the offender's records indicated themes of rape, power, or physical violence. Examples of violent sexual fantasies include themes of non-consensual bondage, variations of "making them do what I want," tying them up, humiliating the victim, feelings of

power or control, forced vaginal intercourse and/or forced anal intercourse, or references to hurting the victims (including biting, pinching, slapping, punching, kicking, etc.), stabbing, torturing, and/or killing the victim. Sexual fantasies involving children were coded if the offender reported fantasizing about children 14 years and younger including “fondling, caressing, watching undress, sexual intercourse, etc.” In cases where the offender reported engaging in sexual fantasies involving more than one type of sexual theme, each type of fantasy was coded for. For example, if an offender’s sexual fantasy focused on having sexual intercourse with a child and the intercourse was aggressive or forced, the sexual fantasy would be coded for both violence and fantasies involving a child. For additional information and/or clarification of how specific variables were coded please refer to the coding scheme located in Appendix B.

Analyses

Four primary analyses were conducted for this thesis and they included chi square (contingency and non-parametric), t-tests, analysis of variance (ANOVA), and multivariate analysis of variance (MANOVA). Measures of effect size were calculated by eta squared. Unless otherwise stated, all follow-up post hoc analyses utilized Tukey’s HSD procedure.

Results

Demographics

The sample consisted of 41 exclusive child molesters, 42 exclusive rapists, 18 rapist/molesters, 30 mixed offenders, and 6 non-physical and/or other sexual offenders. One offender could not be categorized as offence descriptions were not available.¹ The sample was comprised of men ranging in age from 19 to 77 years ($M = 43.88$, $SD = 11.24$). More than half of the sexual offenders included in the study were married at least once and of these, 48% were divorced at the time of the study. Marital status was unavailable for 28 sexual offenders.

Alcohol and drug use. Results indicated that substance use was likely a contributing factor in the commission of a number of the offenders' index offences. Nearly 30% ($n = 41$) of offenders were reportedly under the influence of minor and/or major drugs and nearly 55% ($n = 74$) were under the influence of alcohol during their most recent offences. There were nearly equal numbers of offenders who had used minor drugs ($n = 19$, 46%; marijuana, hashish, Tylenol 3) and major drugs ($n = 18$, 44%; heroine, crystal meth, mushrooms, etc.) and only 4 (10%) offenders who had used both prior to their index offence. Of those offenders who had used alcohol prior to their index offence, 34 (46%) had consumed a moderate amount of alcohol, 13 (17%) consumed a small amount of alcohol, 22 (30%) consumed an extreme amount of alcohol, and 5 (7%) consumed an undetermined amount of alcohol (see Appendix B for coding details of alcohol use).

Weapon use. Forty-five of 137 offenders (33%) used some type of weapon during the commission of their index offence. Similarly, of the 127 repeat sexual offenders, 35% ($n = 44$) used a weapon during at least one of their previous sexual offences. Knives were the most

¹ One offender did not have any sexual offence convictions though he was considered to be a high risk sexual predator by way of self proclamation.

commonly used weapon by offenders during both index sexual offences ($n = 25$; 56%) and previous sexual offences ($n = 25$; 57%) followed by the use of offenders' bare hands ($n = 9$; 20% for index offences & $n = 11$; 24% for previous offences).

Victim-offender relationship. More than one half of the present sample perpetrated their index offence against a victim whom they knew ($n = 77$ of 135)². Specifically, 12 (16%) offenders victimized a family member, 38 (49%) a friend, 22 (29%) an acquaintance or co-worker, and 5 (6%) a person they were or had been in a romantic relationship with. Nevertheless, a substantial number of offenders ($n = 54$; 40%) victimized a stranger (48 females and 6 males) and 4 (3%) had "other" relationships with their victims which did not fit into the above mentioned categories (e.g., case worker). Similarly, 84 of 137 (61%) offenders had victims who fell into one age category: 50 (59%) victimized children exclusively, 4 (5%) victimized adolescents, and 30 (36%) victimized adults. Fifty-three (39%) offenders, on the other hand, offended against victims that fell into more than one age category during their index offence³. For example, 17 (32%) offenders offended against both children and adults and 13 (24%) were indiscriminate in that they victimized children, adolescents, and adults. Females were the primary sexual target of 86 of 137 (63%) high risk sexual offenders whereas 16 (12%) targeted males exclusively and 35 (25%) targeted both males and females

Offence History and Characteristics

Age of offending onset. The mean age of offenders' first nonsexual offence was 18 years ($SD = 5.5$ years, range 11-42 years). Official juvenile records were unavailable to corroborate whether convictions resulted from reported first time offences or whether self-report was the only record of juvenile onset offending. Similarly, there were 33 offenders whose files described

² For 3 offenders it was not possible to determine the relationship between victim and offender and 1 offender had not been convicted of a sexual offence.

³ A substantial proportion of offenders victimized multiple people per offence conviction.

onset of sexual offending beginning in adolescence. The mean age of first sexual offence for offenders' juvenile onset was 15 years ($SD = 2$ years, range 9-17 years). Again, without official juvenile records it was not possible to confirm these reported ages of onset with criminal convictions. The mean age of offenders' first adult sexual offence was 26 years ($SD = 7.5$ years, range 18-37 years).

Extent of sexual and nonsexual offending. The mean number of sexual convictions in the present sample was 4.5 ($SD = 3.79$) ranging from 0 convictions to 23 convictions. Moreover, the mean number of victims from offenders' offence histories was 4.02 ($SD = 4.93$) ranging from 0 to 30. Table 1 illustrates the demographics for age of onset of offending, number of victims, and number of sexual and nonsexual convictions across the different offender types.

A one-way ANOVA established that there were significant differences between offender types for number of past sexual convictions, $F(4, 131) = 5.15, p = .001, MSE$ of 12.90, age of onset for sexual offending, $F(4, 127) = 4.10, p = .004, MSE$ of 51.75, and total number of sexual victims from offence histories, $F(4, 132) = 5.20, p = .001, MSE$ of 14.36. The effect sizes, between the above mentioned dependent variables and the independent variable offender type, were very strong ranging from 11% for age of onset to 14% for past number of sexual convictions and total number of victims. Follow-up post hoc analyses revealed that exclusive child molesters ($M = 5.2, SD = 4.5$), rapist/molesters ($M = 5.00, SD = 4.32$), and mixed offenders ($M = 6.27, SD = 4.0$) had a significantly greater number of past sexual convictions than did exclusive rapists ($M = 2.7, SD = 1.6$). In addition, exclusive child molesters ($M = 6.2, SD = 5.6$), rapist/molesters ($M = 5.38, SD = 2.68$), and mixed offenders ($M = 5.8, SD = 4.1$) had a significantly greater number of sexual victims than did exclusive rapists ($M = 2.8, SD = 1.4$).

Table 1. Age of Onset, Number of Victims, and Number of Convictions Across Various Subgroups of High Risk Sexual Offenders

	Age of Onset				Number of Victims				Number of Convictions			
	Nonsexual		Sexual		Most Recent		Total		Nonsexual		Sexual	
	<i>M</i>	<i>SD</i>	<i>M</i>	<i>SD</i>	<i>M</i>	<i>SD</i>	<i>M</i>	<i>SD</i>	<i>M</i>	<i>SD</i>	<i>M</i>	<i>SD</i>
Child Molesters	20.00	8.87	29.53	10.73	2.92	3.73	6.24	5.63	7.56	11.12	5.2	4.48
Rapists	16.62	3.12	25.69	5.62	1.12	.32	2.79	1.42	15.86	17.69	2.69	1.58
Rapist/Molester	16.64	3.03	25.5	5.40	2.22	4.22	5.38	4.06	16.17	19.54	5.0	4.32
Mixed Offenders	17.62	3.52	23.1	4.96	1.90	1.77	5.83	2.68	16.96	16.28	6.26	4.04
Nonphysical/Other	18.17	4.40	21.17	2.86	1.67	.82	10	6	19.5	29.27	3.16	1.47

Note. The age of onset for sexual offences includes only adult sexual offence

There were no significant differences between the various offender types for the number of victims from offenders' most recent sexual offences, $F(4, 135) = 2.376, p = .055, MSE = 7.2$; however, a trend was observed which demonstrated that 6.8% of the variance in the number of victims perpetrated against could be attributed to offender type. Specifically, exclusive child molesters ($M = 2.92, SD = 3.73$) had slightly more victims per index offence than did exclusive rapists ($M = 1.12, SD = .32$) demonstrating that offenders who victimized children may be more likely to have multiple victims per offence, or at least per conviction, than offenders who victimize adults. To examine this further, an independent- samples t -test was performed with victim-to-conviction ratio (# victim/#convictions) as the test variable and offender type (exclusive child molesters and exclusive rapists) as the grouping variable. A significant difference in victim-to-conviction ratios was identified, $t(46) = 2.14, p < .05$ where child molesters ($M = 1.29, SD = .65$) had a significantly greater ratio than rapists ($M = 1.06, SD = .21$) demonstrating that child molesters had more victims per conviction than rapists. Finally, mixed offenders ($M = 23.1, SD = 4.6$) began sexually offending at a significantly younger age than did exclusive child molesters ($M = 29.5, SD = 10.7$). Interestingly, although statistical significance was not reached, $F(4, 114) = 1.79, p = .14, MSE = 282.35$, results demonstrated that exclusive child molesters ($M = 7.6, SD = 11.1$) had many fewer nonsexual convictions than any other offender type (see Table 1). The strength of the relationship between offender type and number of past nonsexual offence convictions was moderate with offender type accounting for 6% of the variance of nonsexual convictions.

Paraphilias

Paraphilias were diagnosed or identified in 118 (85%) sexual offenders. Specifically, 79 (67%) offenders had only one sexual paraphilia and 39 (33%) had two or more sexual paraphilias. Figure 1 illustrates the percentage of offenders within the various offender types who had been identified and/or diagnosed with multiple paraphilias. The majority of offenders evidenced one primary paraphilia in each of the categories, except for mixed and non-physical/other offenders.

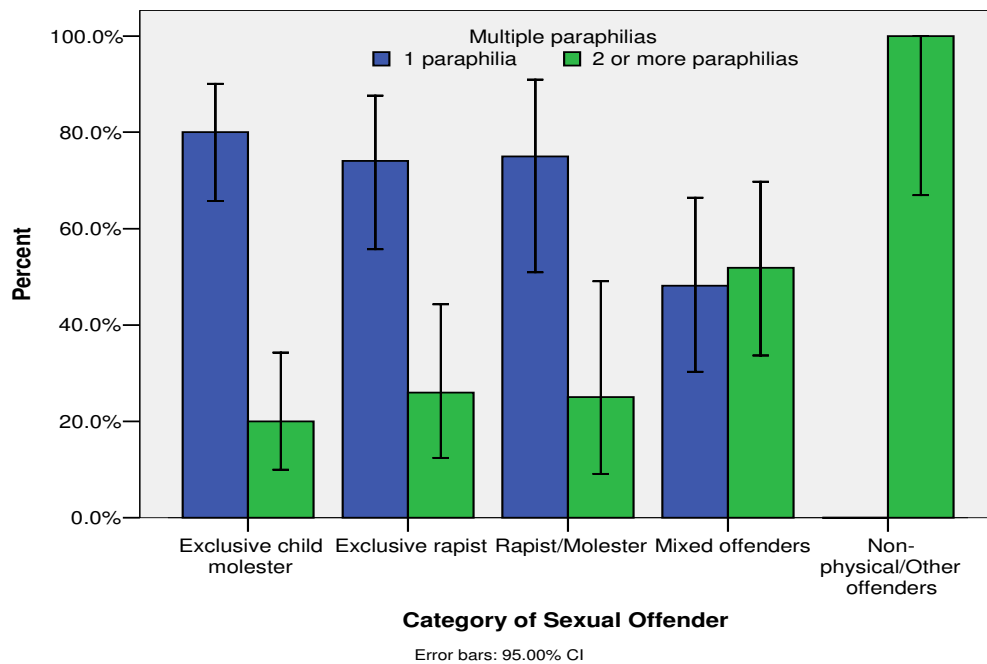


Figure 1. The Percentage of Offenders with One or More Sexual Paraphilia

The Association between Paraphilias and Offence History

The total number of sexual paraphilias diagnosed and/or identified was not significantly correlated with the total number of sexual convictions ($r = .064$), total number of nonsexual convictions ($r = -.044$), or the total number of victims ($r = .083$). To determine whether non-violent physical and sadistic paraphilias individually influenced the number of sexual convictions or total number of victims, paraphilias were re-coded into three dominant paraphilia typologies: non-violent physical paraphilia⁴, sadistic paraphilia, and paraphilia NOS (see Table 2). There were 19 offenders who had been identified and/or diagnosed with paraphilia NOS either by itself ($n = 8$) or in combination with sadistic paraphilia ($n = 5$) or non-violent paraphilia ($n = 6$). As a result, each of the three paraphilia categories had paraphilia NOS included. Offenders who were diagnosed and/or identified with both sadistic and non-violent physical paraphilia were categorized into the sadistic paraphilia category only.

Table 2. Types of Paraphilia Included Within Each Paraphilia Subgroup

Paraphilia Subgroup	Paraphilia
Non-violent Physical Paraphilia (including NOS)	Pedophilia, Exhibitionism, Voyeurism, Fetishism, Frotteurism
Sadistic Paraphilia (including NOS)	Sexual Sadism
Paraphilia NOS	Telephone Scatologia, Partialism, Necrophilia

To examine possible differences in sexual offence history by the various paraphilia groups, a MANOVA with paraphilia type as the independent variable and number of sexual convictions and total number of victims as dependent variables was

⁴ Non-violent paraphilia (including NOS) includes pedophilia. Pedophilia as a separate category yielded no significant differences between the groups for number of sexual convictions, nonsexual convictions, or victims.

conducted. The MANOVA was significant, $F(4, 226) = 2.67, p = .033, MSE = 15.17$. Specifically, the type of paraphilia offenders were identified and/or diagnosed with accounted for 4.5% of the variability in offenders' past number of sexual convictions and total number of victims. To determine where the specific differences were present, follow-up post hoc analyses were performed. Specifically, offenders with non-violent paraphilias had a greater number of sexual convictions ($M = 5.49, SD = 4.2$) and a greater number of victims ($M = 6.19, SD = 4.61$) than did offenders with primarily sadistic paraphilias (sexual convictions: $M = 3.47, SD = 2.98$; number of victims: $M = 3.97, SD = 3.26$; see Table 3). There were no differences, however, in the number of sexual convictions or total number of victims between those offenders with paraphilia NOS ($M = 5.25, SD = 4.95$; $M = 4.0, SD = 1.31$) and those with sadistic or non-violent paraphilia diagnoses/identification. Similarly, there were no statistically significant differences between the different paraphilia types and the number of nonsexual convictions from offenders offence histories, $F(2, 101) = .259, p = .772, MSE = 258.72, \eta^2 = .005$.

Table 3. The Relationship between Sexual Offence History and Sexual Paraphilia

Paraphilias	Number of Sexual Convictions		Total Number of Victims	
	Mean	SD	Mean	SD
Nonviolent Physical	5.49*	4.20	6.19*	4.61
Sadistic	3.47*	2.88	3.97*	3.26
Paraphilia NOS	5.25	4.95	4.0	1.31

Note. Non-violent physical paraphilia in this analysis includes pedophilia.

The Association between Paraphilias and Sexual Offences

To determine whether offender type (i.e., child molester, rapist, rapist/child molester, mixed offender, non-physical/other offender) was significantly related to the types of paraphilias offenders were identified and/or diagnosed with (i.e., non-violent

physical paraphilia, sadistic paraphilia, and paraphilia NOS), a chi-square analysis was performed, $\chi^2(8, N = 116) = 44.42, p < .001$. Of the offenders who evidenced sexual paraphilias, 35 (87.5%) exclusive child molesters were categorized as having a non-violent physical paraphilia compared to 5 (12.5%) with sadistic paraphilia (see Table 4). Similarly, 18 of 27 (67%) exclusive rapists showed evidence of sadistic paraphilia compared to only 3 (11%) and 6 (22%) for non-violent physical and paraphilia NOS respectively. Of those offenders who had victimized children exclusively ($n = 41$), nearly all ($n = 40$; 98%) had been identified and/or diagnosed with a sexual paraphilia compared with 64% of offenders who victimized adults exclusively ($n = 27$).

