

**COMMUNITY BASED REGISTERED SEX OFFENDERS:
DOES ONE LABEL FIT ALL?**

A Doctor Dissertation

Submitted to the
Faculty of Argosy University, Sarasota
College of Psychology and Behavioral Sciences

In Partial Fulfillment of
the Requirements for the Degree of

Doctor of Education

by

Thomas George Glaza

June 2013

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Dissertation Committee Approval:

Chair: Michael Dubi, E.D.

Date

Member: Joffrey S. Suprina, Ph.D.

Program Chair: Joffrey S. Suprina, Ph.D.

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Member: Joffrey S. Suprina, Member, Ph. D.

Department: College of Psychology and Behavioral Sciences

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DEDICATION

To all those whose love and support
have helped turn this dream into a reality.

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CHAPTER ONE: THE PROBLEM

The public's perceptions of adult male registered sex offenders has evolved primarily from the media's misrepresentation of offenders and its over-exposure of particularly heinous sex crimes with no factual basis (Bandy, 2007; Budd, 2011; Church, Wakeman, Miller, Clements, & Sun, 2008; Cumming & McGrath, 2005; Dowler, 2006; Dreiling, 2010; Freeman & Sandler, 2008; Gaines, 2009; Galeste, 2010; Hargrove & Livingston, 2006; Harris & Hanson, 2004; Heil, Ahlmeyer, & Simons, 2003; Jewkes, 2003; Katz-Schiavone, Levenson, & Ackerman, 2008; Magers, 2009; Olver & Barlow, 2010; Quinn, Forysth, & Mullen-Quinn, 2004; Rogers & Ferguson, 2011; Wall, 2001).

A number of independently-conducted studies involving interviews with a cross-section of socioeconomic groups representing college students, law enforcement personnel, probation and parole officers, undergraduate and graduate students, health care professionals and state legislators all concluded that the highly-entrenched negative beliefs associated with adult male registered sex offenders are not supported by empirical research (Budd, 2011; Castleman, 2010; Chiotti, 2009; Cook & Lane, 2008; Craig, 2005; Dreiling, 2010; Galeste, 2010; Jones, Finkelhor, & Kopiec, 2001; Katz-Schiavone et al., 2008; Levenson, Brannon, Fortney, & Baker, 2007; Levenson, Fortney & Baker, 2010; Petrunik & Deutschmann, 2008; Quinn et al., 2004; Rogers & Ferguson, 2011; Sample & Kadleck, 2006; Weekes, Pelletier, & Beaudette, 1998; Willis, Levenson, & Ward, 2010).

The most common misconceptions surrounding sex offenders are: (a) a readily-identifiable homogenous group of individuals possessing the same or similar characteristics; (b) sex-related crimes and the number of offenders are increasing;

(c) once an individual commits a sex-related offense he is almost certain to re-offend; (d) crimes of a sexual nature are committed by individuals not known to the victim (commonly referred to as “stranger danger”); (e) most sex offenders are violent criminals; and (f) that treatment has proven to be largely ineffective in preventing re-offending.

These erroneous beliefs have resulted in the enactment of fear-based legislation created in the name of public safety, but in actuality further identify, punish, isolate and control all adult male registered sex offenders, regardless of their offense.

The first misconception: homogeneity, has repeatedly been challenged. Adult male registered sex offenders have been found to represent all socioeconomic groups, commit contact or non-contact offenses, perpetrate against males and females of all ages, cross all ethnic and cultural barriers, represent a variety of age groups, run the gamut from the uneducated to the highly educated, and are found among the indigent and the wealthy (Church et al., 2008; Harris & Hanson, 2004; Heil et al., 2003; Magers, 2009).

In contrast to media accounts, and the perceptions of interviewees representing a cross-section of society, the number of adult male sex offenders and the frequency of sex-related crimes have continued to decrease over the past two decades. Grossly-distorted media accounts have been said to rely heavily on anecdotal accounts, urban myths, and sources, the primary function of which is to further stigmatize, isolate and punish sex offenders.

A strongly-held belief among many of those interviewed was that once an individual commits a sex-related offense, he is almost certain to re-offend. Empirical research reveals that a relatively smaller number of persons who commit a sex-related crime are later arrested for the same or a similar offense. Adult male sex offenders, with

the exception of violent rapists, are also known to re-offend less often than any other category of felon. The relatively small numbers of convicted sex offenders who commit a later offense generally involve improperly completed travel logs, curfew violations, an alcohol-related offense, failure to report relocating to a new address in a timely manner, electronic monitoring device failure, or another administrative aspect of their probationary order (Beck & Shipley, 1998; Crouch, 2011; Grubin & Wingate, 1996; Radford, 2006; Turner & Rubin, 2002).

The concept of “stranger danger” is often taught to minor children as a means of preventing child molestation. This belief continues to be a philosophy among some educators, law enforcement personnel and child welfare advocates, even when research has repeatedly shown that approximately 90% of all sex crime victims reported have an interpersonal relationship with their perpetrator (e.g. family member, neighbor, coach, or another adult befriended by their family) (Cheit, 2003; LaFond, 2005; Lanning, 2010; Radford, 2006).

A further misconception, that all sex offenders are violent in nature, has also been repeatedly disproven by the outcomes of empirical research. The majority of adult males who commit sex-related offenses, with the exception of violent or serial rapists, seldom cause sustained physical harm to their victims (Galeste, 2010; Levenson, 2008; Sample, 2001).

