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Associated Factors of Sex Offenders

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Abstract

Objective: The aim of this study is to determine the risk factors for sex offenders. Methods: This is a cross sectional study comparing two groups using a combination of survey methodology and personal interviews. The data was collected over a period of six months from January 2004 until June 2004. All convicted sex offenders in respective prisons who are available until July 2004 was included in the study. A control group of non-sex offenders were chosen from the same prisons. The non-sex offenders were matched to the sex offenders group in term of the length of their sentence. Data was gathered using the self generated questionnaire, Structured Clinical Interview for DSM III-R, SCID and Personality Diagnostic Questionnaires. Results: Religion, education level, history of physical abuse and no history of substance abuse and dependence towards sex offenders. Conclusion: Offenders who only committed sexual offences have some characteristics which differ from other sex offenders who committed non sexual offences as well. Low or no formal education, had history of physical abuse were associated with sex offenders. No history of substance abuse and dependence were associated with no sex offenders.

Keywords: Risk Factors, Sex Offenders

Introduction

Problems of sexual abuse and assault are recognized in almost all countries in the world. It has been reported with different rate of incidence and prevalence depending on the culture of the country. Finkelhor et al\textsuperscript{1} reported that the rate of sexual abuse range from 10% to 25%. Ferguson et al\textsuperscript{2} reported 17.3% of sexual in their study and Frank\textsuperscript{3} reported that reasonable estimate of actual rape is 2 million in one year. Again, there are many factors contribute to the rate of reporting. One of the main factors is social taboo. Bringing the offenders to justice is less important than face saving. Therefore people would rather keep the injustice to themselves and suffer than bringing the perpetrators to justice.
Why is this issue so important to look into? To answer this question, we should look into the impact of it to the community. Once a sexual abuse or assault occurred, the impact will be on the victim, the family members and the society as a whole. Many studies have shown the sequel of the abuse on the victim and family members. A review by Browne and Finkelhor\(^4\) on the long term effects of childhood sexual abuse demonstrated increased risk of sexual disorders, depression, anxiety disorders, auto mutilation, alcohol and substance abuse, eating disorders, feeling self isolation, and stigmatization, deficiencies in self-esteem, anger towards parents and prostitution. A review study by Putnam\(^5\) concluded that childhood sexual abuse is a significant factor for psychopathology especially depression and substance abuse.

It is interesting to look into the characteristics of the sex offenders. However, it is not an easy job as sex offenders are heterogeneous group as they can be pedophilies, rapists, homosexuals and sexual deviants. It is difficult to characterize them as one big group. On top of that they do not volunteer to come forward for treatment because of legal reasons. However, many studies were done looking into their characteristics according to the subgroup. Raymond et al\(^6\) described the commonalities among the sex offenders. They have multiple paraphilias with marked history of abuse and neglected and their problems frequently emerge in adolescent. Lisa and Galynker\(^7\) described about juvenile sex offenders characteristics as they are representatives of all ethnic, racial and socioeconomic classes. However the individual characteristics include lack of assertive and social skills, low academic performance and learning difficulties. Even though there was a study on psychiatric morbidity among the sentenced sex offenders in Malaysia but it is difficult to interpret because the lack of non sex offenders comparison group. Without such comparison group, research on sex offenders may simply reflect non-specific offender characteristics. The area studied is relevant to the clinical practice as it can help us in treating the sex offenders with psychiatric problems and further more it can help the policy makers in making the appropriate and applicable policies for them. A better treatment program can be set up for the benefit of the offenders, which then can prevent recidivism. Therefore, the aim of this study is to determine the socio-demographic characteristics and psychiatric morbidity among the sex offenders.

**Methods**

The study was conducted in the Kajang Prison and Sungai Buloh prison, Selangor, Malaysia. This is a cross sectional study comparing two groups using a combination of survey methodology and personal interviews. The data was collected over a period of six months from January 2004 until June 2004. All convicted sex offenders in respective prisons who are available until July 2004 was included in the study. There were total of 138 sex offenders in both prisons. One hundred and thirty three sex offenders consented to be interviewed and included in the study. Out of five who were excluded, two were denied their participation by the prison authorities, two refused to give consent and one excluded because of language barrier.