Table 4. The Number of Offenders with Sexual Paraphilia by Offender Category

Offender Type	Total Number		Paraphilia Type		
			Non-violent Paraphilia	Sadistic Paraphilia	Paraphilia NOS
	Sample	With Paraphilia			
Exclusive Child Molester	41	40	35	5	0
Exclusive Rapist	42	27	3	18	6
Rapist/Molester	18	16	10	5	1
Mixed Offenders	30	27	18	8	1
Non-Physical/Other	6	6	5	1	0
	137	116			

Further, chi-square analyses were used to determine whether sexual paraphilias were significantly related to the types of sexual offences perpetrated. Specifically, each paraphilia (i.e., sadism, pedophilia, exhibitionism, voyeurism, etc.) was examined against each sexual offence category (i.e., child molestation, rape/attempted rape, sexual homicide, etc.). This was achieved in two steps. First, 2×2 contingency chi-square analyses were performed to determine whether relationships existed between the variables of interest (i.e., sadism [yes/no] by rape [yes/no]). Following a significant chi result, each paraphilia type was selected for and a non-parametric chi-square was

performed to determine where the sexual offence types differed within each specific paraphilia type. Because there are a number of offenders who have committed more than one type of offence (e.g., child molestation and rape) the possibility of shared variance makes it unlikely that the percentage of offenders committing sexual violence will equal 100 within a specific paraphilia type. Though not ideal, this analysis is important to the scope of this research as it sheds light upon possible relationships to be explored further in future research.

Sadistic paraphilia. A 2×2 contingency chi revealed that sexual sadism (yes/no) is significantly associated with offences: intra-familial child molestation, $\chi^2(1, N = 117) = 5.12, p < .05$, extra-familial child molestation, $\chi^2(1, N = 117) = 14.67, p < .01$, rape and/or attempted rape, $\chi^2(1, N = 117) = 20.34, p < .01$, and sexual homicide, $\chi^2(1, N = 117) = 6.66, p < .05$. Non-parametric chi-square analyses revealed that after selecting for only those offenders identified and/or diagnosed with sexual sadism, 4 (11%) offenders committed intra-familial child molestation, $\chi^2(1, N = 37) = 22.73, p < .01$, 12 (32%) committed extra-familial child molestation, $\chi^2(1, N = 37) = 4.57, p < .05$, 30 (81%) committed rape and/or attempted rape, $\chi^2(1, N = 37) = 14.30, p < .01$, 3 (8%) committed a sexual homicide, $\chi^2(1, N = 37) = 25.97, p < .01$, and 10 (27%) committed a non-physical and/or other sexual offence, $\chi^2(1, N = 37) = 7.81, p < .01$ (see Table 5).

Table 5. The Percentage of Offenders with Sexual Paraphilia and the Offences they Committed

	<i>N</i>	IF Molest	EF Molest	Rape/ Attempt Rape	Sex Homicide	Non- physical/Other
Exhibitionism	18	3 (17%)**	4 (22%)*	10 (55%)	1 (5%)**	16 (89%)**
Voyeurism	13	2 (15%)*	4 (31%)	9 (69%)	1 (7.6%)**	8 (61%)
Pedophilia	71	24 (33%)**	60 (84%)**	21 (30%)**	3 (4%)**	19 (27%)**
Sadism	37	4 (11%)**	12 (32%)*	30 (81%)	3 (8%)**	10 (27%)**
Frotteurism	4	--	--	3 (75%)**	--	4(100%)
Fetishism	10	2 (20%)**	3 (30%)**	3 (30%)**	1 (10%)	5 (50%)
NOS	24	2 (8%)**	5 (21%)**	15 (62%)**	1 (4%)	10 (42%)**

Note. * Denotes a significant chi at the .05 level. ** Denotes a significant chi at the .01 level. IF/EF refers to intra-familial and extra-familial child molestation. Percentages do not add to 100 as a result of offenders committing multiple offences.

Non-violent physical paraphilias. Pedophilia was significantly associated with the commission of intra-familial child molestation, $\chi^2(1, N = 117) = 9.67, p < .01$, extra-familial child molestation, $\chi^2(1, N = 117) = 51.66, p < .01$, and rape and/or attempted rape, $\chi^2(1, N = 117) = 31.40, p < .01$. Non-parametric chi-square analyses revealed that after selecting for only those offenders identified and/or diagnosed pedophilia 24 (33%) committed intra-familial child molestation, $\chi^2(1, N = 71) = 7.45, p < .01$, 60 (84%) committed extra-familial child molestation, $\chi^2(1, N = 71) = 33.82, p < .01$, 21 (30%) committed rape and/or attempted rape, $\chi^2(1, N = 71) = 11.84, p < .01$, 3 (4%) committed a sexual homicide, $\chi^2(1, N = 71) = 59.51, p < .01$, and 19 (27%) committed a non-physical or other type of sexual offence, $\chi^2(1, N = 71) = 15.34, p < .01$ (see Table 5).

Among the different types of sexual offences, exhibitionism was significantly associated with extra-familial child molestation, $\chi^2(1, N = 117) = 11.13, p < .01$, and non-physical/other sexual offences, $\chi^2(1, N = 117) = 33.70, p < .01$. However, after selecting for only those offenders who had been identified and/or diagnosed with exhibitionism, results revealed that 3 (17%) offenders committed intra-familial child molestation, $\chi^2(1, N = 18) = 8.0, p < .01$, 4 (22%) committed extra-familial child molestation, $\chi^2(1, N = 18) = 5.56, p < .05$, 1 (5%) committed a sexual homicide, $\chi^2(1, N = 18) = 14.22, p < .01$, and

16 (89%) committed a non-physical or other sexual offence, $\chi^2(1, N = 18) = 10.90, p < .01$. Voyeurism was also found to be significantly associated with sexual violence. Specifically, significant chi-squares were found for extra-familial child molestation, $\chi^2(1, N = 117) = 4.5, p < .05$, and non-physical/other sexual offences, $\chi^2(1, N = 117) = 6.50, p < .05$. Further analysis, however, revealed no significant relationship between voyeurism and extra-familial child molestation, $\chi^2(1, N = 13) = 1.92, p = .17$, or non-physical/other sexual offences, $\chi^2(1, N = 13) = .69, p > .41$. There were no offenders identified and/or diagnosed with frotteurism who committed child molestation (intra-familial or extra-familial) or sexual homicide. There were 3 offenders who committed rape and/or attempted rape, $\chi^2(1, N = 4) = 1, p = .32$, and all 4 committed a non-physical/other sexual offence.

Weapon-paraphilia relationship. A chi-square analysis revealed a significant relationship between paraphilias identified and/or diagnosed and offenders' use of a weapon during the commission of sexual violence, $\chi^2(2, N = 116) = 48.79, p < .001$. Specifically, offenders identified and/or diagnosed with sexual sadism were significantly more likely to use weapons during their sexual offences, $\chi^2(1, N = 37) = 16.89, p < .001$, than to not use them ($n = 31$; 84%). Non-violent sexual paraphilias on the other hand were significantly related to not using a weapon during the commission of sexual offences, $\chi^2(1, N = 87) = 17.48, p < .001$, where 72% of non-violent paraphiliacs did not use a weapon. These results demonstrate that offenders with sexual sadism may be more likely to use a weapon during the commission of their sexual offences compared to other less violent paraphiliacs.

Sexual Fantasy

One hundred high risk sexual offenders out of 139 reported engaging in some form of sexual fantasy (2 offenders had explicitly denied engaging in sexual fantasy and fantasy information was unavailable for 37)⁵. Of those offenders who reported having sexual fantasies, only 95 files were detailed enough to sufficiently code for specific fantasy themes. More than 80% of this truncated sample ($n = 78$) reported at least one deviant sexual fantasy theme. The majority of offenders reported engaging in one primary fantasy theme (62%); however, a considerable number of offenders reported sexual fantasies considered to have multiple themes, $\chi^2(1, N = 97) = 5.45, p < .05$.

The breakdown across offender types who reportedly engaged in a combination of fantasy themes were as follows: 16 of 33 exclusive child molesters (48%), 4 of 23 exclusive rapists (17%), 2 of 10 rapist/molesters (20%), 11 of 23 mixed offenders (48%), and 3 of 4 nonphysical/other offenders (75%). There were no significant differences between offenders who reported one sexual fantasy theme and those with more than one sexual theme for number of sexual convictions, $t(94) = -.79, p = .43$, or total number of victims, $t(94) = .09, p = .93$ (see Table 6). Further, when fantasies were dichotomized into two categories, deviant sexual fantasies and non-deviant sexual fantasies, there were no significant differences between them for total number of sexual convictions, $t(94) = -.26, p = .80$, or total number of victims, $t(92) = .75, p = .46$. These results must be interpreted with caution, however, as a relatively small number of offenders ($n = 19$) reported strictly non-deviant sexual fantasies.

⁵ It is unknown whether the lack of information regarding sexual fantasy is because it was not specifically examined or considered or whether there was no evidence of sexual fantasy to report.

Table 6. Means, Standard Deviations, Effect Sizes, and T Values between Offenders with and without Multiple Fantasy Themes by Total Number of Convictions and Victims

		Total # of Convictions	Total # of Victims
Multiple Fantasy Themes	Yes	$M = 4.49, SD = 4.52$	$M = 5.16, SD = 4.16$
	No	$M = 5.20, SD = 4.16$	$M = 5.08, SD = 4.19$
T Value		$t = -.79$	$t = .090$
Effect Size		$\eta^2 = .006$	$\eta^2 = .000086$

Sexual fantasy and criminal history. To examine possible differences in offence history as a function of sexual fantasy, a MANOVA was performed with sexual fantasy as the independent variable and sexual convictions, nonsexual convictions, and total number of victims as dependent variables. The MANOVA was not significant, $F(9, 237) = 1.62, p = .10, MSE = 16.29$. Specifically, only 5.8% of the variability in convictions and number of victims could be accounted for by the different types of sexual fantasy. There were no significant differences between offenders with fantasies involving themes of consensual relations, children, violence, or any combination thereof for the number of sexual or nonsexual convictions (see Table 7). However, there were substantial differences in the number of victims from offenders' offence histories; therefore, a one-way ANOVA was utilized and it was determined that offenders with fantasies involving children did in fact have a significantly greater number of victims ($M = 7.6, SD = 6.12$) than did offenders who had violent sexual fantasies ($M = 3.7, SD = 2.81$), $F(3, 90) = 3.10, p = .03, MSE = 16.48, \eta^2 = .094$ (see Figure 2). It was also observed that offenders who reported consensual sexual fantasies had a greater number of victims than did offenders with violent sexual fantasies.

Table 7. Number of Sexual and Nonsexual Convictions and Number of Victims from Offenders' Offence Histories in Relation to Fantasy Type

	<i>n</i>	Sexual Convictions	Nonsexual Convictions	Number of Victims
Consensual	15	<i>M</i> = 5.35, <i>SD</i> = 4.04	<i>M</i> = 13.53, <i>SD</i> = 13.79	<i>M</i> = 4.52, <i>SD</i> = 2.32
Violent	21	<i>M</i> = 4.21, <i>SD</i> = 4.14	<i>M</i> = 16.10, <i>SD</i> = 15.65	<i>M</i> = 3.74, <i>SD</i> = 2.81
Child	16	<i>M</i> = 6.75, <i>SD</i> = 4.31	<i>M</i> = 6.75, <i>SD</i> = 7.89	<i>M</i> = 7.58, <i>SD</i> = 6.12
Combination	31	<i>M</i> = 4.48, <i>SD</i> = 4.51	<i>M</i> = 12.06, <i>SD</i> = 17.63	<i>M</i> = 5.16, <i>SD</i> = 4.16

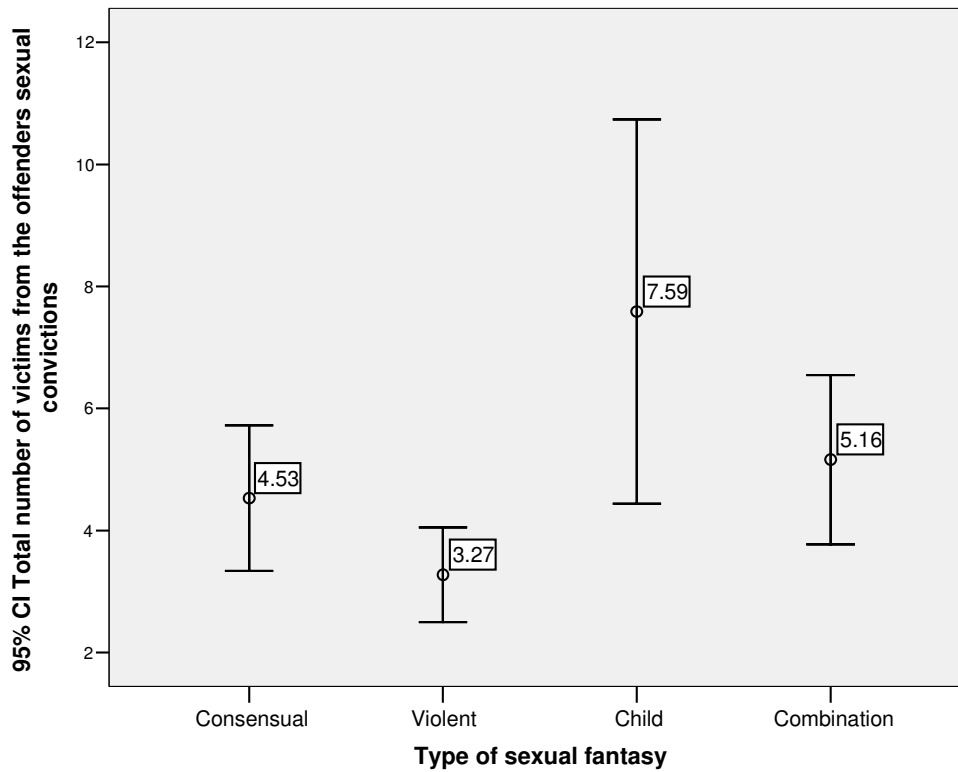


Figure 2. Total Number of Victims from Offenders' Offence Histories by Type of Sexual Fantasy Theme

Sexual Fantasy versus Type of Offender and Their Offences

The present study investigated whether offenders' reports of sexual fantasy themes were related to the type of offender they were categorized as. The chi-square was significant, $\chi^2(12, N = 93) = 43.76, p < .001$. Of those offenders who reportedly engaged in sexual fantasy, 35% ($n = 33$) were exclusive child molesters, 25% ($n = 23$) were exclusive rapists, 11% ($n = 10$) were rapist/molesters, 25% ($n = 23$) were mixed offenders, and 4% ($n = 4$) were nonphysical/other sexual offender types. Taking into consideration the entire sample, 80% of child molesters reported fantasizing compared to 55% of rapists, 56% of rapist/molesters, 77% of mixed offenders, and 66% of nonphysical/other offenders (see Table 8).

Table 8. Sexual Offenders' Reports of Sexual Fantasy by Offender Type

Offender Type	N	Sexual Fantasy Theme			
		Consensual	Violent	Child	Combo
Child Molesters	33	5	0	12	16
Rapists	23	4	15	0	4
Rapist/Molester	10	2	4	2	2
Mixed Offender	23	5	4	3	11
Nonphysical/ Other	4	1	0	0	3
Total	93				

In order to determine whether there were significant associations between the types of sexual fantasies and the types of sexual offences perpetrated, each type of sexual fantasy was examined individually between each type of sexual offence using multiple 2×2 contingency chi-square tables. Following a significant chi analysis, non-parametric chi analyses were performed selecting for only those offenders who reported a particular fantasy theme. As was the case in the examination of paraphilia and specific sexual

offences, some offenders engaged in multiple fantasy themes therefore percentages of offenders committing specific offences do not add to 100 per fantasy theme (see Table 9).

Table 9. The Relationship between Fantasy Themes and Sexual Offences

	IF	EF	Rape/Attempt Rape	Sex. Homicide	Non- physical/Other
Consensual	9 (20%)**	27 (60%)	22 (49%)	--	19 (42%)
Children	14 (32%)*	39 (89%)**	9 (20%)**	1 (2%)**	13 (29%)**
Violence	4 (9%)**	14 (32%)**	31 (72%)**	2 (5%)**	12 (28%)**
Combination	8 (22%)**	25 (67%)*	13 (35%)	--	15 (40%)

Note. * Denotes a significant chi at the .05 level. ** Denotes a significant chi at the .01 level. IF/EF refers to intra-familial and extra-familial child molestation. Percentages do not add to 100 as there are offenders with multiple fantasy themes.