While this study focuses on community based adult male registered sex offenders, it is also necessary to include the societal perception that females are either unable or unwilling to commit sex-related crimes. A common belief among interviewees was that women are predisposed to be caregivers, hard-wired to protect their children, thus are

inherently incapable of committing a sexual act on a minor child. This belief is thought to explain why some health care professionals and law enforcement personnel tasked with processing allegations of sexual abuse by a female made by a minor child tend to be received with more suspicion than allegations against males. The media's reporting of sexual abuse allegations made by both females and males under the age of 16 years against adult males in positions of authority are much different than adult female teacher and prepubescent or adolescent male student sexual relationships. The former are perceived as deviant predators, while the latter are portrayed as emotionally immature individuals who are in need of mental health counseling (Castleman, 2010; Chiotti, 2009; Frei, 2008; Johansson-Love & Fremouw, 2006; Vandiver & Kercher, 2004).

Finally, there is a commonly-held belief that no amount of therapy will rehabilitate a sex offender; therefore, public monies should not be allocated to prison-based rehabilitation or outpatient community integration programs. A number of outcome studies used to assess the effectiveness of state-funded adult male sex offender community integration programs found significantly lower re-offense rates when compared to other groups of offenders that were not provided services (Dornin, 2006; Hanson & Morton-Bourgon, 2009; Horowitz, 2007; Marques, 1999).

Problem Background

The sexual victimization of children and adults has evolved into one of society's most highly publicized and controversial social issues (Edwards & Hensley, 2001), an issue that has remained at the forefront of our social conscience for more than three decades. The Center for Sex Offender Management (CSOM, 2000), and Levenson et al. (2007) posit that public awareness of what constitutes a sexual offense, thus what defines

a sex offender, was created and continues to be perpetuated by media misrepresentations, rather than derived from the outcomes of scientific research. These public misperceptions are further re-enforced through a series of myths, innuendo, and false information (Beirne & Messerschmidt, 2006; Budd, 2011; Castleman, 2010; Gaines, 2009; Galeste, 2010; Olver & Barlow, 2010; Reiner, 2002; Robbers, 2009; Tewksbury & Zgoba, 2010; Warr, 1995).

Budd (2011) offered that the social construction of the misinformation surrounding adult male sex offenders has created fear, anxiety, and paranoia among our citizenry; emotions that have been attributed to repeated exposure to the media's reporting of particularly heinous sex offenses, and especially those perpetrated against innocent minor children. The resulting effect is that sex offenders are currently the most stigmatized criminal group, regardless of whether convicted of a contact or a non-contact offense, ensuring that they do not gain access to the social capital afforded all other citizens.

This researcher discovered during attendance at the 2012 Association for the Treatment of Sexual Abusers (ATSA) conference in Denver, Colorado that the majority of workbooks, manuals, textbooks and other promotional materials were the byproducts of research that focused primarily on the violent or the high-risk sex offender. The conference materials addressed those who were convicted of one or more sex-related offense, men who committed both sex and non-sex-related crimes, and offenders who presented with one or more co-occurring disorder.

This researcher found it necessary to either omit or revise many of the group guided discussions, exercises and homework assignments contained in the promotional

materials when revamping an existing community-based sex offender treatment program since they did not meet the needs of low risk offenders. There was a noticeable absence of information to assist family members to cope with the secondary stigma associated with being related to a sex offender, as was information to assist those who choose to advocate for the restoration of sex offenders' rights.

Purpose of the Study

The purpose of the study was to: (a) identify society's core beliefs about adult male registered sex offenders; (b) identify the primary sources from which members of society obtain their attitudes and behaviors toward adult male registered sex offenders; (c) compare these core beliefs to the findings contained in empirical research; and (d) present an objective view of adult male registered sex offenders.

Research Questions

A review of the research makes clear three pertinent ideas: (a) the media projects onto society a belief that all sex offenders are alike, and therefore should be treated in a similar manner; (b) research tends to focus on high risk offenders; and (c) scant attention has been paid to the offender who has been assessed as being at a low risk for re-offending. The primary goal of this study was to identify how the current system of labeling impacts the way that adult male registered sex offenders are treated by society and the criminal justice system, and what public safety issues they generate. To attain this goal, the following questions were asked:

1. How accurate are the current typologies in describing community-based sex offenders?
2. How do current sex offender labels impact their ability to access social capital?

3. How does the current system of typologies impact the counseling treatment received by community-based sex offenders?

Limitations and Delimitations

The primary limitations of this study were that the sample: (a) was not random; (b) is small, thus cannot be generalized to the entire population of adult male registered sex offenders; and (c) the personal biases held by the researcher. The study was not random in that the subjects represented adult male sex offenders currently in outpatient therapy at one mental health clinic located in southwest Florida. The sample size was 15 men from a target population of 48 adult male sex offenders in outpatient therapy at the aforementioned clinic, with all participants voluntarily consenting to being interviewed. Personal biases existed in the form of the researcher being professionally and personally affected by the social stigma and lack of access to social capital experienced by adult male sex offenders and their family members under his care.

A further limitation was that none of the 15 respondents used in this study present with a co-occurring mental health or substance abuse disorder; therefore, no further insight into the impact that co-occurring disorders have on the attitudes and behaviors of adult male registered sex offenders in outpatient treatment could be gained. Definitions of co-occurring disorders contained in this chapter are included for the purpose of understanding the disorders discussed in Chapter Two.