A control group of non-sex offenders were chosen from the same prisons. A total number of 110 non-sex offenders were interviewed. The non-sex offenders were matched to the sex offenders group in term of the length of their sentence. This is because in this study we are looking into the
mental status of the respondents and the duration of sentence will affect their mental status.

In this study, the researcher obtained the written consent from the respondents after they were given full explanations about the aim and objectives of the study before they entered the study. The interview will be conducted in private in the respective prisons by the same interviewer (i.e. the candidate) i.e. Kajang Prison and Sungai Buloh Prison. It was held two to three times a week for six months (January until June 2004). In a day four to five prisoners were interviewed in the process of gathering the socio-demographic data and for the assessment of psychiatric status and personality disorders using the diagnostic tools.

Data for socio-demographic was obtained using the self generated questionnaire. The self-generated questionnaires will gather information about age, race, marital status, educational level, occupation, monthly income, family history of psychiatric illness, history of the sexual offence, victim age and the relationship of the victim to the perpetrator. History of previous criminal history also was gathered using this questionnaire.

The Structured Clinical Interview for DSM-III-R (SCID) was originally developed by Spitzer et al. The SCID is a semi structured interview for making the major Axis I DSM-III-R diagnoses. A clinician who has enough clinical experience and knowledge of psychopathology and psychiatric diagnoses to conduct a diagnostic interview without an interview guide should administer it. The SCID is constructed as a clinical interview and starts with questions about the demographic data of the patient. It provides current diagnoses, as well as lifetime diagnoses according to DSM –III-R and DSM-IV. Because of its modular construction, it can be adapted for use in studies where particular diagnoses are not of interest. It has a number of screening questions and the so-called “skipped-outs”.

Personality Diagnostic Questionnaire (PDQ)-4 is a 100 item, self-administered, true/false questionnaires that yield personality diagnoses consistent with the DSM-IV diagnostic criteria for the axis II disorders. It takes approximately 20-30 minutes to complete. The PDQ-4 used in clinical practice and in research projects throughout USA and other part of the world and has been translated in several different languages. For this study, the questionnaire was translated to Malay as most of the respondents are well conversed in Malay. However, the limitation of this is that it is not validated and back translation also was not done.

Permission to run the study among the chosen population was obtained from the Prison Directors. Before each interview session, informed consent was obtained from the subject. The purpose of the study was explained and the need for the result to be discussed with the supervisor of the project was informed. Subjects were not forced to participate but were included on voluntary basis.

The data was analyzed using SPSS version 11.0. To determine the risk factors, logistic regression was used for multivariate analysis. This is to determine the significant risk factors and also to avoid confounding factor. Logistic regression with enter method was used to study the association between all the variables being studied. Due to limited of space, only all the descriptive such as frequency with percentage and odds ratio for significant factors were presented.
Results

The total number of sex offenders was 138 where 133 were participated in this study. Out of five who did not participate in this study, two were denied by prison authorities, two refused to participate and one because of language barrier. Therefore the response rate among the sex offenders was 96.4%. Using multivariate logistic regression analysis, there were association between religion, education level, history of physical abuse and no history of substance abuse and dependence towards sex offenders (Table 1). Those with no formal education and with history of physical abuse were three and 5.5 times more likely involve in sex offenders respectively. Besides that those were present with substance abuse and dependence were unlikely involve in sex offenders (Table 2).