Consensual sexual fantasies. A 2×2 contingency chi-square analysis revealed that consensual sexual fantasies were significantly associated with non-physical/other sexual offences, $\chi^2(1, N = 96) = 5.80, p < .05$. However, non-parametric chi square analyses revealed that consensual sexual fantasies were only significantly associated with intra-familial child molestation, $\chi^2(1, N = 45) = 16.20, p < .01$.

Violent sexual fantasies. Violent sexual fantasies were found to be significantly associated with three sexual offence types: intra-familial child molestation, $\chi^2(1, N = 96) = 6.28, p < .05$, extra-familial child molestation, $\chi^2(1, N = 96) = 19.47, p < .01$, and rape/attempted rape, $\chi^2(1, N = 96) = 11.14, p < .01$. After selecting for only those offenders who reportedly engaged in violent sexual fantasies and performing a non-parametric chi-square analysis for the different offence types, results revealed that 4 (9%) offenders committed intra-familial child molestation, $\chi^2(1, N = 43) = 28.49, p < .01$, 14 (32%) committed extra-familial child molestation, $\chi^2(1, N = 43) = 5.23, p < .05$, 31 (72%) committed rape and/or attempted rape, $\chi^2(1, N = 43) = 8.39, p < .01$, 2 (5%) committed a sexual homicide, $\chi^2(1, N = 43) = 35.37, p < .01$, and 12 (28%) committed a non-physical/other sexual offence $\chi^2(1, N = 43) = 8.39, p < .01$. Violent sexual fantasies were

directly related to weapon use during the perpetration of sexual violence, $\chi^2(1, N = 42) = 6.10, p < .05$; 29 (69%) high risk offenders who reported violent fantasy themes had used a weapon at least once during the commission of a sexual offence compared to 13 (31%) offenders who had not.

Sexual fantasies involving children. Sexual fantasies involving children were found to be significantly associated, not surprisingly, with both intra-familial, $\chi^2(1, N = 96) = 5.94, p < .05$, and extra-familial child molestation, $\chi^2(1, N = 96) = 32.62, p < .01$, as well as with rape and/attempted rape, $\chi^2(1, N = 96) = 34.82, p < .01$. After selecting for only those offenders who reported having fantasies involving children, 14 (32%) offenders had committed intra-familial child molestation, $\chi^2(1, N = 44) = 5.82, p < .05$, 39 (89%) had committed extra-familial child molestation, $\chi^2(1, N = 44) = 26.27, p < .01$, 9 had committed rape and/or attempted rape, $\chi^2(1, N = 44) = 15.36, p < .01$, 1 had committed a sexual homicide, $\chi^2(1, N = 44) = 40.09, p < .01$, and 13 had committed a non-physical/other sexual offence, $\chi^2(1, N = 44) = 7.36, p < .01$.

Association of Deviant Sexual Fantasies with Sexual Paraphilias.

A chi-square analysis revealed a lack of statistical significance between offenders' diagnosis of paraphilia and reports of deviant sexual fantasies, $\chi^2(1, N = 97) = 2.59, p = .11$; however, lack of statistical significance may be attributed to the unequal sample sizes within each cell. A significant chi-square result was obtained after selecting for only those offenders who had been identified and/or diagnosed for a sexual paraphilia, $\chi^2(1, N = 91) = 38.25, p < .001$. Specifically, 75 (82%) offenders who had been identified and/or diagnosed with at least one paraphilia reportedly engaged in deviant sexual fantasy whereas 16 (18%) paraphiliac offenders did not report deviant fantasies. Results also

demonstrated that offenders with paraphilias reported non-deviant as well as deviant sexual fantasies. Specifically, 14 of 89 paraphiliacs reported engaging in consensual sexual fantasies compared to 21 who reported violent fantasies, 17 who reported child fantasies, and 37 who reported a combination of sexual fantasy themes.

Psychopathy

PCL-R information was available for 83 (60%) of 139 sexual offenders. Psychopathy scores ranged from 13 to 39 with a mean score of 29.6 ($SD = 5.7$). Unfortunately, total scores were only available for 70 offenders; in the absence of a total score, information pertaining to level of psychopathy was used ($n = 13$). For example, one file described offender X as being low on the psychopathy scale; however, due to policy, his PCL-R score could not be published. Therefore, based on total scores and PCL-R information, offenders were categorized as low ($n = 9$), moderate ($n = 28$), or high ($n = 46$) on psychopathy. For analyses requiring a continuous variable, only those offenders who had actual PCL-R scores were included. Given that there were 46 psychopaths and 37 nonpsychopaths it was possible to examine the potential differences between these groups for various offence history variables. Using the PCL-R cut-off of ≥ 30 to separate non-psychopaths from psychopaths, it was found that non-psychopaths had a mean PCL-R score of 24.6 ($SD = 4.8$) whereas psychopaths had a mean score of 33.6 ($SD = 2.2$).

The association between psychopathy and offender type.

To determine whether there was a significant difference between the various offender types and psychopathy, a one-way ANOVA was utilized with offenders' PCL-R scores as the dependent variable and offender type as the independent variable. A

significant difference was found, $F(4, 65) = 4.58, p < .01, MSE = 26.72$, where offender type accounted for 22% of the variance of PCL-R total scores. Follow-up post hoc analyses revealed that exclusive child molesters ($M = 25.47, SD = 6.81$) had significantly lower PCL-R scores than exclusive rapists ($M = 31.92, SD = 3.49$) and mixed offenders ($M = 31.34, SD = 5.52$). Further, when considering psychopathy as low, moderate, and high, a similar trend is observed whereby offenders who sexually assaulted children demonstrated lower psychopathy scores than did rapists and mixed offenders (see Figure 3).

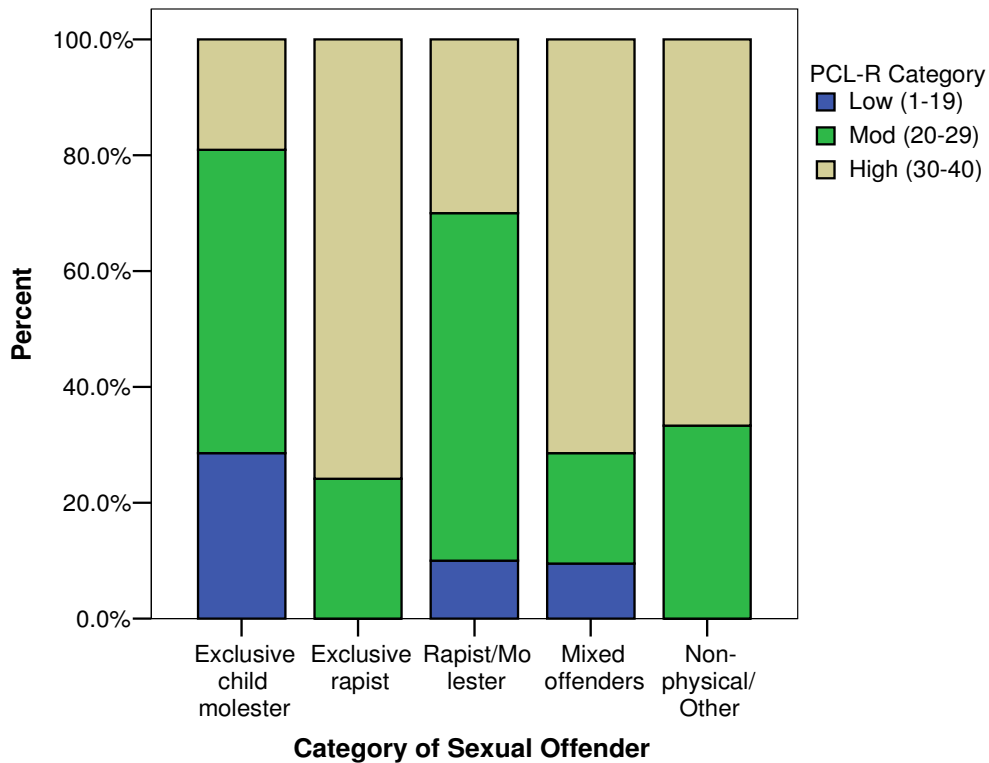


Figure 3. The Relationship between Psychopathy and Offender Type

Psychopathy and criminal history.

In order to determine whether offenders' PCL-R total scores were significantly associated with past number of sexual and nonsexual convictions and number of victims, Pearson correlation coefficients were computed. PCL-R scores were significantly correlated with past nonsexual convictions ($r = .29, p < .05$) but not with sexual convictions ($r = -.036, n.s$) or total number of victims ($r = -.184, n.s.$). Specifically, results indicated that while those offenders with higher PCL-R scores typically had a greater number of nonsexual convictions than those with lower PCL-R scores they did not have more sexual convictions. A one-way ANOVA was performed to determine whether psychopathy was related to offenders' relationships with their most current victims. Total PCL-R scores were used as the measure of psychopathy. Although the ANOVA was not significant, $F(6, 63) = 1.85, p = .10$, demonstrating that psychopathy did not influence the offender-victim relationship, 15% of the variance in offenders' PCL-R scores could be attributed to by the relationship between victim and offender.

Psychopathy and weapon use. An independent - sample t -test was run to determine whether weapon use was related to psychopathy as measured by the PCL-R. The t -test was significant, $t(49) = 2.49, p < .05$ with 8.5% of the variability in PCL-R scores could be attributed to offenders use of a weapon during at least one of their sexual offences. The mean PCL-R score of offenders' who had used a weapon during the commission of sexual violence was 31.46 ($SD = 3.64$) whereas the mean score for offenders who had never used a weapon was 28.17 ($SD = 6.91$).

Psychopathy versus paraphilias. PCL-R scores were not significantly associated with the number of sexual paraphilias identified or diagnosed ($r = -.097$, n.s.). However, chi-square analyses were utilized to examine further whether there was a significant relationship between offenders' sexual paraphilia (i.e., non-violent sexual paraphilia, sadistic paraphilia, and paraphilia NOS) and low, moderate, or high psychopathy. The only individual paraphilia found to be significantly associated with psychopathy was sexual sadism, $\chi^2(2, N = 67) = 6.79, p < .05$. To determine whether there were significant differences for PCL-R scores between offenders with non-violent physical paraphilia, sadistic paraphilia, and paraphilia NOS, a one-way ANOVA was performed. The ANOVA was significant, $F(2, 54) = 3.53, p < .05, MSE = 33.32$ with 12% of the variability in PCL-R scores attributed to by sexual paraphilia. Moreover, results demonstrated that offenders with sadistic paraphilia ($M = 30.74, SD = 5.35$) had higher PCL-R scores than offenders with non-violent physical paraphilia ($M = 27.48, SD = 6.11$). While both sadistic and non-violent physical paraphilia subgroups demonstrated very high PCL-R scores, those offenders with sexual sadism still rated significantly higher on the PCL-R than those offenders with non-violent physical paraphilia.

Psychopathy versus sexual fantasy. A one-way ANOVA was used to determine whether sexual fantasy themes were significantly associated with offenders' PCL-R scores. No significant differences were identified, $F(3, 44) = 1.63, p = .20, MSE = 37.84$, between offenders reporting consensual sexual fantasies ($M = 28.2, SD = 7.67$), violent sexual fantasies including rape and power ($M = 31.19, SD = 3.44$), fantasies involving children ($M = 25.43, SD = 7.89$) or any combination thereof ($M = 29, SD = 6.32$).

The extremely high mean PCL-R scores for offenders reporting sexual fantasies suggests a possible ceiling effect, which could result in a lack of statistical significance. To counteract this possibility, psychopathy was dichotomized using a PCL-R cut-off score of ≥ 25 (see Guy & Douglas, 2005; Langton, Barbaree, Harkins, & Peacock, 2006). Chi-square analysis was used after selecting only those offenders considered psychopathic using a PCL-R score of ≥ 25 to determine whether a relationship existed between psychopaths sexual fantasy themes, $\chi^2(3, N = 41) = 9.4, p = .024$ (see Figure 4). Specifically, results demonstrated that psychopaths were more inclined to engage in violent sexual fantasies than any other type. However, contrary to expectation, there was no relationship between psychopathy and multiple sexual fantasy themes, $\chi^2(1, N = 57) = 1.51, p > .05$.

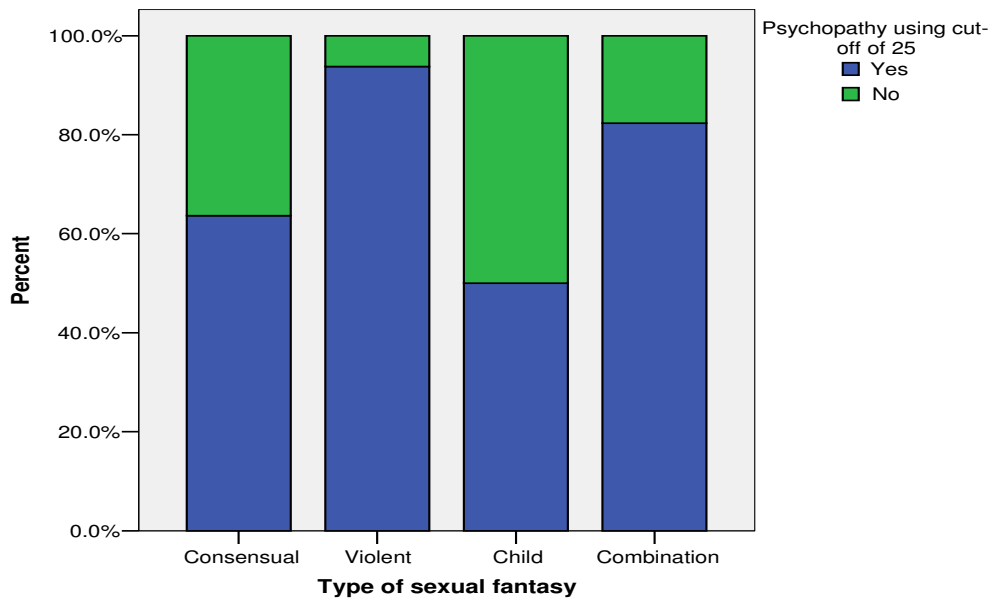


Figure 4. The Relationship between Psychopathy and Sexual Fantasy Themes

Discussion

In response to the paucity of empirical research specifically examining high risk sexual offenders, the present study systematically investigated the offence histories, diagnoses of sexual paraphilia, sexual fantasies, and psychopathy, as well as the potential relationship between these variables for a group of offenders in the ISPIN database. More importantly, the present study was the first to investigate a subgroup of offenders which the RCMP Behavioural Sciences Group considers to be some of the highest risk sexual offenders in B.C.

A search of the sexual offender literature revealed not only a lack of agreement regarding the defining characteristics of high risk sexual predators, but also a lack of consistency regarding the incidence and influence of sexual paraphilia, sexual fantasy, and psychopathy within sex offenders in general (Abel et al., 1988; Langevin et al., 1998; MacCulloch et al., 1983; Smallbone & Wortley, 2004). As a result, the present study was developed around three primary objectives: First, to investigate the influence of sexual paraphilias and sexual fantasy on sexual offenders' behaviour; second, to explore the influence of sexual paraphilias and sexual fantasy on offence characteristics; and third, to consider the potential relationship between sexual paraphilias, sexual fantasy, and psychopathy on offence characteristics and offence motivation. It was anticipated that the present study would not only provide insight into the influence of sexual paraphilias, deviant sexual fantasy, and psychopathy, but also, it would be able to provide much needed descriptive information about a group of offenders that society perceives to be the most deviant and who account for such a large proportion of sexual violence.

The sample was comprised of 41 exclusive child molesters, 42 exclusive rapists, and a nearly equal number of all other offender groups combined ($n = 54$). These results are particularly important in that they demonstrate that there is no one predominant type of high risk offender. Instead, these results suggest that high risk sexual offenders are comprised of a diversity of offender types who perpetrate a range of sexually violent offenses, and that considered as a group, they do not have a preference for any particular victim type. However, the majority of offenders engaged in only one main offence type as evidenced by the 83 offenders (60%) who had convictions for only one type of sexual offence rather than many different ones.

The present study also found significant relationships between the types of sexual offences that were committed and a number of other important variables. For example, offenders who offended against children (exclusive child molesters and rapist/molester groups) had a greater number of sexual convictions and victims than those who offended against adults exclusively. Further, mixed offenders (those who engaged in a number of different types of sexual offences or who were indiscriminate for victim age) had their first conviction at a much younger age ($M = 23$ years, $SD = 5$ years) than offenders who victimized children exclusively ($M = 30$ years, $SD = 11$ years). Consequently, although child molesters began offending later (or were first convicted later in life) than other offender types, they appear to be more persistent in their offences as evidenced by their greater number of sexual convictions and victims. There were 33 offenders (24%) who reportedly began sexually offending in adolescence ($M = 15$ years). Of those who began in adolescence 11 (33%) were exclusive child molesters, 12 (36%) were mixed offenders, and 10 (30%) were rapists and other offenders combined. These results suggest to the

possibility that juvenile onset may differ in relation to the types of offences that offenders are committing. Unfortunately, not all of the files examined contained information about juvenile offending and without corroborative records (i.e., juvenile records) it was not possible to confirm reported juvenile offending with actual offence convictions or details.