The delimitation of this study was that participants were asked open-ended questions with their responses recorded verbatim, thereby reducing the chance of bias, and that the interviewees were selected at random from a pool of volunteers.

This study did not promise to remove the stigma currently attributed to all adult male registered sex offenders, regardless of their offense, nor did it promise to have a great impact on society's attitudes and behaviors toward this specific class of felon. The study does provide a starting point to open up a dialogue with the potential of motivating segments of our society to view and accept adult male registered sex offenders with increased understanding.

Definitions of Terms

Antisocial Personality Disorder. A pervasive pattern of disregard for, and violation of, the rights of others that begins in childhood or early adolescence and continues into adulthood (American Psychological Association [APA], 2000).

Bipolar Disorder. A clinical course that is characterized by the occurrence of one or more Manic Episode or Mixed (depression and manic) Episodes. The episodes are not better accounted for by Schizoaffective Disorder and are not superimposed on Schizophrenia, Schizophreniform Disorder, Delusional Disorder, or Psychotic Disorder Not Otherwise Specified (APA, 2000).

Borderline Personality Disorder. A pervasive pattern of instability of interpersonal relationships, self-image, and affects, and marked impulsivity that begins by early childhood and is present in a variety of contexts (APA, 2000)

Child Molestation. A person commits the offense of child molestation when he or she does any immoral or indecent act to or in the presence of or with any child under the age of 16 with the intent to arouse or satisfy the sexual desires of either the child or the person (APA, 2000).

Community Based. The term denotes a registered sex offender who is no longer incarcerated, is residing within a community under the supervision of a parole and probation officer, and who is engaged in outpatient sex offender treatment.

Contact Offense. A criminal offense that involves the nonconsensual physical contact with a victim by a perpetrator (anal or vaginal penetration, penil or digital penetration, sexual molestation or frotteurism).

Exhibitionism. The exposure of one's genitals to a stranger who has not consented to the exposure (APA, 2000).

Fetishism. A paraphilia that involves the use of nonliving objects (the "fetish"). Among the more common fetish objects are women's underpants, bras, stockings, shoes, boots, or other wearing apparel (APA, 2000).

Incest. The act of sexual intercourse occurring between closely related persons, such as between siblings, parents and children, grandparents and grandchildren, uncles and aunts and nieces and nephews (APA, 2000).

Intermittent-Explosive Disorder. The occurrence of discrete episodes of failure to resist aggressive impulses that result in serious assaultive acts or destruction of property. The degree of aggressiveness expressed during an episode is grossly out of proportion to any provocation or precipitating psychosocial stressors (APA, 2000).

Non-Contact Offense. Occurs when the offense does not involve physical contact between the perpetrator and the victim (e.g. child pornography, voyeurism, Internet chat rooms or social media outlets, fetishism, and exhibitionism)

Obsessive-Compulsive Personality Disorder. A preoccupation with orderliness, perfectionism, and mental and interpersonal control, at the expense of flexibility, openness, and efficiency (APA, 2000).

Paraphilia. Recurrent, sexual arousing fantasies, sexual urges, or behaviors generally involving: (a) nonhuman objects; (b) the suffering of humiliation of oneself or one's partner, or (c) children or other non-consenting persons, and that occur a period of at least six months (APA, 2000).

Pedophilia. A paraphilia that involves sexual activity with a prepubescent child (generally age 13 or younger). The individual with Pedophilia must be age 16 years or older and at least 5 years older than the child (APA, 2000).

Rape. A criminal offense defined in most states as forcible sexual relations with a person against that person's will (legal-dictionary).

Recidivate or Recidivism. Refers to an individual who has been convicted of a sex-related crime, and later is convicted of a non-sex-related criminal offense. (At times has been used interchangeable with re-offender or re-offense).

Re-offender or Re-offense. Refers to an individual who has been convicted of a sex-related crime, and later is convicted for the same or a similar sex-related offense.

Schizoaffective Disorder. An uninterrupted period of illness during which, at some time, there is a Major Depressive, Manic, or Mixed Episode concurrent with symptoms that meet Criterion A for Schizophrenia. During the same period of illness, there have been delusions or hallucinations for at least two weeks in the absence of prominent mood symptoms. And, the mood symptoms are present for a substantial portion of the total duration of the illness (APA, 2000).

Schizophrenia. A mixture of characteristic signs and symptoms that have been present for a significant portion of time during a one-month period (or for a shorter time if successfully treated), with some signs of the disorder persisting for at least six months. The signs and symptoms may include delusions, hallucinations (auditory and/or visual), and disorganized thinking, are present for at least a month, and are associated with marked social or occupational dysfunction. Subtypes of Schizophrenia include Paranoid, Disorganized, Catatonic, Undifferentiated Type, and Residual (APA, 2000).

Sex Offender. A generic term for all persons convicted of crimes involving sex, including rape, molestation, sexual harassment and pornography production or distribution (legal-dictionary).

Sexting. The transmission of sexually-explicit photos or other materials from one individual to another via telephone or telephone-like electronic devices.

Substance-Related Disorders. Includes disorders related to the taking of a drug of abuse (including alcohol), to the side effects of medication, and to toxin exposure. Substances are grouped into 11 categories, and divided into two groups: Substance-Use Disorders (Substance Dependence and Substance Abuse) and the Substance-Induced Disorders (Substance Intoxication, Substance Withdrawal, Substance-Induced Delirium, Substance-Induced Persisting Dementia, Substance-Induced Persisting Amnesic Disorder, Substance-Induced Psychotic Disorder, Substance-Induced Mood Disorder, Substance-Induced Anxiety Disorder, Substance-Induced Sexual Dysfunction, and Substance-Induced Sleep Disorder) (APA, 2000).