Table 1. Associated factors with sex offenders, a multivariate analysis

<table>
<thead>
<tr>
<th>Risk factors</th>
<th>P value</th>
<th>95% CI</th>
<th>95% CI</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Multivariate analysis</td>
<td>Lower</td>
<td>upper</td>
</tr>
<tr>
<td>Age</td>
<td>0.263</td>
<td>0.729</td>
<td>3.208</td>
</tr>
<tr>
<td>Race</td>
<td>0.876</td>
<td>0.345</td>
<td>2.760</td>
</tr>
<tr>
<td>Religion</td>
<td>&lt;0.001</td>
<td>3.190</td>
<td>33.089</td>
</tr>
<tr>
<td>Marital status</td>
<td>0.283</td>
<td>0.420</td>
<td>1.166</td>
</tr>
<tr>
<td>Education group</td>
<td>0.010</td>
<td>1.575</td>
<td>5.454</td>
</tr>
<tr>
<td>Occupation</td>
<td>0.376</td>
<td>0.451</td>
<td>8.229</td>
</tr>
<tr>
<td>History of parental loss</td>
<td>0.510</td>
<td>0.412</td>
<td>1.645</td>
</tr>
<tr>
<td>History of psychiatric illness in family</td>
<td>0.240</td>
<td>0.583</td>
<td>8.441</td>
</tr>
<tr>
<td>History of physical abuse</td>
<td>0.005</td>
<td>0.046</td>
<td>0.557</td>
</tr>
<tr>
<td>History of sexual abuse</td>
<td>0.999</td>
<td>0.000</td>
<td>0.000</td>
</tr>
<tr>
<td>Substance abuse and dependence</td>
<td>&lt;0.001</td>
<td>2.363</td>
<td>11.965</td>
</tr>
<tr>
<td>Alcohol abuse and dependence</td>
<td>0.259</td>
<td>0.325</td>
<td>1.415</td>
</tr>
<tr>
<td>Psychiatric morbidity</td>
<td>0.975</td>
<td>0.472</td>
<td>2.012</td>
</tr>
<tr>
<td>Personality disorder</td>
<td>0.611</td>
<td>0.504</td>
<td>3.351</td>
</tr>
<tr>
<td>Past criminal history</td>
<td>0.638</td>
<td>0.360</td>
<td>1.885</td>
</tr>
</tbody>
</table>

Table 2. Selected factors that were significantly associated with sex offenders

<table>
<thead>
<tr>
<th>Profile</th>
<th>No. of Sex offenders (%)</th>
<th>No. of Non sex offenders (%)</th>
<th>Odds ratio</th>
</tr>
</thead>
<tbody>
<tr>
<td>Religion</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Muslim</td>
<td>117 (88%)</td>
<td>62 (56.4%)</td>
<td>5.7</td>
</tr>
<tr>
<td>Non-Muslim</td>
<td>16 (12%)</td>
<td>48 (43.6%)</td>
<td>3.0</td>
</tr>
<tr>
<td>Education</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Sex Offenders</td>
<td>Non-Sex Offenders</td>
<td>Difference</td>
</tr>
<tr>
<td>--------------------------</td>
<td>---------------</td>
<td>------------------</td>
<td>------------</td>
</tr>
<tr>
<td>No formal education or primary</td>
<td>75 (56.4%)</td>
<td>33 (30%)</td>
<td></td>
</tr>
<tr>
<td>Secondary/tertiary</td>
<td>58 (43.6%)</td>
<td>77 (70.0%)</td>
<td>5.5</td>
</tr>
<tr>
<td>History of physical abuse</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Present</td>
<td>32 (24.1%)</td>
<td>6 (5.5%)</td>
<td></td>
</tr>
<tr>
<td>Absent</td>
<td>101 (75.9%)</td>
<td>104 (94.5%)</td>
<td></td>
</tr>
<tr>
<td>Substance abuse and dependence</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Present</td>
<td>26 (19.5%)</td>
<td>54 (49.1%)</td>
<td>0.3</td>
</tr>
<tr>
<td>Absent</td>
<td>107 (80.5%)</td>
<td>56 (50.9%)</td>
<td></td>
</tr>
</tbody>
</table>

Discussion

The sex offenders’ age are ranging from nineteen years old to eighty-two years old. However majority of cases are aged 26 to 55 years old and there was a decline in number of offenders as they are older. Dickey et al\(^9\) found there is a decline in sexual offences among the offenders as they are getting older. There are few studies to support this finding. Buvat and Lemaire\(^10\) reported that sexual dysfunction, decreased sexual performance and decreased libido were significantly associated with decreasing age. They also reported a decline in testosterone with age primarily after age of forty.