Incidence of Sexual Paraphilias and Their Relationship with High Risk Sexual Offenders

The present study hypothesized that the majority of the current sample would evidence sexual paraphilias, and further that a substantial proportion would evidence multiple paraphilias. Indeed, the majority of the present sample had been diagnosed and/or identified with at least one sexual paraphilia using DSM-IV-TR criteria ($n = 118$; 85%). Although most evidenced only one sexual paraphilia, a sizeable percentage ($n = 39$; 33%) did have two or more. Specifically, of those offenders who had at least one paraphilia, 79 (67%) had one paraphilia, 24 (20%) had two paraphilias, and 15 (13%) had three or more. In a rare examination of high risk sexual offenders, Levenson (2004) and Levenson and Morin (2006) demonstrated that high risk sexual offenders selected for civil commitment in the USA were significantly more likely to have one or more paraphilia diagnoses than offenders selected for release. Furthermore, their studies demonstrated that although all of the offenders in their samples were considered to be high risk offenders, those with paraphilia diagnoses were considered higher risk than those who did not have such diagnoses (see also Jackson & Richards, 2007).

In relation to the general paraphilia research, the present results are lower than those reported by Abel et al. (1988) as the present study included only those paraphilias diagnosed and/or identified using DSM-IV-TR. Moreover, the present study found higher

incidences of sexual paraphilia than were reported by Smallbone and Wortley (2004) who found that among 362 convicted child molesters, 5% met diagnostic criteria for multiple paraphilias. At first glance, one could argue that the difference in findings between the present study and those of previous research studies could be attributable to the composition of offender samples. The present study was heterogeneous for various sex offender types while Smallbone and Wortley's (2004) study was comprised of child molesters only. Taking this into consideration, the present study still found a slightly higher percentage of exclusive child molesters ($n = 24$; 20%) having two or more sexual paraphilias than did Smallbone and Wortley (2004; see also Marshall et al., 1991). The most obvious explanation is that high risk sexual offenders may simply be more likely to receive a diagnosis, or a possible diagnosis, of a sexual paraphilia than lower risk offenders because of the severity or frequency of sexual offences perpetrated. Alternatively, high risk offenders may display more overt sexual deviancies than lower risk offenders making their paraphilic behaviours more identifiable and subsequently more readily diagnosable. Importantly, research utilizing official records, such as the present study, have found far less dramatic rates of offence cross over (engaging in more than one type of offence) and multiple paraphilias (Marshall et al., 1991; Smallbone & Wortley, 2004) than studies that have used more objective measures of deviant sexual interests and arousal (English, Jones, Patrick, & Pasini-Hill, 2003; Wilcox, Sosnowski, Warberg, & Beech, 2005). Thus although the present study identified a substantial number of offenders with multiple paraphilic interests, it is clear that in order to fully understand the incidence of and relationship between sexual paraphilias and offending

behaviour one must also include additional methods of data collection such as polygraph testing and objective measures of sexual interest and/or arousal (Heil & Simons, 2008).

A specific examination of the relationship between offender type and their subsequent paraphilias reveals that offenders who offend against children may be more likely to be identified and/or diagnosed with a sexual paraphilia than any other type of offender. Nearly all of the offenders who victimized children exclusively were diagnosed or identified with a sexual paraphilia (98%). Similarly, between 80% and 90% of offenders who perpetrated sexual violence against more than one victim type (i.e., rapist/molester & mixed offenders), which included child victims, were identified and/or diagnosed with a sexual paraphilia compared to only 67% of exclusive rapists. This trend may be the result of differing offence motivations. Rapists are a heterogeneous group; many have negative views of women, endorse rape myths, condone violence, and display a hyper-identification with the masculine role (Marshall, Laws, & Barbaree, 1990). As such, it is possible that many of the exclusive rapists in the present study engaged in rape for reasons other than sexual preoccupation or deviancy resulting in a lesser likelihood of clinicians seeing their offences as extensions of paraphilic behaviour. In contrast, child molesters tend to be motivated more by sexual deviancy and inappropriate sexual attraction than power, control, or anger (Cohen & Galynker, 2002; Hall & Hall, 2007).

As was previously mentioned, the present study found that offenders who victimized children had a significantly greater number of sexual convictions and victims than offenders who victimized adults exclusively (Looman, 2005). Consequently, offenders who victimize children may receive paraphilia diagnoses more readily than non-molesters because their increased frequency of offences may draw attention to their

sexual deviancies more readily than offenders who committed one-time offences. Not all child molesters, however, had a paraphilia diagnosis (e.g., Murray, 2000); thus clinicians should not diagnose on the basis of behaviour alone. Instead, frequency of offensive behaviours, fantasies, and sexual urges should be taken into consideration together in order to clearly understand whether a child molester does or does not meet diagnostic criteria. The dependence of diagnostic criteria on sexual fantasies and intense sexual urges are only applicable when the offender self-reports such fantasies or sexual urges or they can be confirmed by phallometric assessment. For instance, if an offender does not report deviant sexual fantasies and urges in accordance with his offensive behaviours and he has not been convicted of multiple sexual offences of the same nature (i.e., serial rape), it would be much more difficult to apply diagnostic criteria than it would be for offenders who do have multiple offences.

Moreover, the present study found that child molesters were three times more likely to be diagnosed with a non-violent physical paraphilia, such as pedophilia, than they were to be diagnosed with sexual sadism. The finding that so few exclusive child molesters had (or reported) sadistic urges and/or inclinations contrasts with popular opinion regarding these offenders particularly as the media often portrays these offences as vicious and brutal assaults against children (Salter, 2003; Hall & Hall, 2007). In fact, pedophiles rarely use “force” to obtain compliance; they instead rely on various forms of psychological manipulation and desensitization (Murray, 2000) to secure their victims.

The present study further hypothesized that there would be a significant positive correlation between the extent of offenders’ criminal histories (i.e., number of convictions and victims) and the extent of their paraphilic interests (i.e., number of

paraphilias identified/diagnosed; Dunsieath et al., 2004). Contrary to this hypothesis, the extent of offenders' paraphilic interests was not significantly associated with their past number of sexual or nonsexual convictions or number of victims. A significant relationship was observed, however, between the types of sexual paraphilia that offenders were diagnosed with and their subsequent offence characteristics. Offenders with primarily non-violent paraphilias (e.g., pedophilia, exhibitionism, & voyeurism) had a greater number of sexual convictions and victims than those with more violent sexual paraphilia (i.e., sexual sadism). Specifically, non-violent paraphiliacs had an average of 5.5 sexual convictions and 6.2 victims compared to 3.5 sexual convictions and 4 victims observed for violent paraphiliacs. There are a number of possible explanations for the difference in offence characteristics between violent and non-violent paraphiliacs. One possibility is that offenders with non-violent sexual paraphilia may have greater opportunities than offenders with violent paraphilia to engage in offences that victimize multiple people at one time. However, the number of victims from offenders' index offences did not significantly differ between offenders with non-violent paraphilia ($M = 2.27, SD = 2.97$) and offenders with violent paraphilia ($M = 2.0, SD = 3.2$). One caveat is that index offences likely do not reflect the dynamics (including number of victims) of previous sexual offences perpetrated by offenders; thus this issue should be explored further in future research. In order to explore this theory further, future research should investigate whether time spent incarcerated/detained is positively related to the number of victims assaulted by high risk offenders and compare this against a lower risk and non-offender sample.

There was a substantial overlap between offenders who committed assaults against adults exclusively and offenders identified and/or diagnosed with sexual sadism whereby 43% of exclusive rapists were identified as sexual sadists. Taking into consideration the characteristics of sexual sadism (Yates et al., 2008) it is logical to extend that these offenders likely engaged in more violent and severe offences that on conviction would result in lengthier incarceration sentences than non-violent paraphiliacs, consequently resulting in fewer opportunities to re-offend in the community. Interestingly, the present study identified a significant relationship between offenders using a weapon during a sexual offence and being diagnosed and/or identified with sexual sadism, further demonstrating the violent tendencies displayed by sexual sadists. Considering the harm they cause to their victims and the fact that violent offences are much more visible than non-violent offences, it is expected that these offenders would come to the attention of authorities more readily resulting in substantial apprehension efforts on the part of law enforcement agencies.

Finally, present results have established that offenders who victimize children are more apt to receive a diagnosis and have a greater number of sexual convictions and victims than other offender types. Therefore, a third—and not mutually exclusive—possibility is that the frequent re-arrests of offenders diagnosed with non-violent paraphilia may result from the increased supervision involved while on community release. Given the combined likelihood that non-violent offenders receive lesser sentences, providing them more opportunities to re-offend in the community, and the close monitoring of high risk offenders while on release, it is likely that their repeated

criminal behaviours (sexual and nonsexual) would come to the attention of law enforcement sooner.

The relationship between paraphilia types and criminal history variables requires further exploration. Theoretically, a greater number of victims should result in a greater number of sexual convictions. However, it should be considered that some offence types may generate far more victims than other offence types, thereby superficially increasing the number of victims for a particular offender type. To account for this, victim-to-conviction ratios for violent paraphiliacs ($M = 1.24$, $SD = .57$) and non-violent paraphiliacs ($M = 1.29$, $SD = .62$) were performed. These ratios reveal that there may not be a profound difference between the non-violent and violent paraphiliacs.

In summary, the present study found higher incidences of individual and multiple sexual paraphilia diagnoses than have been reported in other sex offender samples (Marshall et al., 1991; Smallbone & Wortley, 2004). The number of paraphilias offenders were identified and/or diagnosed with was not significantly associated with the number of past sexual or nonsexual convictions. Finally, significant relationships were found between different offender types and the presence of paraphilias such that offenders who victimized children were more apt to receive a paraphilia diagnosis than were offenders who victimized adults exclusively.

Prevalence of Sexual Fantasy Among High Risk Sexual Offenders

There is widespread acceptance that sexual fantasy does play a role in the sexual offences committed by sexual predators but little clarity or insight into the nature of that relationship (Daleiden et al., 1998; Howells, Day, & Wright, 2004; MacCulloch et al., 1983; Meloy, 2000). The present study sought to investigate what percentage of high risk

sexual offenders reported engaging in sexual fantasy and how fantasy themes related to the offences they perpetrated. Deviant sexual fantasies were reported by 78 (82%) high risk offenders, a markedly higher incidence rate than the 33% reported by Langevin et al. (1998). Of particular interest, Langevin et al.'s sexual offender sample was not exclusively high risk sexual offenders suggesting that deviant sexual fantasy may be a distinguishing factor between low and high risk sexual offenders.

Consistent with previous research linking violent sexual fantasy with violent sexual offending (Deu & Edelman, 1997; MacCulloch et al., 1983) the present study found a significant relationship between offenders' violent sexual fantasies and their subsequent use of weapons during offences perpetrated. Specifically, of those offenders who reportedly engaged in violent sexual fantasies, 29 (69%) had used a weapon during at least one of their sexual offences whereas the majority of offenders who had strictly consensual ($n = 27$; 60%) or child ($n = 34$; 77%) sexual fantasies did not use a weapon during any of their sexual offences. Therefore, the current study revealed that deviant sexual fantasies do appear to influence an offender's actual behaviour. Numerous researchers have attempted to determine the role of deviant sexual fantasy and deviant sexual interests in the offending process (Curnoe & Langevin, 2002; Deu & Edelman, 1997; Langevin et al., 1998; MacCulloch et al., 1983; Prentky et al., 1989) and many clinicians now accept the view that there is a process in which obsessive fantasies may escalate in frequency and intensity driving the offender to commit violent and often sexual offences (Howitt, 2004). Research has also demonstrated that offenders who disclose deviant sexual fantasies may be more dangerous and evidence greater emotional disturbance than offenders who disclose non-deviant sexual fantasies (e.g., Deu &

Edelmann, 1997; Prentky et al., 1989), which suggests that high risk sexual offenders as a group may show a greater likelihood of having deviant sexual fantasies than any other sex offender type.

Surprisingly, although the present study found there to be no significant differences between the numbers of sexual or nonsexual convictions for the various fantasy themes reported by offenders, however, there were significant differences between the different fantasy themes for total number of victims. Specifically, offenders who reported fantasy themes involving children had a significantly greater number of victims ($M = 7.6$) than offenders who had violent sexual fantasies ($M = 3.3$). The most plausible explanation for these particular results lies within the nature of the offences perpetrated and the subsequent response of the Canadian judicial system. Specifically, there were a substantial number of offenders ($n = 48$) who had more than one victim per offence. For example, one offender from the present study was charged and convicted of 6 counts of sexual assault, with a total of 19 victims ranging in age from 16 months to 21 years. Offenders who offended against children exclusively ($M = 1.29$) had a significantly greater victim-to-offence conviction ratio than offenders who offended against adults exclusively ($M = 1.06$). As such, although offenders who fantasized about children had a greater number of victims, the victim- to- conviction ratio may likely account for the lack of difference between the overall number of sexual convictions since more victims are processed per conviction for child molesters.

It has already been established that child molesters have on average a greater number of sexual convictions and victims than do other offender types; however, present results revealed no significant differences in the number of sexual convictions between

offenders who fantasized about children and those who had violent, consensual, or any combination of sexual fantasies. However, when considering the breakdown of offender types who reported sexual fantasies (deviant & non-deviant) in relation to those same offenders who did not disclose any sexual fantasies, results demonstrated that child molesters engaged in sexual fantasy, or at the very least disclosed their sexual fantasies, to a greater extent than other offender types. To illustrate, 80% of child molesters ($n = 33$) reported having sexual fantasies compared to 55% of rapists ($n = 23$; see Table 8). Moreover, 47 % ($n = 45$) of offenders reported engaging in consensual (non-deviant) sexual fantasies either exclusively or in combination with additional fantasy themes and that no significant trends were observed for which offender types were more likely to report only non-deviant sexual fantasies ($n = 17$). Langevin et al. (1998) reported that nearly their entire sample of sexual offenders had consensual sexual fantasies with adult females. Similarly, Sheldon and Howitt (2008) demonstrated that the most common sexual fantasies reported by child molesters and child pornographers were indeed typical adult-male heterosexual fantasies and that child molesters reported significantly fewer deviant and non-deviant sexual fantasies than child pornographers. As such, it is entirely possible that sexual offenders in general may fantasize about “*normal*” non-offensive behaviours with deviant sexual fantasies secondarily triggered by an event or situation (Langevin et al., 1998). Therefore, in light of past research and present findings, it appears that sexual fantasy (deviant and non-deviant) does play a significant role in the commission of sexual offences and the role of those fantasies may be substantially different depending on the types of offences perpetrated.

Further, high risk offenders identified and/or diagnosed with one or more sexual paraphilia were significantly more likely to report deviant sexual fantasies ($n = 75$; 82%) than non-deviant fantasies ($n = 16$; 18%). Curnoe and Langevin (2002) established that sexual offenders who reported deviant sexual fantasies were less emotionally stable and demonstrated greater social and emotional alienation relative to sexual offenders who did not have deviant sexual fantasies. Furthermore, they found that diagnoses of sexual paraphilia in addition to deviant sexual fantasies (not associated with their paraphilia) may influence further social and emotional alienation resulting in increased use of deviant sexual fantasy as a coping strategy.

Offenders have also been shown to engage in sexual offences more often when exposed to stressors such as having an argument with a spouse, being fired, or being rejected by a woman (Pithers, Beal, Armstrong, & Petty, 1989). It has been proposed that child molesters as a group may experience greater stress and emotional incongruity as a result of inappropriate sexual attraction to children. Accordingly, the child molesters from the present sample may have greater incidences of deviant sexual fantasy compared to other offender types because of self-denigration coping strategies (e.g., Looman, 1995). Specifically, exclusive child molesters may experience greater emotional strains than other offender types thereby motivating their engagement in deviant sexual fantasy which in turn results in further stress and emotional discord. In order to confirm whether negative mood states were an integral component of high risk offenders' sexual fantasies, future research should examine the relationship between offenders' moods and reports of deviant sexual fantasy.