Voyeurism. A paraphilia that involves the act of observing an unsuspecting individual, usually a stranger, either who is naked, is in the process of disrobing, or is engaging in sexual activity (APA, 2000).

Significance of the Study

As a result of this study, the researcher has presented an objective view of adult male registered sex offenders through the identification and repudiation of society's commonly-held core beliefs, all of which evolved from myths, innuendo, and false information surrounding this particular class of felon.

The findings of this study provide a viable resource for professionals and lay persons who advocate for the fair and equitable treatment of adult male registered sex offenders and their family members. The findings of this study challenge and may serve to alter the negative stereotypical assumptions currently held by State of Florida legislators, judiciary, law enforcement agencies, state probation and parole agencies, mental health care providers, and child welfare advocates.

CHAPTER TWO: REVIEW OF THE LITERATURE

The Essence of Criminality

The commission of a sex-related offense is one form of criminal behavior. For an act to be labeled “criminal” (versus antisocial, harmful, or immoral) it must be identified as such by a society. According to Reiner (2002), a crime consists of four elements: (a) motive; (b) means; (c) opportunity; and (d) the absence of controls. As to *motive*, Reiner stated, “a crime will not occur unless someone is tempted, driven, or otherwise motivated to carry out the ‘labeled’ act.” Noted sociologist Robert Merton attempted to prove that biological factors explained deviant behavior, but concluded that biology alone did not account for the rise and fall of criminal activity among societies.

The media, through repeated violent acts depicted in movies, television, print, and most recently the Internet coupled with the questionable impact and popularity of violent interactive video games, are blamed for creating a new *means* of committing crimes. Dowler (2006), Hargrave and Livingston (2006), Jewkes (2003), and Wall (2001) studied this concept and reported that those who are repeatedly exposed to the potentiality for participating in criminal activity become disinhibited or desensitized thus become more vulnerable to carrying out a deviant thought.

The *opportunity* to commit crimes has increased in direct proportion to the increasing availability of electronics systems (e.g. televisions, gaming systems, mobile phones, and personal computers) in the home, at work, and in public and personal conveyances. Reiner (2002) identified a correlation between an increase in the availability of electronics and an increase in the theft of electronic items. He posited that

it is the absence of internal and external controls that creates opportunities for increased criminal activity. External controls are identified as the absence of a deterrent, attributed to absent, weak, or unenforced laws. The fear of bearing consequences for one's actions is also weakened when law enforcement personnel direct their attention to more violent crimes while ignoring lesser ones.

The strongest internal control is thought to be one's own conscience, a control that may be weakened when television producers air programs that are sympathetic toward and at times a glamorous presentation of criminal activity. One of the most recent examples is the immensely popular television series, "Sons of Anarchy." The show follows the daily activities of a motorcycle gang that financially supports its members and their families entirely through proceeds gained from criminal enterprises.

Dreiling (2010) wrote that public opinion about crime and punishment is a complex issue that encompasses the fear of crime, the effectiveness of law enforcement agencies and the court system, adherence to or deviance from suggested sentencing guidelines, attitudes toward legislated criminal sanctions, perceptions regarding certain types of offenders, and the causes of criminal activity. What makes this issue complex is that what constitutes criminal behavior is defined and redefined across cultures and subcultures, from one generation to the next, in accordance with the laws and the social norms in place at a particular point in time. Crimes of a sexual nature are perceived in the same fashion; therefore, it is important to present society's attitudes and behaviors toward sex offenders from a modern perspective.

What Constitutes a Sexual Offense?

Crimes of a sexual nature can be defined within the parameters of a legal, moral, societal, religious, or a medical model, each of which posit historically disparate methods of identifying, treating and monitoring the offender. Given these disparities, this study utilizes modern, standardized and scientifically proven concepts of what constitutes a sexual offense.

Budd (2011) offered a different perception; that crimes of sexual nature tend to be viewed from three distinct and diverse perspectives – law/legal, the media, and a medical model. From a purely legal perspective, the identification, punishment, treatment, and monitoring of community-based sex offenders rests on a broad continuum that is determined by the state within which the crime was committed.

The media perspective is of equal consideration given that newspaper articles, radio show hosts and television broadcasters contribute a great deal in the development of society's attitudes and behaviors toward public safety concerns. Budd (2011) wrote that newspaper articles frequently used the adjectives "predator" and "monster" when writing about any individual who committed a sex-related crime. Olver and Barlow (2010) also found that the media used the disparaging terms "predator", "monster" and "psychopath" when portraying sex offenders, whether the offense was violent or non-violent, contact or non-contact in nature.

The medical perspective posits that sexual offending is a treatable illness or constitutes an addictive behavior. It focuses on delineating criteria to be used for the identification and diagnosing of pedophilia and the various paraphilias. The medical

perspective stresses the development of a relapse prevention plan, guided by the assumption that the sex offender is highly susceptible to re-offending.

The National Forensic Training Institute (NFTI) (CSOTS seminar, 2012) offered a different point of view; that sex-related offenses consist of four distinct categories: (a) crimes committed against children; (b) crimes committed against adults; (c) non-contact offenses; and (d) contact offenses. Sex-related crimes committed against children include: touching, oral, anal or vaginal penetration; exposing one's genitals to a child; exposing a child to pornography; photographing a child in a sexually explicit pose; and inappropriately watching a child undress. Sex-related crimes against adults consists of any sexual act that is not consensual (e.g., the victim saying "no" before or during the sex act), those committed while the perpetrator and/or victim are under the influence of a mind or mood-altering substance, and crimes committed by individuals diagnosed with a mental disability, developmental disorder, or a physical disorder.