Discussing about the data of the religion of the sex offenders, in this study, we found that majority of the sex offenders were Muslims. This can be explained by looking at the Malaysian population, which comprises of 65.1% of Malays who mostly are Muslims. And among the other group of sex offenders who mainly Indonesians, they were also mostly Muslim. Therefore, the percentage of Muslim in this group is high. Again, the components of religious teaching in Islam made the reporting higher as Muslim unable to accept any premarital sex or any infidelity.

Analysis of level of education among the sex offenders showed that 56.4% has no formal education or primary education compared to the non-sex offenders group which mostly had secondary education. People who committed crime are thought to be a clever person as they can plan well how to commit the crime, therefore in this study we found that among the non-sex offender group, majority has secondary education. While in the sex offender group most of them had no formal or primary education. Studies reported that sex offenders who committed sex offences had low level of education and some had learning difficulties\(^11\). James et al\(^12\) also found that sexual attraction to children by pedophilia was related to poorer intellectual capacity. In the same study, they reported non specific cognitive weakness among the pedophiles and this suggests that people with pedophilia possess a broad cognitive deficit. This could explain the poor ability in planning that leading to being caught by authorities for their offence.

In this study we found a significant difference in parental loss between sex offender and non-sex offender group in univariate analysis however when logistic regression was used in which other confounding factors were taken into account, there was no association found.
between the parental loss and the sex offenders. This result is contradicted with the other studies done abroad. Awad et al\textsuperscript{13}, Becker et al\textsuperscript{14} and William and Mina\textsuperscript{11} described the family environment of sex offenders as characterized by family conflict, family instability, family dysfunction and exposure to violence. Becker et al\textsuperscript{14} also described about parenting way which was described as harsh, inconsistent parenting and physical and sexual maltreatment.

The rate of family history with psychiatric illness found to be low in both groups of sex and non-sex offenders i.e. 6.8\% and 8.2\% respectively. There was no significant difference between the two groups. This is consistent with local study done by Norhashim\textsuperscript{15}. Selvasingam\textsuperscript{16} also found there is low rate of family history of psychiatric illness among the prisoners in Malaysia.

There was no significant difference found for history of sexual abuse in both groups. There was only two respondents in sex offender group reported that they were sexually abused during childhood. This finding is in contrast with findings in others studies. Majority of studies found that there high rate of history of sexual abuse among the sex offenders. Fazel et al\textsuperscript{17} reported that 33\% of the sex offenders in their study disclosed that they had been sexually abused as children. Another study in treatment center reported 35\% of the sex offender had been sexually abuse\textsuperscript{18}. Study of sex offenders in US prison by Greenfield\textsuperscript{19} reported 28\% had history of childhood sexual abuse.

In a culture that sex is a taboo in which the exposure towards sex is very limited these people may be was unable to recognize the act as an offence especially if it occurred about 20 to 25 years ago. This could be one of the reasons why majority of the respondents denied any history of sexual abuse during childhood. However, the researcher found that there is significant difference for physical abuse between the sex and non-sex offenders. This finding is consistent with other studies done. Ryan et al\textsuperscript{20} found significant history of childhood maltreatment including neglect, physical and sexual abuse in the early lives of the juvenile sex offenders.

In this study we found that 34.6\% of sex offender and 30\% of the non-sex offenders were diagnosed to have psychiatric diagnosis. Statistical analysis showed there was no significant difference between these two groups. The finding in this study was consistent with other studies. Fazel et al\textsuperscript{17} also found there was no difference between the sex offender and non-sex offender group. Looking into substance abuse, 19.5\% of sex offenders were diagnosed to have abused or dependant on one or more illicit drug and 32.3\% abused or dependant on alcohol. In the non-sex offender group, 49.1\% were found to have abused or dependant on one or more of illicit drugs and 32.7\% were abused or dependant on alcohol.