Not all offenders, as the present study confirms, are necessarily predisposed to engaging in sexual (deviant or non-deviant) fantasy, making it clear that offenders' use of fantasy as a way to mentally practice their sexually deviant behaviours may be attributed to individual differences rather than fantasy in general. For example, previous literature has suggested that organized offenders are more likely to be driven by deviant sexual fantasy than are disorganized offenders (Prentky et al., 1989; Ressler, Burgess, Douglas, Hartman, & D'Agostino, 1986). Organized offenders plan their offences to the minutest detail; they are highly repetitive, they choose their victims before their offences, and they leave little to chance. Disorganized offenders on the other hand are impulsive, opportunistic, and random. Indeed, apparently motiveless or senseless offences have often been attributed to fantasy reenactment (MacCulloch et al., 1983). Deu and Edelman (1997) also found that predatory sexual offenders (e.g., offenders who committed more than one sexual offence of the same type, preplanned the commission of their sexual offences, carried out their offences in an organized manner, chose their victims prior to committing their offences) had more organized sexual fantasies than did opportunistic offenders (e.g., perpetrated only one known sexual offence, offence was not premeditated). Therefore, there is some research to suggest that predatory offenders and organized offenders are more inclined to use sexual fantasy as a way to plan their offences before acting on them whereas opportunistic and disorganized offenders may use fantasy for other purposes such as wish fulfillment or sexual release (Langevin et al., 1998). It would be interesting for future research to specifically code offenders' sexual offence histories, or at least their index offences, as either predatory or opportunistic in

order to further investigate the relationship between types of offences perpetrated and offenders' specific sexual fantasies.

Psychopathy's Association with High Risk Sexual Offenders

The present study examined the interactive relationship between psychopathy, sexual paraphilias, and sexual fantasy. Psychopathy information was available for 83 (60%) offenders with PCL-R scores ranging from 13 to 39 and a sample mean of 29.6 ($SD = 5.68$). As was hypothesized, a large number of offenders ($n = 46$) were considered psychopathic. Results further demonstrated that offenders' PCL-R scores were much higher than the published norms for male offenders ($M = 22$; Hare, 2003) or forensic patients ($M = 20$; Hare, 2003). Though not developed as a risk assessment instrument, the PCL-R has demonstrated much utility in identifying offenders at high risk for violent recidivism (Boer, Wilson, Gauthier, & Hart, 1997; Webster, Harris, Rice, Cormier, & Quinsey, 1994) which could partially explain why such a high percentage of offenders within the current sample were psychopathic.

The present study's hypothesis that psychopathic offenders would commit a greater variety of offences than would non-psychopathic offenders (Porter et al., 2000) was supported. Consistent with previous reports, the present study has clearly demonstrated that psychopathy differed between various groups of sexual offenders (Firestone, Bradford, Greenberg, & Serran, 2000; Jackson & Richards, 2007; Porter, Fairweather, Drugge, Herve, Birt, & Boer, 2000; Porter et al., 2003). Exclusive child molesters ($M = 25.5$) had significantly lower psychopathy scores than did exclusive rapists ($M = 31.9$) and mixed offenders ($M = 31.3$). In general, research has demonstrated that the prevalence rate of psychopathy is much lower in child molesters (10% - 15%)

than in rapists (40% - 50 %; Hare, 1999) which may be the result of psychopaths' thrill-seeking behaviour, impulsivity, and loss of interest in particular victim types over time motivating them to perpetrate sexual offences against multiple victim types (i.e., adults and children; Porter et al., 2002). Not only was the mean PCL-R score for the present sample much higher than has been reported in previous studies (e.g., Jackson & Richards, 2007) it was observed that the mean psychopathy score for the different offender types were much higher than has previously been reported. Specifically, the mean PCL-R score for child molesters was 25.47 whereas Porter et al. (2000) reported a score of 20.93 for extra-familial child molesters and 21.17 for intra-familial child molesters. Similar comparisons were made for rapists and mixed offenders. Thus, although child molesters are characteristically less psychopathic than rapists and mixed offenders, when one takes into account their high risk status, it becomes apparent that their level of psychopathy also increases which may result in greater offence severity and violence.

Several research studies have demonstrated that psychopathic sexual offenders are more violent and sadistic in their sexual offences than are other sex offenders (Barbaree, Seto, Serin, Amos, & Preston, 1994, Porter et al., 2003) which is consistent with the present study's finding that offenders who had used a weapon during at least one of their previous sexual offences scored significantly higher on the PCL-R than offenders who had never used a weapon. These results are to be expected given the present samples high risk status and the repeatedly demonstrated relationship between psychopathy and increased risk for violent and sexual recidivism (Flight & Forth, 2007; Jackson & Richards, 2007; Levenson, 2004; Levenson & Morin, 2006; Quinsey, Harris, Rice, & Cormier, 1998; Quinsey, Lalumiere, Rice, & Harris, 1995; Rice & Harris, 1997).

Although psychopathy was associated with a more extensive criminal history, the present study found that contrary to our hypothesis psychopathy was not associated with the perpetration of a greater number of sexual offences or a greater number of sexual victims. Brown and Forth (1997) similarly found that while PCL-R scores were positively associated with the number of nonsexual convictions, they were not significantly correlated with the past number of sexual offences. Results of the present study are also consistent with reports that sexual offenders are more likely to be convicted of a new nonsexual offence than a sexual one (Hanson & Bussiere, 1998; Smallbone & Wortley, 2004). It would appear that psychopathy may not be as predictive of future sexual criminality as it is for criminality in general. Indeed, previous research has also detailed that while there appears to be a fairly direct relationship between psychopathy and general and violent recidivism (see Hemphill, Hare, & Wong, 1998), the relationship between psychopathy and sexual violence is much more complex (Porter et al., 2000; Porter et al., 2002). While present results determined that no relationship existed between increased PCL-R scores and the number of past sexual convictions or number of past sexual victims, the presence of psychopathy has been repeatedly demonstrated to be predictive of the types and severity of sexual offences perpetrated and is highly predictive of both general and violent recidivism (Brown & Forth, 1997; Gretton, McBride, Hare, O'Shaughnessy, & Kumka, 2001; Looman et al., 2005; Porter et al., 2000).

Psychopathy and sexual paraphilias.

The existing literature associating sexual paraphilias with patterns of psychopathy is extremely limited. The present study was the first to examine the relationship between

psychopathy and various sexual paraphilias and found that psychopathy does not appear to be associated with an increase in sexual deviancies, at least as demonstrated by an increased number of sexual paraphilias. However, there does appear to be a significant relationship between psychopathy and the presence of sexual sadism. Psychopaths have been frequently identified as being more violent, gratuitous, and sadistic in their sexual and nonsexual offences than non-psychopaths (Firestone et al., 1998b; Holt, Meloy, & Strack, 1999). Firestone et al. (2000) examined the relationship between psychopathy and deviant sexual arousal among a group of rapists and child molesters. They found that psychopathic child molesters demonstrated higher levels of deviant sexual arousal to sexually violent indexes. As a result, Firestone et al. proposed that child molesters who display both deviant sexual arousal and psychopathy may be less able to inhibit their sexual urges resulting in increased sexual perseverance. Unfortunately, Firestone et al. did not specifically detail which paraphilic interests were present within their sample of sexual offenders making it unclear whether their sample possessed a greater likelihood of sadistic paraphilias or whether they encompassed a variety of sexual paraphilia.

Psychopathy and Sexual Fantasy

Sexual fantasy was reported by 43 of 44 psychopaths (98%) and 13 of 13 non-psychopaths (100%) whereas deviant sexual fantasy was reported by 34 of 43 psychopaths (79%) and 8 of 13 non-psychopaths (62%). Although not statistically significant, a substantially greater number of psychopaths reported engaging in deviant sexual fantasy than non-psychopaths. Limitations in sample size may account for the failure to demonstrate significant differences between the two groups; therefore future research should investigate this possible relationship. Psychopaths are manipulative and

deceitful (Hare, 1991, 1996; Porter & Woodworth, 2007) making it is possible that psychopaths may be more willing to elaborate or embellish their sexual fantasies in order to get a reaction from an interviewer or clinician. Thus, even if there were significant differences between psychopaths and non-psychopaths with regard to sexual fantasy, it may not be that psychopaths are more likely to engage in sexual fantasy than non-psychopaths, but rather, psychopaths may be more willing to report (either deceptively or honestly) or provide details of their fantasies.

The prediction that psychopaths would report a greater variety of sexual fantasies and that these fantasies would involve themes of violence to a greater extent than non-psychopaths was not supported. There were no significant differences in PCL-R scores between offenders who reported violent sexual fantasies, child fantasies, consensual fantasies, or any combination of fantasy themes. Moreover, there were no significant relationships between psychopathy and specific fantasy themes even after reducing the psychopathy cut-off score to ≥ 25 (Langton et al., 2006). Consequently, it is possible that sexual fantasy adds little more than creativity to the heterogeneity of sexual violence. Although it has been repeatedly demonstrated that psychopaths engage in a wider diversity of sexual and nonsexual offences, are more sadistic in the perpetration of those offences, and recidivate at a faster rate than non-psychopaths, sexual fantasy does not appear to distinguish between psychopaths and non-psychopaths as a motivating influence for sexual violence.

The majority of psychopaths reported one primary sexual fantasy theme as opposed to multiple themes. Of interest, among the different fantasy themes, there were nearly equal numbers of psychopaths who reported engaging in violent sexual fantasy

themes ($n = 15$; 37.5%) as there were who reported a combination of fantasy themes ($n = 14$, 35%). Although the results were not statistically significant, they suggest that psychopaths may engage in violent sexual fantasy themes more so than other less violent fantasies (see Figure 4). It is also noteworthy that a substantial number of psychopaths reported a combination of fantasy themes which for many (9 of 14) included a violence component. Psychopaths are characteristically glib and manipulative which supports the idea that psychopaths may disclose or exaggerate their deviancies in order to shock or get a reaction out of the interviewer or alternatively because they are manipulative and pathological liars they may be less likely to be forthcoming about their true thoughts and/or intentions. Though impulsive in nature, as mentioned above, research has demonstrated that psychopaths are also more premeditated and callous in their sexual offences than are non-psychopaths (Porter et al., 2000; Porter et al., 2003) suggesting that psychopaths might engage in more violent sexual fantasies because they use it as a way to plan out their offences while non-psychopaths do not.

Limitations and Benefits

Masturbation and pornography. The present study had anticipated being able to investigate the incidence of pornography use and masturbation as fundamental components of the offending process. Unfortunately, very few offenders' files included detailed information about these issues making it clear that few clinicians explore these issues or at least do not report them. The present study planned to explore the extent to which high risk offenders masturbated before, during, or after committing their sexual offences, in addition to investigating how often high risk offenders engage in masturbation. For example, if masturbation is a contributing factor in offence cycles and

offenders report frequent masturbation, this could have important ramifications regarding the offender's risk of re-offending upon release. Similarly, the present study hoped to provide insight into the hotly debated issue of pornography use and its promotion of sexual violence. Specifically, this thesis hoped to examine how often offenders used pornography, the type of media most commonly utilized (i.e., books, internet, movies), the type of pornography (i.e., adult, child, violent, etc.), whether masturbation accompanied its use, and whether the offender used pornography prior to the offences perpetrated. Although it was not possible to determine the underlying roles of pornography and masturbation among high risk offender's offence cycles, the present study was able to determine that masturbation and pornography use are for the most part absent from offenders' files. In order to better understand these offenders, clinicians and researchers need to examine more fully these types of motivating factors.

Limitations. This study had a few limitations that should be noted. Although the ISPIN database, from which offender information was extracted, contained a wealth of information pertinent to the understanding of sexual offence motivation, not all files contained the same information. For instance, because the files are made up of offender information from all across BC, each psychologist would not have used exactly the same assessment procedure for each offender being evaluated. Specifically, clinicians generally base their assessments and structure their interviews in accordance with their own theoretical backgrounds. Depending on the views of the clinician regarding sexual fantasy and the offending process, questions about offenders' fantasies may or may not have been asked. This is not to imply that any of the information contained within the database is inaccurate, but rather that there may be differences in the way questions were

asked and whether certain lines of questioning were included at all. In fact, considering the high reliance on standardized risk assessment measures and the importance of reliable information needed for criminal justice purposes, we are confident that the data within offenders' files were the most recent and accurate information available.

A second potential limitation of the present study is the lack of PCL-R data for the entire sample. It is customary in Canada that all violent offenders receive a psychopathy evaluation during their intake assessment thus it was unexpected that only 60% of the present sample had PCL-R assessments completed. It is possible that a selection bias within the Canadian criminal justice system results in offenders who appear more psychopathic be administered the PCL-R more readily thereby artificially increasing the samples mean psychopathy score. Moreover, the use of offenders' psychopathy scores in the categorization of risk using the ISPIN template (see Appendix A) must be considered. Offenders with increased psychopathy scores would have received a higher template score increasing their potential inclusion in the study. Indeed, the current sample likely obtained such a particularly high (and truncated range) of psychopathy scores, based on the specific scoring criteria of the template. However, a number of factors (including other risk scales) were considered in the template scoring of each offender. Further, as mentioned above, only 60% of the present sample had been scored for psychopathy.

A third limitation of the present study was an absence of low and moderate risk groups to compare prevalence rates of paraphilia diagnoses, deviant sexual fantasy, and psychopathy levels. Furthermore, comparisons to non-offender and other non-sex offender samples are imperative to understanding whether some of the trends reported

here are specific to high risk sexual offenders. Furthermore, the use of sexual convictions to determine offenders' onset of offending and offence categorization is not without problems especially given the repeated findings that a substantial percentage of sexual offences go un-reported (Gross, Winslett, Roberts, & Gohm, 2006; Koss & Oros, 1982; Statistics Canada, 1993; U.S. Department of Justice, 2002).

Finally, there are also potential limitations with regard to the measures used to identify deviant sexual fantasy and diagnose sexual paraphilias within the present sample. Self-report is often the only avenue clinicians have for determining whether an offender has deviant sexual interests and because disclosure of deviant interests are often associated with negative consequences (i.e., longer sentences, denial of parole, mandatory treatment) it is likely that some offenders may not be entirely truthful when questioned about their sexual interests. It may be worthwhile to use other less subjective measures such as a penile plethysmograph or a polygraph to confirm or dismiss offender information.

Benefits. Despite possible limitations, the present study had a number of very important strengths and benefits. First, this study was the first to systematically examine a heterogeneous sample of high risk sexual offenders for psychopathy, sexual paraphilias, and sexual fantasy. All three have been consistently demonstrated to be important motivating factors in the commission of sexual violence (Abel et al., 1988; Firestone et al., 1998; Hare, 1999; Marshall et al., 1991; Porter et al., 2000; Serin et al., 2001) and the present study has demonstrated the influence of each while also considering the inter-relationships of these variables exclusively within a sample of high risk sexual offenders.

Second, the information gathered in this research study was compiled through

detailed examination of a highly comprehensive database. This database is the primary information source that Crown draws from when applying for dangerous or long-term offender status. The present study was the first to statistically examine the wealth of reports and records within this ISPIN database and subsequently use that information to draw inferences about high risk sexual offenders, a group of offenders about whom researchers know very little.

The present study's most important contribution is the insight it provides into the motivations of high risk offenders. This study has provided much needed clarification into what motivates and, alternatively, what does not motivate high risk sexual offenders to perpetrate sexual violence. This group of high risk offenders had a greater tendency to be afflicted with sexual paraphilias, were more inclined to report engaging in sexual fantasy (deviant and non-deviant), and they rated substantially higher on the PCL-R than have other sex offender groups reported in the forensic literature (Brown & Forth, 1997; Langevin et al., 1998; Porter et al., 2000; Smallbone & Wortley, 2004). The majority of offenders had only one main paraphilia and had one primary fantasy theme suggesting a lack of multiple sexual deviancies.

In conclusion, the present study has outlined and detailed a number of unique and interesting findings with regard to offence motivations and offence characteristics among high risk sexual offenders. Further research investigating high risk offenders' offence motivations is needed to improve our understanding of these sexual predators and develop more effective primary prevention and intervention methodologies. Throughout North America there has been a dramatic rise in concern over the prevalence of high risk offenders resulting in the enactment of sexually violent predator laws in the United States

and dangerous and long-term offender legislation in Canada. Instead of locking these offenders away for indeterminate lengths of time, researchers and clinicians should take the opportunity to investigate what sets these offenders apart from the less violent and lower risk offenders and subsequently use that information to better protect society from the harm these offenders pose while on community release.