Non-contact sex-related offenses include exhibitionism, voyeurism, the possession of child pornography, and Internet crimes. An example of the latter is an adult engaging in chat room discussions of a sexual nature with a child who is known to be a minor. Contact offenses are defined as any sexual contact that is not consensual and includes oral penetration, anal or vaginal penetration (penal, digital or an object), and rubbing against someone in a public place for the purpose of sexual gratification (frotteurism). Elliott, Beech, Mandevill-Norden, & Hayes (2009) studied a sample of 505 Internet (non-contact) and 526 contact offenders and learned that the contact offenders had significantly less victim empathy and more cognitive distortions than Internet offenders, and that Internet offenders had significantly higher identification with

fictional characters.

Within the State of Florida, crimes of a sexual nature are identified as: luring persons under the age of 18 for prostitution; the selling or buying of minors into sex trafficking or prostitution; lewd or lascivious offenses committed upon, or in the presence of, an elderly person or a disabled person; any sexual performance by a child; the prohibition of certain acts in connection with obscenity (including knowingly selling, renting, loaning, giving away, distributing, transmitting, or showing any obscene material to a minor); computer pornography; the transmission of pornography by electronic device or equipment (including the “sexting” of sexually explicit photographs); kidnapping and false imprisonment of a child under the age of 13; the selling or buying of minors; and sexual misconduct. The offense of sexual misconduct includes fondling the genital area, groin, inner thigh, buttocks, or breasts of a person (whether the victim is clothed or unclothed), the oral, anal, or vaginal penetration of, by, or union with the sexual organ of another, or the anal or vaginal penetration of another by any other object (Florida Department of Law Enforcement, 2010).

It has been stated that society’s attitudes and behaviors concerning public safety vary among cultures, subcultures and generations and that they are forever changing. It has also been said that the legal determinants of what constitutes a sex-related offense differs among cultures and from state to state. Sample (2001) wrote that sex-related offenses are considered “mala in se”; that is, an act that is morally wrong in and of itself.

Theories of Deviance

Labeling individual behaviors as deviant in nature is not a modern practice. Throughout recorded history societies have identified and isolated individuals, including

members of minority groups and subcultures, who have failed to conform to acceptable patterns of behavior. Budd (2011) labeled these individuals and subgroups as “outsiders”, a designation that, once attained, leads to restricted access to social capital (e.g. employment, higher education, housing, elected office and other positions of power).

What is considered behavior of a deviant nature ranges from the seemingly trivial (e.g., spitting on the sidewalk) to highly controversial behaviors (the “swinger” or the nudist lifestyle), culminating in the horrific (incest, torture, or homicide) (Quinn et al., 2004).

Gaines (2009) wrote that Edwin Lemert introduced a criminological concept of deviance as being *primary* or *secondary* in nature. *Primary* deviance was identified by Lemert as crimes that virtually everyone occasionally commits (e.g. violating the speed limit, not returning a borrowed item, purloining office supplies), behaviors that do not drastically change one's psychological makeup. These behaviors are impulsive, short-lived, and are attributed to a combination of biological, structural, cultural, and psychological factors. Lemert identified *secondary* deviance as criminal behavior that occurs when an individual begins to self-identify as a deviant because of society's negative reaction to their behaviors, which purportedly explains why such individuals are at a high risk for re-offending. Gaines wrote that a number of individuals, primarily those who lack a strong and healthy support system, who find themselves labeled as sexually violent predators may begin to assume those attitudes and behaviors that conform to society's expectations of them.

Budd (2011) wrote that Kai Erikson, “posited that deviance serves a purpose in society”, by motivating communities to create a unified front against a real or a perceived threat to their safety. The researcher offered that a number of particularly heinous sex-related crimes against children in the 1990s served as the impetus for child welfare advocates, law enforcement, the judiciary and other segments of society to call for the passage of more stringent legislation to ensure that sex offenders are punished and their movements closely monitored when released back into the community.

Sociological theories attempt to explain why people behave in deviant ways. They include Cultural Transmission/Differential Associations Theory, Control Theory, Labeling Theory, Structural Strain Theory/Anomie Theory, Subcultural Theories, and the Medicalization of Deviance (Sociological Theories, 2011). The Cultural Transmission/Differential Associations Theory posits that all behavior is learned, believing that the younger the “learner” is, and the intensity of the relationship with the “teacher” - coupled with the number of contacts with significant others who are also deviant - the greater the likelihood that the learner will be deviant. Control Theory offers that normal behavior is a product of the power of social control mechanisms; that is, positive and strong social bonds among members of a society inhibits its members from committing what constitute deviant behaviors.

Labeling Theory explains deviance as a label given to someone (or a subgroup) by persons in position of power, with the individual or members of the subgroup assuming the attitudes and behaviors associated with that label (e.g. bikers are all hard-drinking, violence-prone individuals). Labeling Theory divides deviance into three

types: *primary* (behavior that does not conform to social norms, but may be temporary), *secondary* (behavior that does not conform to social norms, but tends to be sustained over time), and *deviant career* (continuing secondary deviance until it becomes one's lifestyle).