Comparing the results with studies done abroad, the results in this study is found to be lower. Galli et al\textsuperscript{21} reported that 50\% of the sample diagnosed to have substance abuse and dependence. Peugh and Belenko\textsuperscript{22} also found two third of sex offenders in their study were substance involved. The lower rate of substance abuse and dependence in this study may be resulted from some limitation in this study. The respondents may be minimized and denied their drugs involvements and the researcher did not have other sources to reconfirm the diagnosis. On the other hand, Peugh and
Belenko\textsuperscript{22} in their study used a broader definition for the substance abuse and dependence.

We also could not find any significant difference for personality disorder between sex offenders and non-sex offenders. However, we found that sex offenders with past criminal history shared some of the characteristics with non-sex offender group. We found there is significant difference in personality between the sex offender without past criminal history and sex offender with past criminal history. From this result we may conclude that many sex offenders committed other crime as well. Ryan et al\textsuperscript{20} found that 63\% of juvenile sex offenders had committed nonsexual delinquent offenses and 28\% had committed nonsexual criminal offenses. Righthand and Welch\textsuperscript{23} also noted that juvenile sex offenders frequently engaged in non-sexual criminal offences. This result is also consistent with the finding by Mc Elroy et al\textsuperscript{24}.

Majority of the sex offenders who were diagnosed to have personality disorders, they were diagnosed to have antisocial personality. Among the sex offenders who were diagnosed to have antisocial personality, majority of them had past criminal history. Studies have reported that there is association between antisocial personality and criminality. Reid\textsuperscript{25} described an association between antisocial personality disorder and criminality based on the fact that many behaviors associated with indiscriminate seeking of pleasures and stimulation are illegal and those with antisocial personality disorder are more likely than general population to disregard legality when seeking pleasure and stimulation.

In this study, the results mainly descriptive and described about an association between the variables and does not show any causality. For future study, a prospective study can be done to look into certain factors that can be the cause of being the sex offenders.

**Limitations**

The sex offenders in this study are defined based on legal and criminal definition. As a result, some of the offence can be affected by culture for example; homosexual which is not an offence in some other country but considered as an offence in our country. This may contribute to the difference in the results. This is a study comparing two groups of prisoners. Various factors could have contributed to the psychiatric morbidity among the prisoners. Even though the length of sentence was matched but it was not possible to match variables like age, race, marital status, religion and socioeconomic status. Ideally, with enough resources it will be better if the control group is a matched group.

The respondents in this study only include those who were convicted and were undergoing the sentences. Those who were under remand were not included because several reasons. One main reason was due to legal procedures, as approval from their lawyers was needed. Second factor was due to time factor and limited resources. Those who under remand may be more stressed and in need of psychological support as they were still uncertain of their future, stressful with the legal proceedings and for those of being the first offenders, they had difficulty adjusting to prison life.

The diagnostic interview is based on a retrospective self-report which gives rise to potential problems related to recall biases.
This is a general limitation of studies of this nature. The respondents in this study were generally known to have psychopath personality. There is potential that they might not be telling the truth and minimize the symptoms and problems that the researcher were looking into. It was ideal if the researcher could have interviewed the respondents few times to get the consistency in the history and excluded those with inconsistent history. But because of time factor this could not be done and as a result this may contribute to the difference in findings.

Conclusions

In this study, we found that the offenders who only committed sexual offences have some characteristics which differ from other sex offenders who committed non sexual offences as well. Low or no formal education, had history of physical abuse were associated with sex offenders. No history of substance abuse and dependence were associated with no sex offenders. Although religion was significant, but it might be due to sample selection which from a muslim’s country. Besides that, culture and religion issues were also involved as stated in the discussion.

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References


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