References

- Abel, G. G., Becker, J. V., Cunningham-Rathner, J., Mittelman, M., & Rouleau, J. L., (1988). Multiple paraphilic diagnoses among sex offenders. *Bulletin of the American Academy of Psychiatry & the Law*, *16*, 153-168.
- Abel, G. G., & Blanchard, E. B. (1974). The role of fantasy in the treatment of sexual deviation. *Archives of General Psychiatry*, *30*, 467- 475.
- Abel, G. G., & Rouleau, J. L. (1990). The nature and extent of sexual assault. In W.L. Marshall, D. R. Laws, & H. E. Barbaree (Eds.), *Handbook of sexual assault* (pp.9-21). New York: Plenum Press.
- American Psychiatric Association (2000). *Diagnostic and Statistical Manual of Mental Disorders*, (4th, text-revision). Washington, DC: American Psychiatric Association.
- Arndt, W. B., Foehl, J. C., & Good, E. F. (1985). Specific sexual fantasy themes: A multidimensional study. *Journal of Personality and Social Psychology*, *48*, 472-480.
- Barbaree, H.E., Seto, M.E., Serin, R.C., Amos, N.L., & Preston, D. (1994). Comparisons between sexual and nonsexual rapist subtypes: Sexual arousal to rape, offence precursors, and offence characteristics. *Criminal Justice and Behaviour*, *21*, 95-114.
- Becker, J. V., & Murphy, N. D. (1998). What we know and do not know about assessing and treating sex offenders. *Psychology, Public Policy, and Law*, *4*, 116-137.
- Boer, D. P., Wilson, R. J., Gauthier, C. M., & Hart, S. D. (1997). Assessing risk of sexual violence: Guidelines for clinical practice. In C. D. Webster & M. A. Jackson

- (Eds.), *Impulsivity: Theory, assessment, and treatment* (pp.326-342). New York, NY, US: Guilford Press.
- Brown, S. L., & Forth, A. E. (1997). Psychopathy and sexual assault: Static risk factors, emotional precursors, and rapist subtypes. *Journal of Consulting and Clinical Psychology, 65*, 848-857.
- Briken, P., Habermann, N., Kafka, M. P., Berner, W., & Hill, A. (2006). The paraphilia-related disorders: An investigation of the relevance of the concept in sexual murderers. *Journal of Forensic Science, 51*, 683-688.
- Bynum, T. (2001). *Recidivism of Sex Offenders*. Silver Springs, Maryland: Centre for Sex Offender Management.
- Canada. Solicitor General (2001). High risk offenders: A handbook for criminal justice professionals. ISBN-0-662-64950. Catalogue No. JS42-94/2000.
- Cohen, L. J., & Galynker, I. I. (2002). Clinical features of pedophilia and implications for treatment. *Journal of Psychiatric Practice, 8*, 276-289.
- Cooke, D. J. (2001). Psychopathy, sadism, and serial killing. In A. Raine & J. Sanmartin (Eds.), *Violence and Psychopathy* (pp. 123-137). New York: Kluwer Academic/Plenum Publishers.
- Crepault, C. & Couture, M. (1980). Men's erotic fantasies. *Archives of Sexual Behavior, 9*, 565-581.
- Curnoe, S., & Langevin, R. (2002). Personality and deviant sexual fantasies: An examination of the MMPIs of sex offenders. *Journal of Clinical Psychology, 58*, 803-815.

- Daleiden, E., Kaufman, K., Hilliker, D., & O'Neil, J. N. (1998). The sexual histories and fantasies of youthful male: A comparison of sexual offending, nonsexual offending, and nonoffending groups. *Sexual Abuse, 10*, 195-209.
- Deu, N., & Edelmann, R. (1997). The role of criminal fantasy in predatory and opportunist sex offending. *Journal of Interpersonal Violence, 12*, 18-29.
- Doren, D. M. (2002). *Evaluating sex offenders: A manual for civil commitment and beyond*. Thousand Oaks, CA, US: Sage Publications, Inc, 243 pp.
- Drieschner, K., & Lange, A. (1999). A review of cognitive factors in the etiology of rape: Theories, empirical studies, and implications. *Clinical Psychology Review, 19*, 57-77.
- Dunsieth, N. W., Nelson, E. B., Brusman-Lovins, L. A., Holcomb, J. L., Beckman, D., Welge, J. A., Roby, D., Taylor, B., Soutullo, C. A., & McElroy, S. L. (2004). Psychiatric and legal features of 113 men convicted of sexual offences. *Journal of Clinical Psychiatry, 65*, 293-300.
- Dutton, W. A., & Newlon, B. J. (1988). Early recollections and sexual fantasies of adolescent sex offenders. *Journal of Adlerian Theory, Research, & Practice, 44*, 85-94.
- English, K., Jones, L., Patrick, D., & Pasini-Hill, D. (2003). Sexual offender containment: Use of the postconviction polygraph. *Annals of the New York Academy of Science, 989*, 411-427.
- Firestone, P., Bradford, J. M., Greenberg, D. M., & Larose, M. R. (1998). Homicidal sex offenders: Psychological, phallometric, and diagnostic features. *Journal of the American Academy of Psychiatry and the Law, 26*, 537-552.

- Firestone, P., Bradford, J. M., Greenberg, D. M., & Larose, M. R., & Curry, S. (1998). Homicidal and nonhomicidal child molesters: Psychological, phallometric, and criminal features. *Sexual Abuse: Journal of Research and Treatment, 10*, 305-323.
- Firestone, P., Bradford, J. M., Greenberg, D. M., & Serran, G. A. (2000). The relationship of deviant sexual arousal and psychopathy in incest offenders, extrafamilial child molesters, and rapists. *Journal of the American Academy of Psychiatry and the Law, 28*, 303-308.
- Flight, J. L., & Forth, A. E. (2007). Instrumentally violent youths: The roles of psychopathic traits, empathy, and attachment. *Criminal Justice and Behavior, 34*, 739 – 751.
- Gee, D., Devilly, G., & Ward, T. (2004). The content of sexual fantasies for sexual offenders. *Sexual Abuse, 16*, 315-331.
- Gray, N. S., Watt, A., Hassan, S., MacCulloch, M. J. (2003). Behavioural indicators of sadistic sexual murder predict the presence of sadistic sexual fantasy in a normative sample. *Journal of Interpersonal Violence, 18*, 1018-1034.
- Gretton, H. M., Catchpole, R. E. H., & Hare, R. D. (2004). Psychopathy and offending from adolescence to adulthood: A 10 year follow-up. *Journal of Consulting and Clinical Psychology, 72*, 636-645.
- Gretton, H. M., McBride, M., Hare, R. D., O'Shaughnessy, R., & Kumka, G. (2001). Psychopathy and recidivism in adolescent sex offenders. *Criminal Justice and Behavior, 28*, 427-449.

- Hall, R. C. W., & Hall, R. C. W. (2007). A profile of pedophilia: Definition, characteristics of offenders, recidivism, treatment outcomes, and forensic issues. *Mayo Clinic Proceedings*, 82, 457-471.
- Hanson, R. K., & Bussiere, M.T. (1998). Predicting relapse: A meta-analysis of sexual offender recidivism studies. *Journal of Consulting and Clinical Psychology*, 66, 348-362.
- Hanson, K.R. & Morton-Bourgon, K.E. (2005). The characteristics of persistent sexual offenders: A meta-analysis of recidivism studies. *Journal of Consulting and Clinical Studies*, 73, 1154-1163.
- Hare, R. D. (1991). *The Hare Psychopathy checklist-Revised*. Toronto, Ontario: Multi-Health Systems.
- Hare, R. D. (1996). Psychopathy: A clinical construct whose time has come. *Criminal Justice and Behavior*, 23, 25-54.
- Hare, R. D. (1999). Psychopathy as a risk factor for violence. *Psychiatric Quarterly*, 70, 181-197.
- Hare, R. D. (2003). *The Hare Psychopathy Checklist-Revised* (2nd ed.). Toronto, ON: Multi-Health Systems.
- Hazelwood, R.R., & Warren, J.I. (1995). The relevance of fantasy in serial sexual crime investigation. In R. R. Hazelwood & A. W. Burgess (Eds.), *Practical aspects of rape investigation: A multidisciplinary approach* (2nd ed., pp.127-137). New York: CRC Press.

- Healey, J. (2006). The etiology of paraphilia: A dichotomous model. In E.W. Hickey (Ed.), *Sex crimes and paraphilia* (pp. 57-68). Upper Saddle River, NK: Pearson Prentice Hall.
- Heil, P., & Simons, D. (2008). Multiple paraphilias: Prevalence, etiology, assessment, and treatment. In D. R. Laws and W. T. O'Donohue (Eds.), *Sexual deviance: Theory, assessment, and treatment* (pp.527-556). The Guilford Press: New York.
- Hickey, E.W. (2006). In E.W. Hickey (Ed.), *Sex crimes and paraphilia*. Upper Saddle River, NK: Pearson Prentice Hall.
- Hill, A., Habermann, N., Berner, W., Briken, P. (2006). Sexual sadism and sadistic personality disorder in sexual homicide. *Journal of Personality Disorders, 20*, 671-684.
- Holt, S., Meloy, J. R., & Strack, S. (1999). Sadism and psychopathy in violent and sexually violent offenders. *Journal of the American Academy of Psychiatry and the Law, 27*, 23-32.
- Howells, K., Day, A., & Wright, S. (2004). Affect, emotions, & sexual offending. *Psychology, Crime, & Law, 10*, 179-195.
- Howitt, D. (2004). What is the role of fantasy in sex offending? *Criminal Behaviour and Mental Health, 14*, 182-188.
- Jackson, R. L., & Richards, H. J. (2007). Diagnostic and risk profiles among civilly committed sex offenders in Washington state. *International Journal of Offender Therapy and Comparative Criminology, 51*, 313-322.

- Jones, J. C., & Barlow, D. H. (1990). Self-reported frequency of sexual urges, fantasies, and masturbatory fantasies in heterosexual males and females. *Archives of Sexual Behavior, 19*, 269 – 279.
- Jimmy Ryce Involuntary Civil Commitment for Sexually Violent Predators' Treatment and Care Act, Florida Statute 394.912 (1998).
- Langevin, R., Lang, R.A., & Curnoe, S. (1998). The prevalence of sex offenders with deviant fantasies. *Journal of Interpersonal violence, 13*, 315-327.
- Langton, C. M., Barbaree, H. E., Harkins, L., & Peacock, E. J. (2006). Sex offenders' response to treatment and its association with recidivism as a function of psychopathy. *Sexual Abuse: Journal of Research and Treatment, 18*, 99-120.
- Laws, D. R., & Marshall, W. L. (1990). A conditioning theory of the etiology and maintenance of deviant sexual preference and behavior. In W. L. Marshall, D. R. Laws, & H. E. Barbaree (Eds.), *Handbook of Sexual Assault: Issues, Theories, and Treatment of the Offender* (pp. 209-229). New York: Plenum Press.
- Levenson, J. (2004). Sexual predator civil commitment: A comparison of selected and released offenders. *International Journal of Offender Therapy and Comparative Criminology, 48*, 638-648.
- Levenson, J., & Morin, J.W. (2006). Factors predicting selection of sexually violent predators for civil commitment. *International Journal of Offender Therapy and Comparative Criminology, 50*, 609-629.
- Looman, J. (1995). Sexual fantasies of child molesters. *Canadian Journal of Behavioural Science, 27*, 321-332.

- Looman, J. (2001). Sexual arousal in rapists and child molesters. *Dissertation Abstracts International: Section B: The Science and Engineering*, 61, 5571.
- Looman, J., Abracen, J., Serin, R., Marquis, P. (2005). Psychopathy, treatment change, and recidivism in high risk, high need sexual offenders. *Journal of Interpersonal Violence*, 20, 549-568.
- Looman, J., & Marshall, W. L. (2005). Sexual arousal in rapists. *Criminal Justice and Behaviour*, 32, 367-389.
- MacCulloch, M. J., Snowden, P. R., Wood, T. J. W., & Mills, H. E. (1983). Sadistic fantasy, sadistic behaviour, and offending. *British Journal of Psychiatry*, 143, 20-29.
- Marshall, W. L. (2007). Diagnostic issues, multiple paraphilias, and comorbid disorders in sexual offenders: Their incidence and treatment. *Aggression and Violent Behavior*, 12, 16-35.
- Marshall, W. L., Barbaree, H. E., & Eccles, A. (1991). Early onset and deviant sexuality in child molesters. *Journal of Interpersonal Violence*, 6, 323-336.
- Marshall, W. L., Laws, D. R., & Barbaree, H. E. (1990). Issues in sexual assault. In W. L. Marshall, D. R. Laws, & H. E. Barbaree (Eds.), *Handbook of sexual assault: Issues, theories, and treatment of the offender*. New York: Plenum Press.
- Meloy, R. J. (2000). The nature and dynamics of sexual homicide: An integrative review. *Aggression & Violent Behaviour*, 5, 1-22.
- Meloy, R. J. (2002). The polymorphously perverse psychopath: Understanding a strong empirical relationship. *Bulletin of the Menninger Clinic*, 66, 273-289.

- Morenz, B., & Becker, J. (1995). The treatment of youthful sexual offenders. *Applied and Preventive Psychology, 4*, 247-256.
- Murray, J. B. (2000). Psychological profile of pedophiles and child molesters. *Journal of Psychology, 134*, 211-224.
- Pithers, W. D., Beal, L. S., Armstrong, J., & Petty, J. (1989). Identification of risk factors through clinical interviews and analysis of records. In R. D. Laws (Ed.), *Relapse Prevention with Sex Offenders*, (pp.77-87). New York, NY, US: Guilford Press.
- Porter, S., Campbell, M., Woodworth, M., & Birt, A.R. (2002). A new psychological conceptualization of the sexual psychopath. In S.P. Shohov (Ed.), *Advances in Psychology Research: Vol. 15*. (pp. 51-65). Nova Science Publishers, Inc.
- Porter, S., Fairweather, D., Drugge, J., Herve, H., Birt, A., & Boer, D. (2000). Profiles of psychopathy in incarcerated sexual offenders. *Criminal Justice and Behaviour, 27*, 216-233.
- Porter, S., & Woodworth, M. (2007). "I'm sorry I did it...but he started it": A comparison of the official and self reported homicide descriptions of psychopaths and non-psychopaths. *Law and Human Behavior, 31*, 91-107.
- Porter, S., Woodworth, M., Earle, J., Drgge, J., & Boer, D. (2003). Characteristics of sexual homicides committed by psychopathic and non-psychopathic offenders. *Law and Human Behaviour, 27*, 459-469.
- Prentky, R. A., Burgess, A. W., Rokous, F., Lee, A., Hartman, C., Ressler, R., & Douglas, J. (1989). The presumptive role of fantasy in serial sexual homicide. *American Journal of Psychiatry, 146*, 887-891.

- Prentky, R. A., & Knight, R. A. (1991). Identifying critical dimensions for discriminating among rapists. *Journal of Consulting and Clinical Psychology, 59*, 643-661.
- Prentky, R. A., Knight, R.A., & Lee, A.F. (1997). Risk factors associated with recidivism among extrafamilial child molesters. *Journal of Consulting and Clinical Psychology, 65*, 141-149.
- Proulx, J., Pereaault, C., & Ouimet, M. (1999). Pathways in the offending process of extrafamilial sexual child molesters. *Sexual Abuse: Journal of Research and Treatment, 11*, 117-129.
- Quinsey, V. L., Chaplin, T. C., & Carrigan, W. F. (1979). Sexual preferences among incestuous and nonincestuous child molesters. *Behavior Therapy, 10*, 562-565.
- Quinsey, V. L., Harris, G. T., Rice, M. E., & Cormier, C. A. (1998). *Violent offenders: Appraising and managing risk*. Washington, DC: American Psychological Association.
- Quinsey, V.L., Harris, G. T., Rice, M. E., & Cormier, C. A. (2006). Sex Offenders. In V.L. Quinsey, G.T. Harris, M.E. Rice, & C. A. Cormier (Eds.), *Violent Offenders: Appraising and Managing Risk* (pp.131-151). Washington, DC: American Psychological Association.
- Quinsey, V. L., Lalumiere, M. L., Rice, M. E., & Harris, G. T. (1995). Predicting sexual offenses. In J. C. Campbell (Ed.), *Assessing Dangerousness: Violence by Sexual Offenders, Batterers, and Child Abusers* (pp.114-137). Thousand Oaks, CA, US: Sage Publications Inc.