Robert Merton's theory of Strain/Anomie (*Robert Merton: Anomie Theory*, 2012) describes deviance as the outcome of social strains. When social norms are weak, confusing, or conflicting, it creates the absence of social norms, or anomie. Merton later redefined anomie as referring to a situation in which there is disparity between society's concept of what constitutes success and the way that an individual achieves success (e.g. attaining wealth or power through unethical or illegal means).

Subcultural Theory offers that behaviors deemed deviant by the culture at large are considered acceptable by members of a subculture. The theory explains that the behaviors of the subculture, while unacceptable to society as a whole, are not necessarily illegal. These include sororities and fraternities, religious sects, high school and college organizations, service clubs, and a number of other private organizations that require their initiates to participate in a rite of passage before being accepted as a full-fledged member. Conversely, gangs and a handful of other subcultures are known to require their initiates to commit a criminal act as an essential element of the initiation process.

Proponents of the Medicalization of Deviance Theory subscribe to the belief that people are not "evil" but "sick", thus require psychological treatment. It is considered by some as a more optimistic view of deviant behaviors. The theory, applied first to alcohol and drug-dependent individuals, posits that: an individual should be absolved of responsibility for his or her actions; the deviant behavior should hold little or no stigma;

the individual must follow a complicated behavioral set in order to maintain the designation (e.g. “once an alcoholic, always an alcoholic”); and that, as a medical concern, the “patient” must follow a physicians’ directions.

Quinn et al. (2004) offered a Christian perspective of deviance. They report that Christian societies have a history of punishing and ostracizing those who commit sex-related crimes based on their “proscriptive approach to joys of the flesh” and the high value that society places on female virginity.

Society’s punitive treatment of sex offenders has been attributed to misguided legislation, sensationalized media reports, distorted re-offense rates, and a fear of the unknown. Quinn et al. (2004) further wrote that society’s disdain for all sex offenders have led to inclusive labeling, protection of society and victims, consensus building and solidarity enhancement, and sacred taboos.

Inclusive Labeling describes the stereotypical assumption that all sex offenders are predators, with no concern for the type of offense committed. The sociological theory Protection of Society and Victims explains why current sex offender legislation focuses on the protection of society and the rights of the victims, rather than the individual rights of the offender. This social pressure inhibits civil rights organizations from supporting offenders’ rights.

Consensus Building occurs when members of a community or a society share a commonly-held belief. In this instance the belief is that predators cannot be rehabilitated. Solidarity Enhancement follows when the community or society bands together to take a course of action. With sex offenders punitive actions tend to be harsher than those applied to other categories of felons.

The Sacred Taboo theory offers that society labels a given set of behaviors as being either acceptable or unacceptable, based on what is considered fair and decent at a given period of time. In modern times, the taboo against sex-related offenses fails to differentiate between “Romeo and Juliet” cases (an 18-year-old engaging in consensual sexual relations with a 16 year old) and those offenders who commit acts of pedophilia, rape or incest.

Fortney, Levenson, Brannon, and Baker (2007) wrote, “sex offenders may seem to the public to be unknown, different, mysterious, and very frightening”, which contributes to understanding why sex offenders as a group are subject to social stereotyping and treated in a highly discriminatory manner. Society consists of an in-group (non-offenders) and an out-group (offenders), with the former creating stereotypical assumptions to assuage their fear.

Various subcultures have been involuntarily identified as deviant throughout the past century: women who smoked in public; religious sects with nonstandard practiced (e.g. snake handling); ethnic and cultural minorities; women who bore children out of wedlock and their illegitimate offspring; persons with mental or physical disabilities; alcoholics and drug addicts; bi-racial couples and their offspring; gay and lesbian couples; and transgender persons. Persons who commit sex-related crimes are the latest group of society’s deviant class, with the added distinction of occupying the lowest echelon of the criminal hierarchy (Budd, 2011).

The Effects of Stigmatization

The ancient Greeks marked individuals deemed to be of little value to society by carving an indelible mark on their skin - referred to as a stigma. The mark identified

slaves, criminals of all sorts, traitors, and others who violated social customs. Members of Greek society were required to shun those so marked, even members of their own family (Budd, 2011). A modern sociological definition of a stigma is, “a sign of social unacceptability: the shame or disgrace attached to something regarded as socially unacceptable” (bing.com/Dictionary, 2012). Major and O’Brien (2005) offered that a stigma is not inherent in the individual but rather “a process that occurs among social actors within social contexts.”

While modern day sex offenders do not carry an openly visible mark to distinguish them from the rest of society, they are made highly visible through the community notification laws. In addition to granting public access to federally-mandated sex offender registries, a number of communities further authorize law enforcement personnel to perform door-to-door briefings with all neighbors to ensure that they know that a registered sex offender has taken up residence among them. Some communities expand community notification to include erecting signs at the entrance to an offender’s residence, advising all who pass by that a registered sex offender is at that address.

Gaines (2009) wrote that a stigma is “a characteristic that has been imposed on an individual to signify disgrace” (and) “works as an insurmountable handicap, preventing competent and trustworthy behavior.” Gaines studied the effects of stigmatization by conducting interviews with 1,121 adult male Registered Sex Offenders (RSOs) who were placed on community control following release from incarceration. The researcher learned that 54.7% lost one or more close friends, 47% were harassed by others (e.g. neighbors and strangers) when they learned of their status, 45.3% were denied housing, 42.7% of the offenders reported loss of employment, and 39.3% reported being treated

rudely while in a public place. A number of the interviewees reported that they were overtly or covertly prevented from accessing health care and other social services.

Tewksbury (2005) attributed the lack of access to suitable housing and community- and faith-based shelters - due to the imposition of a ban against sex offenders being on their property - has caused offenders to join the ranks of the homeless. In some states, not having a fixed address is cause to violate the offender's probation. Employers who are already hesitant to hire people with a felony conviction are much less likely to offer employment to someone who was convicted of a sex-related crime. This lack of access to social capital serves to exacerbate the offender's feelings of isolation, helplessness and hopelessness.

Church et al. (2008) developed the Community Attitudes Toward Sex Offenders Scale (CATSOS) and administered the instrument to a large number of college undergraduate students. An analysis of the data revealed that the majority of respondents expressed four core beliefs about sex offenders, ones that repeated the existing stereotypical assumptions of adult male registered sex offenders: (a) choose to be socially isolated; (b) have a low capacity to change due to the nature of their deviant attitudes and behaviors; (c) are dangerous (violent); and (d) are deviant in one or more other area of their lives. The undergraduate students reported that their perceptions were taken largely from media presentations, the way that offenders are depicted on television and in films, false information and innuendo.

Gaines (2009) discovered that the stigma assigned to adult male sex offenders frequently extends to their spouses, children, parents, siblings and their friends.

Interviews conducted with these secondary victims revealed that they have been shunned and subjected to harassing behaviors from members of their community.

Dornin (2010) cited a 2005 survey conducted by Levenson and Cotter with 135 Florida sex offenders who had been released from incarceration and placed under community control. They reported that 60% of the respondents experienced the onset of mental health problems, 57% could not locate affordable housing, 48% experienced serious financial setbacks, 30% were banned from living with a supportive family member, 28% were forced to move out of an apartment for which they had a valid rental agreement, 25% were not permitted to return to their family homes, and 22% were forced to move out of a home that they had owned prior to incarceration. The living restrictions included not residing in the same household as a minor child, or the inability to meet Florida's 1,000 foot rule. This rule prohibits an offender residing within 1,000 feet of a park, playground, school bus stop, or other place where minor children congregate. Anecdotal stories abound of people retaliating against sex offenders moving into their neighborhood by erecting a pseudo park (consisting of a tiny plot of grass enclosed by a fence and giving it a name), petitioning the city to erect a school bus stop or opening up a daycare center in a nearby home.

Harris and Hanson (2010) reported that the stigma assigned to adult male sex offenders led to long-term supervision and indeterminate sentencing in Canada. In the United States, it can be attributed to the creation of perpetual civil commitment, lifetime bans, geographical restrictions, and incarceration for periods often longer than those given to more violent criminals. The researchers learned that the fear and

misunderstanding surrounding adult male sex offenders has resulted in instances of vigilante-style violence, including murder.

Cook (2011) wrote that empirical research reveals that public notification laws serve to a minor degree to deter sex offenders and reduce re-offense rates. The researcher also learned that publishing offenders' personal information (name, address, age, and phone number) on a public registry and other electronic means has subjected them to increased incidence of harassment, deters their efforts to obtain gainful employment, and makes it much more difficult for them to effectively reintegrate back into society. Rogers and Ferguson (2011) cited a 1998 study by Champion that found judges and prosecutors as a rule perceived child molesters in a much more negative light than violent felons (including murders), and that their harsher sentencing guidelines reflected this bias.

Within the subculture of adult male sex offenders, those who commit adult-on-adult crimes tend to be perceived in a more favorable light than those who molest adolescents or commit crimes against the elderly and the disabled, with the harshest stigma reserved for those who molest minor children or commit incest.

While this chapter focuses on the perpetrator, it is important to acknowledge that victims of sexual abuse experience their own stigma, one unlike the victims of any other criminal activity. It remains a common misconception that the victim of rape somehow contributed to the attack, giving trial lawyers the right to require that victims describe their mode of dress at the time that the offense occurred, reveal her complete sexual history, delve into the victim's use of alcohol and drugs, and discuss any mental health treatment. There exists a belief among many therapists, counselors, case managers, child welfare specialists and law enforcement personnel who work with victims of sex-related

crimes that many offenses go unreported because victims fear the embarrassment and shame associated with having the highly personal aspects of their innermost lives being aired in a public forum.

Having conducted an in-depth presentation of the essence of criminality, the legal definition of a sex offense, various theories of deviance and the effects of stigmatization on the offender and victim it is time to discuss the various sexual offender typologies.

Sexual Offender Typologies

Cumming and McGrath (2005) have divided sex-related offenses into seven distinct types, with each containing a number of subtypes. The types are: adult male child molesters; adult male rapists; adult male hands-off sex offenders; adult male child pornographers; adult female sex offenders; and adolescent male sexual abusers.

Adult male child molesters are further divided into two subtypes, the *preferential* and the *situational*. The preferential child molester perpetrates solely on children, while the situational molester may also victimize other vulnerable persons, such as the physically or mentally disabled and the elderly (Cumming & McGrath, 2005; National Association of Forensic Counselors [NAFC], 2012).

Child molestation is classified as a pedophilia, a medical term for the sexual attraction to children; a sexual deviation. Pedophiles are almost exclusively male with onset in early puberty. The sexual activity may involve undressing a child and inappropriately looking at her or his body, exposing one's genitals to a child, masturbating in front of a child, touching or fondling a child, performing fellatio or cunnilingus on a child, or the penetration of the mouth, vagina or anus of a child with a finger, penis or any other object (NAFC, 2012).