- Raymond, N. C., Coleman, E., Ohlerking, F., Christenson, G. A., & Miner, M. (1999). Psychiatric co-morbidity in pedophilic sex offenders. *The American Journal of Psychiatry*, *156*, 786-788.
- Ressler, R. K., Burgess, A. W., Douglas, J. E., Hartman, C. R., & D'Agostino, R. B. (1986). Sexual killers and their victims. *Journal of Interpersonal Violence*, *1*, 288-308.
- Rice, M. E., & Harris, G. T. (1997). The treatment of mentally disordered offenders. *Psychology, Public Policy, and Law*, *31*, 126-183.
- Salter, A. C. (2003). *Predators: Pedophiles, rapists, and other sex offenders: Who they are, how they operate, and how we can protect ourselves and our children*. New York, NY, US: Basic Books.
- Schweitzer, R., & Dwyer, J. (2003). Sex crime recidivism: Evaluation of a sexual offender treatment program. *Journal of Interpersonal Violence*, *18*, 1292-1310.
- Serin, R. C., Mailloux, D. L., & Malcolm, P. B. (2001). Psychopathy, deviant sexual arousal, and recidivism among sexual offenders. *Journal of Interpersonal Violence*, *16*, 234-246).
- Seto, M. C. & Barbaree, H. E. (1999). Psychopathy, treatment behavior, and sex offender recidivism. *Journal of Interpersonal Violence*, *14*, 1235-1248.
- Sheldon, K., & Howitt, D. (2008). Sexual fantasy in paedophile offenders: Can any model explain satisfactorily new findings from a study of internet and contact sexual offenders? *Legal and Criminological Psychology*, *13*, 137-158.

- Smallbone, S.W., & Wortley, R.K. (2004). Criminal diversity and paraphilic interests among adult males convicted of sexual offences against children. *International Journal of Offender Therapy and Criminology*, 48, 175-188.
- Statistics Canada (1998). A one day snapshot of inmates in Canada's adult correctional facilities. [Catalogue # 85-002-XIE no. 8]
- Statistics Canada (2004). Crime Statistics in Canada, 2004. *Juristat*, 25, no.5. [Catalogue # 85-002-XIE].
- Statistics Canada (2006). Crime Statistics in Canada, 2006. *Juristat*, 27, no.5. [Catalogue # 85-002-XIE].
- Webster, C. D., Harris, G. T., Rice, M. E., Cormier, C., & Quinsey, V. L. (1994). The violence prediction scheme: Assessing dangerousness in high risk men. Toronto, ON, Canada: University of Toronto Centre of Criminology, (92 pp.)
- Wilcox, D., Sosnowski, D., Warberg, B., & Beech, A. (2005). Sexual history disclosure using the polygraph in a sample of British sex offenders in treatment. *Polygraph*, 34, 171-181.
- Woodworth, M., & Porter, S. (2002). In cold blood: Characteristics of criminal homicides as a function of psychopathy. *Journal of Abnormal Psychology*, 111, 436-445.
- Yates, P. M., Hucker, S. J., & Kingston, D. A. (2008). Sexual sadism: Psychopathology and theory. In D. R. Laws and W. T. O'Donohue (Eds.), *Sexual deviance: Theory, assessment, & treatment*, (pp. 213-230). The Guilford Press: New York

Appendix A: ISPIN Template

Tombstone Data:

- Name
- Date of Birth

Actuarial Risk Assessment Measures:

- Violence Risk Appraisal Guide
- Sexual Offender Risk Appraisal Guide
- Psychopathy Checklist Revised

Deviant Sexual Arousal:

- Sexual Paraphilias
- Deviant sexual arousal

Criminal History Variables

- Number of victims
- History of violence

Note: The actual ISPIN template could not be published for legal reasons.

Appendix B: Coding Scheme

Offender's identification (ID) number: (ID)

Date of birth: (DOB) DD/MM/YY

ISPIN Rating: (ISPIN)

Age (Age)

~ Age at time of coding

Marital status: (Marital)

1 = Never married

2 = Married once

3 = Married more than once

4 = Currently divorced or separated: married once

5 = Currently divorced or separated: married more than once

-1 = Not specified

~this includes any marriages (including common-law) in the offender's lifetime.

Was the offender a victim of child sexual abuse: (sexual_abuse)

1 = Yes

2 = No

-1 = Not specified

~ Information pertaining to child sexual abuse will be obtained from the offenders Psychological files. It is unknown whether the information was solely based on self-report, substantiated records, or collateral reports.

If yes, how many different people have reportedly sexually abused the offender

1 = One

2 = Two or more

-1 = Not specified

99 = Not applicable

If yes, what was his/her relationship to the offender: (off_relate_sex1)

1 = Male stranger

2 = Female stranger

3 = Family member (immediate family, grandparents, uncles, aunts, cousins, etc)

4 = Friend (friend of family)

-1 = Not specified

99 = Not applicable (Code Not Applicable if the offender was not a victim of child abuse)

If yes, what was his/her relationship to the offender: (off_relate_sex2)

- 1 = Male stranger
- 2 = Female stranger
- 3 = Family member (immediate family, grandparents, uncles, aunts, cousins, etc)
- 4 = Friend (friend of family)
- 1 = Not specified
- 99 = Not applicable (Code Not Applicable if the offender was not a victim of child abuse)

Was the offender a victim of child physical abuse: (physical_abuse)

- 1 = Yes
- 2 = No
- 1 = Not specified

~ Information pertaining to child physical abuse will be obtained from the offenders Psychological files. It is unknown whether the information was solely based on self-report, substantiated records, or collateral reports.

If yes, what was his/her relationship to the abuser: (off_relate_phy1)

- 1 = Male stranger
- 2 = Female stranger
- 3 = Family member (immediate family, grandparents, uncles, aunts, cousins, etc)
- 4 = Friend (friend of family)
- 1 = Not available
- 99 = Not applicable (Code Not Applicable if the offender was not a victim of child abuse)

If yes, what was his/her relationship to the abuser: (off_relate_phy2)

- 1 = Male stranger
- 2 = Female stranger
- 3 = Family member (immediate family, grandparents, uncles, aunts, cousins, etc)
- 4 = Friend (friend of family)
- 1 = Not available
- 99 = Not applicable (Code Not Applicable if the offender was not a victim of child abuse)

Age of first nonsexual offence: (Age_gen)

~If the offender has not committed any nonsexual offences code as Not applicable

Did the offender commit any sexual offences prior to 18 years of age: (juv_sex)

- 1 = Yes
- 2 = No
- 3 = Not specified

If yes, age of first juvenile sexual offence: (Age_j_sex)

~ If no, code 99 – ‘Not Applicable’

Age of first adult sexual offence: (Age_a_sex)

~ If the offender has not committed any sexual offences code as Not applicable

Total number of sexual convictions of the offender: (tot_sex)

~ an indication of the total number of sexual offences the offender has committed. Include all convictions BUT NOT charges. Do not include any that have been stayed, waived, or dismissed.

Total number of nonsexual convictions of the offender: (tot_nonsex)

~ an indication of the total number of nonsexual offences the offender has committed. Include all convictions BUT NOT charges. Do not include any that have been stayed, waived, or dismissed.

Number of victims: (num_vic)

~ The number of victims from the offender's index (i.e. most recent) sexual offence conviction.

Total number of victims: (tot_vic)

~ The total number of victims from all of the offender's sexual offence convictions.

General Age of victims: (gen_age)

- 1 = Child (0 – 14 yrs)
- 2 = Adolescent (15 – 18 yrs)
- 3 = Adult (19 +)
- 4 = Child & Adolescent (0-18 yrs)
- 5 = Child & Adult
- 6 = Adolescent & Adult
- 7 = All age groups
- 1 = Not specified
- 99 = Not applicable

~ refers to the overall age range of victims in the offenders entire sexual offence history

Preferred Age of Victim: (vic_age)

- 1 = Child (0 - 14)
- 2 = Adolescent (15 – 18)
- 3 = Adult (19 +)
- 4 = Child & Adolescent (0-18 yrs)
- 5 = No preference
- 1 = Not specified

~ refers to the offenders' preference for victim age (e.g. preference for children) although they may have had other victims. If no preference is specified code "Not specified". This is for the offenders' entire sexual offence history.

Gender of victim(s): vic_sex

- 1 = Female
- 2 = Male
- 3 = Male & Female
- 1 = Not specified

~ coding of the victims gender is for all victims within the offenders' sexual offence history. If they have only ever offended against females code 1, if they have coded against both males and females code 3.

Gender of preferred victim(s): (vic_sex)

- 1 = Female
- 2 = Male
- 3 = Male and Female
- 1 = Not specified

~ The gender of the offenders preferred victims. Only code the preferred gender if it is specified, if no gender is specified, code Not specified.

Relationship of current victim to offender: (vic_relations_index)

- 1 = Male stranger
- 2 = Female stranger
- 3 = Involved in a common-law/marriage relationship/serious girlfriend (or has split up from one of the aforementioned)
- 4 = Family member (immediate family, uncles, aunts, cousins, etc)
- 5 = Friend (friend of family, or friend's child)
- 6 = Co-worker/business partner/acquaintance
- 1 = Not specified

~ Current victim refers to the victim(s) from the offender's index offence (i.e. most recent offence).

Relationship of previous victim(s) to offender: (past_vic_relations1)

- 1 = Male stranger
- 2 = Female stranger
- 3 = Involved in a common-law/marriage relationship/serious girlfriend (or has split up from one of the aforementioned)
- 4 = Family member (immediate family, uncles, aunts, cousins, etc)
- 5 = Friend (friend of family, or friend's child)
- 6 = Co-worker/business partner/casual acquaintance
- 1 = Not specified

~ The relationship of the next most recent victim to the offender.

Relationship of previous victim(s) to offender: (past_vic_relations2)

- 1 = Male stranger
- 2 = Female stranger
- 3 = Involved in a common-law/marriage relationship/serious girlfriend (or has split up from one of the aforementioned)
- 4 = Family member (immediate family, uncles, aunts, cousins, etc)
- 5 = Friend (friend of family, or friend's child)
- 6 = Co-worker/business partner/casual acquaintance
- 1 = Not specified

~ The relationship of the next most recent victim to the offender.

Relationship of previous victim(s) to offender: (past_vic_relations3)

- 1 = Male stranger
- 2 = Female stranger
- 3 = Involved in a common-law/marriage relationship/serious girlfriend (or has split up from one of the aforementioned)
- 4 = Family member (immediate family, uncles, aunts, cousins, etc)
- 5 = Friend (friend of family, or friend's child)
- 6 = Co-worker/business partner/casual acquaintance
- 1 = Not specified

~ The relationship of the next most recent victim to the offender.

Offence Types

Offences: (prev_off)

- 1 = Sexual
- 2 = Nonsexual
- 3 = Both

~ What types of offences, the offender has engaged in. If the offender has only been convicted of sexual offences code as 1, if they have committed both sexual and nonsexual offences code as 3.

Category of Sexual Offender: (sex_off_cat)

- 1 = Exclusive child molester
- 2 = Exclusive rapist
- 3 = Rapist/Molester
- 4 = Mixed offenders
- 5 = Non-physical and other offenders
- 99 = Not applicable

~ If the offender had committed both child molestation and rape or attempted rape (of a person 14 years or greater) code as rapist/molester. If the offender committed rape or child molestation and any other type of sexual offence (including non-physical and other) code as mixed offender. Offenders who only committed non-physical sexual offences or other offences code as Non-physical and other.

Type of Sexual Offence Committed: (sex_off_index)

- 1 = Intra-familial coercive child molestation
- 2 = Intra-familial forcible child molestation
- 3 = Extra-familial coercive child molestation
- 4 = Extra-familial forcible child molestation
- 5 = Rape & Attempted Rape
- 6 = Sexual homicide (both adult and child victims)
- 7 = Non-physical and other sexual offences (peeping tom, flashing, etc).
- 2 = No description available
- 99 = Not applicable

- ~ IF and EF child molesters refer to offenders that have sexually assaulted (including penetration) male and female children 14 years and younger.
- ~Coercive molestation refers to the seduction or encouragement of the minor to engage in the sexual behaviour.
- ~Forcible molestation refers to the offender forcing the child to engage in the behaviour through physical means (e.g., holding them down, physical assault, use of weapon, drugging or intoxicating them until unconscious)
- ~Rapists refer to offenders that have sexually assaulted males and females aged, 15 years and older.

Previous Sexual Offence Type: (pst_sex_off1)

- 1 = Intra-familial coercive child molestation
- 2 = Intra-familial forcible child molestation
- 3 = Extra-familial coercive child molestation
- 4 = Extra-familial forcible child molestation
- 5 = Rape & Attempted Rape
- 6 = Sexual homicide (both adult and child victims)
- 7 = Non-physical and other sexual offences (peeping tom, flashing, etc).
- 2 = No description available
- 99 = Not applicable

- ~ IF and EF child molesters refer to offenders that have sexually assaulted (including penetration) male and female children 14 years and younger.
- ~Coercive molestation refers to the seduction or encouragement of the minor to engage in the sexual behaviour.
- ~Forcible molestation refers to the offender forcing the child to engage in the behaviour through physical means (e.g., holding them down, physical assault, use of weapon, drugging or intoxicating them until unconscious)
- ~Rapists refer to offenders that have sexually assaulted males and females aged, 15 years and older.

Previous Sexual Offence Type: (pst_sex_off2)

- 1 = Intra-familial coercive child molestation

- 2 = Intra-familial forcible child molestation
- 3 = Extra-familial coercive child molestation
- 4 = Extra-familial forcible child molestation
- 5 = Rape & Attempted Rape
- 6 = Sexual homicide (both adult and child victims)
- 7 = Non-physical and other sexual offences (peeping tom, flashing, etc).
- 2 = No description available
- 99 = Not applicable

- ~ IF and EF child molesters refer to offenders that have sexually assaulted (including penetration) male and female children 14 years and younger.
- ~Coercive molestation refers to the seduction or encouragement of the minor to engage in the sexual behaviour.
- ~Forcible molestation refers to the offender forcing the child to engage in the behaviour through physical means (e.g., holding them down, physical assault, use of weapon, drugging or intoxicating them until unconscious)
- ~Rapists refer to offenders that have sexually assaulted males and females aged, 15 years and older.

Previous Sexual Offence Type: (pst_sex_off3)

- 1 = Intra-familial coercive child molestation
- 2 = Intra-familial forcible child molestation
- 3 = Extra-familial coercive child molestation
- 4 = Extra-familial forcible child molestation
- 5 = Rape & Attempted Rape
- 6 = Sexual homicide (both adult and child victims)
- 7 = Non-physical and other sexual offences (peeping tom, flashing, etc).
- 2 = No description available
- 99 = Not applicable

- ~ IF and EF child molesters refer to offenders that have sexually assaulted (including penetration) male and female children 14 years and younger.
- ~Coercive molestation refers to the seduction or encouragement of the minor to engage in the sexual behaviour.
- ~Forcible molestation refers to the offender forcing the child to engage in the behaviour through physical means (e.g., holding them down, physical assault, use of weapon, drugging or intoxicating them until unconscious)
- ~Rapists refer to offenders that have sexually assaulted males and females aged, 15 years and older.

Has the offender committed intra-familial coercive child molestation (IF_c_molest)

- 1 = Yes
- 2 = No
- 1 = Not specified
- 99 = Not applicable

Has the offender committed intra-familial forcible child molestation (IF_f_molest)

- 1 = Yes
- 2 = No
- 1 = Not specified
- 99 = Not applicable

Has the offender committed extra-familial coercive child molestation (EF_c_molest)

- 1 = Yes
- 2 = No
- 1 = Not specified
- 99 = Not applicable

Has the offender committed extra-familial forcible child molestation (EF_f_molest)

- 1 = Yes
- 2 = No
- 1 = Not specified
- 99 = Not applicable

Has the offender ever committed rape or attempted rape (Rape1)

- 1 = Yes
- 2 = No
- 1 = Not specified
- 99 = Not applicable

Has the offender ever committed a sexual homicide either an adult or child victim (Sex_hom)

- 1 = Yes
- 2 = No
- 1 = Not specified
- 99 = Not applicable

Has the offender ever committed a non-physical or other sexual offence (Non_physical)

- 1 = Yes
- 2 = No
- 1 = Not specified
- 99 = Not applicable

Number of intra-familial coercive child molestations (Num_IFc_molest)

Number of intra-familial forcible child molestation convictions (Num_IFf_molest)

Number of extra-familial coercive child molestation convictions (Num_EFc_molest)

Number of extra-familial forcible child molestation convictions (Num_EFf_molest)

Number of rape or attempted rape convictions (Num_rape)

Number of sexual homicide convictions (Num_sexhom)

Number of non-physical or other sexual offence convictions (Num_nonphys)

Types of nonsexual offences committed (Gen_off1-5)

1 = Property crime (e.g., theft, break and enter)

2 = Physical assault (e.g., interpersonal aggression excluding murder and attempted murder)

3 = Robbery

4 = Arson

5 = Possession and distribution of illegal substances

6 = Murder and attempted murder

7 = Other

99 = Not applicable

'code not applicable if the offender has not committed any nonsexual offences'

Has the offender been convicted of property crimes (Property)

1 = Yes

2 = No

99 = Not applicable

Has the offender been convicted of assault (Assault)

1 = Yes

2 = No

99 = Not applicable

Has the offender been convicted of robbery (Robbery)

1 = Yes

2 = No

99 = Not applicable

Has the offender been convicted of arson (Arson)

1 = Yes

2 = No

99 = Not applicable

Has the offender been convicted of possession of illegal substances (Poss_subs)

1 = Yes

2 = No

99 = Not applicable

Has the offender been convicted of murder (Murder)

1 = Yes

2 = No

99 = Not applicable

Has the offender been convicted of other crimes (Other)

- 1 = Yes
- 2 = No
- 99 = Not applicable

~ Other includes any convictions that do not fit into the above 6 categories. E.g. Drunk in public, animal cruelty, breach of conditions, etc.

Paraphilias

Psychological reports were examined to determine whether the offender's had been diagnosed with any sexual paraphilias and/or whether the offenders were identified, but not diagnosed, as having a possible paraphilia.

Have any paraphilias been identified in the offender: (para_ident)

- 1 = Yes
- 2 = No
- 3 = Not specified

Does the offender have an official paraphilia diagnosis: (official_para)

- 1 = Yes
- 2 = No
- 3 = Not specified

Number of paraphilias identified/diagnosed: (num_par)

- 99 = Not applicable

~ If no paraphilias are identified or diagnosed, then code 'Not Applicable'

Does the offender have multiple sexual paraphilias: (Multiple_para)

- 1 = Yes
- 2 = No
- 99 = Not applicable

Exhibitionism: (Exhibition)

- 1 = Yes
- 2 = No
- 99 = Not applicable

Voyeurism: (Voyeur)

- 1 = Yes
- 2 = No
- 99 = Not applicable

Pedophilia: (Pedophile)

- 1 = Yes

2 = No
99 = Not applicable

Masochism: (Maso)

1 = Yes
2 = No
99 = Not applicable

Sadism: (Sadism)

1 = Yes
2 = No
99 = Not applicable

Sadomasochism: (Sado_maso)

1 = Yes
2 = No
99 = Not applicable

Frotteurism: (Frotteur)

1 = Yes
2 = No
99 = Not applicable

Fetishism: (Fetish)

1 = Yes
2 = No
99 = Not applicable

Paraphilia NOS: (Paraphilia_nos)

1 = Yes
2 = No
99 = Not applicable

~ Paraphilia Not Otherwise Specified (NOS) refers to paraphilias that do not fit into any of the other categories. Some examples are: Zoophilia, Necrophilia, and Scatologia.

~ For all paraphilias, Code 'Not Applicable' if no paraphilia diagnoses are given

Other Paraphilias: (Other_para)

~ Any paraphilias that were specified within the NOS category. If none were specified leave blank

Paraphilia Category: (Para_cat)

1 = Non-violent physical paraphilia
2 = Sadistic Paraphilia
3 = Paraphilia NOS
99 = Not applicable

~Offenders diagnosed with any non-violent paraphilia are grouped under non-violent. If an offender has been identified and/or diagnosed with both a non-violent and a violent paraphilia, code as sadistic paraphilia. If an offender was diagnosed with only paraphilia NOS code as such, however, if the offender was diagnosed with paraphilia NOS in combination with another paraphilia code as the other dominant paraphilia. **What is the source of the paraphilia diagnosis: (source_diag1)**

- 1 = Self-report
- 2 = Penile plethysmograph
- 3 = Collateral reports
- 4 = Other
- 5 = Psychologist/psychiatrist
- 6 = Behaviour
- 6 = Not specified
- 99 = Not applicable

What is the source of the paraphilia diagnosis: (source_diag2)

- 1 = Self-report
- 2 = Penile plethysmograph
- 3 = Collateral reports
- 4 = Other
- 5 = Psychologist/psychiatrist
- 6 = Behaviour
- 6 = Not specified
- 99 = Not applicable

What is the source of the paraphilia identification: (source_ident)

- 1 = Self-report
- 2 = Penile plethysmograph
- 3 = Collateral reports
- 4 = Other
- 5 = Psychologist/psychiatrist
- 6 = Behaviour
- 6 = Not specified
- 99 = Not applicable

Paraphilias identified but not diagnosed: (Para_ident2)

~ list any paraphilias that have been identified but not diagnosed. If none, leave blank.

Sexual Fantasy

~ In reviewing the offender's psychological reports, if there was mention of sexual fantasies information was coded for what types of sexual fantasies the offender utilized. If there was no information about sexual fantasy for an offender the information was coded as "not specified". If the file stated specifically that the offender does not engage in sexual fantasy, the information was coded as a "no".

Does the offender have any sexual fantasies (fantasy)

- 1 = yes
- 2 = no
- 3 = not specified

Does the offender have any deviant sexual fantasies (deviant)

- 1 = yes
- 2 = no
- 3 = not specified

~ If the offender engaged in any fantasies relating to children, violence, power, or rape, this question was coded as a yes. If the information only relates to consensual fantasies, code “no”.

Do his/her fantasies involve consensual adult relations: (cons_adult)

- 1 = yes
- 2 = no
- 3 = not specified
- 99 = not applicable

~consensual relations were coded if the offender records indicated the offender liked to fantasize about consensual sex involving adult men or women.

Do his/her fantasies involve themes about rape, violence, or power: (violent)

- 1 = yes
- 2 = no
- 3 = not specified
- 99 = not applicable

~ Violent fantasies were coded if the offender’s records indicated themes of non-consensual bondage, variations of “making them do what I want”, tying them up, humiliating the victim, feelings of power or control, forced vaginal intercourse and/or forced anal intercourse, or references to hurting the victims (including biting, pinching, slapping, punching, kicking, etc), stabbing, torturing, and/or killing the victim.

Do his/her fantasies involve themes about children: (children)

- 1 = yes
- 2 = no
- 3 = not specified
- 99 = not applicable

**Sexual Fantasy and/or Porn prior to the most recent sexual offence:
(prior_porn_fantasy)**

- 1 = yes
- 2 = no
- 3 = not specified

~ Whether the offender admitted to fantasizing and/or watching porn prior to committing the most recent sexual offence.

~ If an offenders crime cycle specifically involves fantasizing prior to committing a sexual offence a “yes” would be coded.

Sadistic violence: (sadis)

~Often gratuitous and excessive violence is committed for the sole of purpose of giving pleasure (often sexual) to the offender. This type of violence (which often involves the offender taking pleasure in the unnecessary suffering of their victims) is most commonly referred to as sadistic violence.

1 = No evidence of sadistic violence (e.g. although the victim has been stabbed an unnecessary number of times, it is completely unclear what the offender’s motivations for this behaviour may have been).

2 = Some evidence of sadistic violence: most acts of body mutilation or deviant, violent sexual activity are conducted primarily for the sadistic pleasure of the offender. However, without self-report or actual file information that confirms this assumption, we can not be certain that this behaviour was necessarily for sadistic motivations. Therefore, this type of situation should be coded as “some evidence” of sadistic violence.

3 = Concrete evidence of sadistic violence (e.g. offender reports taking pleasure in the excessive suffering of their victim).

Pornography

Does the offender watch Pornography: (porn)

1 = Yes

2 = No

3 = Not available

If yes, what type of pornography do they watch: (type_porn)

1 = Deviant

2 = Sadistic

3 = Violent

4 = Child Porn

5 = Age appropriate heterosexual porn

6 = Age appropriate homosexual porn

7 = Other

8 = Not specified

99 = Not Applicable

~ If the offender does not watch porn, code 99 – ‘Not Applicable’

Number of days the offender watches porn per week : (days_porn)

- 1 = one
- 2 = two
- 3 = three
- 4 = four
- 5 = five
- 6 = six
- 7 = seven
- 8 = not specified
- 99 = Not Applicable

Number of times the offender watches porn per week : (num_porn)

- 1 = 1 – 2 times
- 2 = 3 – 4 times
- 3 = 5 – 6 times
- 4 = 7 or more times
- 5 = not specified
- 99 = Not Applicable

Does the offender masturbate while watching porn: (mast_porn)

- 1 = every time
 - 2 = sometimes
 - 3 = never
 - 4 = not specified
 - 99 = Not Applicable
- ~ If the offender does not watch porn, code 99

Did the offender masturbate before or after the offences: (off_mast)

- 1 = Yes
- 2 = Not specified or offender said no

Number of times per week the offender masturbates: (masterbate)

- 1 = 0
- 2 = 1-2 times
- 3 = 3-5 times
- 5 = 6-7 times
- 5 = 8-10 times
- 6 = >10 times
- 7 = not specified

PCL-R Score total: (PCL_tot)

~ If no PCL was scored code Not specified

PCL-R F1 score: (PCL_F1)

~If Factor scores are not given or PCL was not administered code Not specified

PCL-R F2 score: (PCL_F2)

~If Factor scores are not given or PCL was not administered code Not specified

PCL-R Category: (PCL_cat)

- 1 = Low (1-19 on the PCL-R)
- 2 = Moderate (20-29 on the PCL-R)
- 3 = High (30-40 on the PCL-R)

Does the offender have an Axis 2 DSM-IV diagnosis: (Diagnosis)

- 1 = Yes
- 2 = No
- 3 = Not available

~ Has the offender been diagnosed with a personality disorder or any other type of disorder?

What is the DSM Axis 2 diagnosis: (DSM_diag1)

- 1 = Borderline Personality Disorder
- 2 = Narcissistic Personality Disorder
- 3 = Antisocial Personality Disorder/Conduct disorder (juvenile)
- 4 = Histrionic Personality Disorder
- 5 = Other
- 99 = Not applicable

What is the DSM Axis 2 diagnosis: (DSM_diag2)

- 1 = Borderline Personality Disorder
- 2 = Narcissistic Personality Disorder
- 3 = Antisocial Personality Disorder/Conduct disorder (juvenile)
- 4 = Histrionic Personality Disorder
- 5 = Other
- 99 = Not applicable

~ Because we will be primarily looking at offenders with higher ratings of psychopathy, I've included those disorders primarily seen in psychopaths. Specifically personality disorders within the dramatic/impulsive cluster.

Other refers to any other disorders identified.

~ If there is no disorder diagnosis, code 99 'Not Applicable'

Other diagnosis: (Other_diag)

~ List other diagnoses present that are not encompassed in the above list. If need be, the above list will be expanded.

Weapons

Was a weapon used in previous nonsexual offences: (Weap_nonsex)

- 1 = Yes
- 2 = No
- 3 = Not available

If yes, what type of weapon was used: (Weap_Typ_nonsex)

- 1 = Gun
- 2 = Knife
- 3 = Bare hands (hitting, kicking, biting, scratching, throwing, pushing)
- 4 = An object used for the purpose of bludgeoning, stabbing, strangling, or restraining (other than a knife) that has/could be conceived of as a weapon.
- 5 = An object used for the purpose of bludgeoning, stabbing, strangling, or restraining the victim that has not traditionally been thought of as a weapon (e.g., broken glass, rock, piece of wood).
- 6 = Combination of Gun and/or Knife and/or bare hands and/or any type of object
- 7 = Not available
- 99 = Not Applicable

~If no weapon was used or is unavailable, code 99 'Not applicable'

Was a weapon used in previous sexual offences: (Weap_sexp)

- 1 = Yes
- 2 = No
- 3 = Not available

If yes, what type of weapon was used: (Weap_Typ_sexp)

- 1 = Gun
- 2 = Knife
- 3 = Bare hands (hitting, kicking, biting, scratching, throwing, pushing)
- 4 = An object used for the purpose of bludgeoning, stabbing, strangling, or restraining (other than a knife) that has/could be conceived of as a weapon.
- 5 = An object used for the purpose of bludgeoning, stabbing, strangling, or restraining the victim that has not traditionally been thought of as a weapon (e.g., broken glass, rock, piece of wood).
- 6 = Combination of Gun and/or Knife and/or bare hands and/or any type of object
- 7 = Not available
- 99 = Not Applicable

~If no weapon was used or is unavailable, code 99 'Not applicable'

Was a weapon used in the current sexual offence: (Weap_sex)

- 1 = Yes
- 2 = No
- 3 = Not available

If yes, what type of weapon was used: (Weap_Typ_sex)

- 1 = Gun
- 2 = Knife
- 3 = Bare hands (hitting, kicking, biting, scratching, throwing, pushing)
- 4 = An object used for the purpose of bludgeoning, stabbing, strangling, or restraining (other than a knife) that has/could be conceived of as a weapon.
- 5 = An object used for the purpose of bludgeoning, stabbing, strangling, or restraining the victim that has not traditionally been thought of as a weapon (e.g., broken glass, rock, piece of wood).
- 6 = Combination of Gun and/or Knife and/or bare hands and/or any type of object
- 7 = Not available
- 99 = Not Applicable

~If no weapon was used or is unavailable, code 99 'Not applicable'

~ **Current refers to the offender's most recent sexual offence.**

Drugs and Alcohol

Does the offender use drugs: (drugs)

- 1 = Yes
- 2 = No
- 3 = Not specified

If yes, was the offender under the influence of drugs at the time of the most recent offence: (drugs_offence)

- 1 = No drug involvement.
- 2 = At the time of the offence, the offender was under the influence of 'minor' drugs such as marijuana, hashish, or prescription drugs such as Tylenol 3.
- 3 = At the time of the offence, the offender was under the influence of 'major drugs' such as mushrooms, LSD, crystal meth, cocaine, heroin or prescription drugs such as Demerol or morphine.
- 4 = both minor and major drugs.
- 5 = Not specified
- 99 = Not Applicable

Not specified refers to the file not having information pertaining to whether the offender was under the influence of drugs. If the offender does not use drugs, code 99 'Not Applicable'

Does the offender use alcohol: (alcohol)

- 1 = Yes
- 2 = No
- 3 = Not specified

If yes, was the offender under the influence of alcohol at the time of the most recent sexual offence: (alcohol_offence)

- 1 = No alcohol.
- 2 = At the time of the offence, offender was under the influence of a small amount of alcohol (1-2 beers or 1-2 hard alcoholic drinks or 1-2 glasses of wine).
- 3 = At the time of the offence, offender was under the influence of a moderate amount of alcohol (3-6 beers or 3-4 hard alcoholic drinks or 3-5 glasses of wine).
- 4 = At the time of the offence, offender was under the influence of an extreme amount of alcohol (over 6 beers and/or 5-6 hard alcoholic drinks and/or more than 5 glasses of wine). A 3 would also be appropriate in cases where prior to the offence the offenders was reported to have been "binge" drinking or "drinking for the entire day and/or night."
- 5 = Alcohol was determined to have played a role in the homicide, even though the offender was not intoxicated during the commission of the offence.
- 6 = Offender was under the influence of an undetermined amount of alcohol at the time of the offence.
- 1 = Not specified

99 = Not Applicable

Not specified refers to the file not having information pertaining to whether the offender was under the influence of alcohol.

If the offender does not use alcohol, code 99 'Not Applicable'

Who was involved in the index sexual offence (num_offend_index)

- 1 = Just the offender
- 2 = Offender and Co-offender
- 3 = Not specified
- 99 = Not applicable

Who was involved in any of the earlier sexual offences (num_offend)

- 1 = Just the offender
- 2 = Offender and Co-offender
- 3 = Not specified
- 99 = Not applicable

Appendix C: Examples of Offence Categorization

Mixed Offenders

- Commit a variety of sexual offences that do not sufficiently fit into just one offence type.
- e.g., an offender who assaults children but also will flash his genitals to both children and adults.
- e.g., an offender who has raped adults, assaulted children, and has committed non-contact offences such as peeping and flashing.

Non-physical/Other Sexual Offenders

- An offender who only commits non-contact offences or the offences do not fit into any of the other categories.
- Non-physical offences: peeping, flashing, watching or subscribing to child pornography, solicitation of underage prostitution, public masturbation
- Other offences: grabbing at a woman's breasts or buttocks without consent.