Cumming and McGrath (2005) categorize adult male rapists as: *power-reassurance* (those who are unsure of their sexual adequacy, thus uses force to reassure him that he is adequate); *power-assertive* (does not doubt his sexual adequacy or masculinity, but uses rape to express dominance over women); *anger-retaliatory* (angry at women in general, and uses sex as a weapon to degrade and punish his victims); the *anger-excitement* subtype derives pleasure from the suffering of his victim, and is primarily motivated by inflicting pain; *opportunistic* (may, in the process of committing another crime, rape a woman who happens to be at the crime scene); and *gang rape*. Gang rape is defined as either involving the participation of two or more adult male offenders, typically with gang affiliation, or three or more gang members with one who is reluctant to participate - an individual that victims describe as somewhat protective or helpful – and is most likely to report the offense.

The National Association of Forensic Counselors (NAFC) (CSOTS seminar, 2012) more recently identified adult male rapists as consisting of three types. Type 1 is labeled the *anger* rapist, with type 2 a *power* rapist, and type 3 the *sadistic/ritualistic* rapist. The anger rapist, thought to be 25-40% of all rapists, are known to express their sexual behaviors by anger and rage, generally do not plan their offense, use physical force above what is needed to overcome their victims, tend to be verbally abusive, and often inflict severe pain on their victims to the point that they may require medical attention or hospitalization. The act of rape is generally explosive, does not last long, and involves more than one victim. The power rapist, considered to be 60-70% of all rapists, acts out his rape fantasies, uses physical force as needed, enjoys the power and control that he wields, and generally involves a single victim over a protracted period of time.

The third type, the sadistic/ritualistic rapist, is considered rare. Compelled to act out sexually aggressive behaviors, they are driven by violence and power, are generally impulsive and ritualistic in nature, and may murder their victims.

The National Association of Forensic Counselors (NAFC) (CSOTS seminar, 2012) described rapists as having strong deviant sexual arousal and poor impulse control, with a history of being the victim of physical, psychological, emotional or sexual abuse, and both a family and a personal history of alcohol or drug abuse. They often have an extensive criminal record and are much more likely to repeat their crime than any other category of sex offender.

The subtypes of adult male hands-off sex offenses, more commonly referred to as *non-contact offenses* (NAFC, 2012), have been identified as: the *exhibitionists* (those who find sexual arousal in the act of exposing their organs in inappropriate situations); the *voyeurs* (adult men who experience exotic excitement during the act of looking at unsuspecting women in various stages of undress, and go to some length to view their victims, such as climbing ladders to peer into bedroom or bathroom windows or by using mirrors to look up women's clothing); and the *frotteurs* (men who obtain sexual gratification from rubbing up against other people while fully clothed, typically women who are confined in crowded public transportation or shopping malls). (Cumming & McGrath, 2005; NAFC).

Research of adult male child pornographers conducted by Hernandez (2000) discovered that they fell within five distinct subtypes: the *opportunistic* (who generally have not committed any other crime, are reasonably well-adjusted, but may resort to viewing child pornography during a period of extreme distress); the *collector* (with no

prior criminal history, but with many psychosocial problems, they tend to be socially isolated and unable to sustain intimate adult relationships); *collector-molester* (meet the criteria for collectors but have also molested children); the *producer-profiteer* (the producers of child pornography and are frequently pedophiles, psychopaths, or both); and *travelers* (individuals who use the Internet to initiate contact with children with the goal of meeting them to engage in sexual activities).

Mathews, Mathews, and Speltz (1989) identified three subtypes of adult female sex offenders: the *teacher-lover* (adult women who engage in sexual activity with prepubescent or adolescent males while perceiving them as a peer and a lover, and are generally known to have a prior history of abuse by one or more adult males); *predisposed* (women who themselves are often victims of early childhood sexual abuse, and who receive emotional intimacy from sexual relations with prepubescent children); and *male-coerced* (dependent and nonassertive women who accept the subservient role of women in society, and whose victims are prepubescent children both internal and external to one's biological family).

Worling (2001) created a personality-based system of adolescent male sexual abuser subtypes, described as: *antisocial-compulsive* (sex-related offenses are part of an overall criminal behavioral pattern); *unusual-isolated* (adolescent males whose behaviors reflect emotional disturbance rather than criminality, and who experience a great deal of difficulty establishing intimate sexual and social relationships); and the *confident-aggressive* (they present as friendly, confident and optimistic, but later prove to be narcissistic and aggressive when people don't meet their needs and desires). Worling discovered that 70% of adolescent male sexual abusers were raised in impoverished

homes and poor neighborhoods, 63% were the victims of family dysfunction, 60% were identified as poor academic performers, 8% were rejected by their peers, and 4.6% were known to have gang affiliations. These factors place them at a high risk for continuing deviant behaviors into adulthood.

The NAFC (CSOTS seminar, 2012) identified a number of common characteristics among adult and adolescent female and male sex offenders. They were found to have been the victims of childhood abuse (mental, emotional, physical or sexual) and did not possess fully developed emotional and mental capacities. Many were diagnosed with one or more co-occurring disorder, were unable to establish and maintain intimate interpersonal relationships, and are thought to have victimized both children and adolescents. Adult and adolescent male sex offenders were discovered to have committed offenses against minor males more than against minor females.

To this point this dissertation identified the essence of criminality, what constitutes a sexual offense, theories of deviance, the effects of stigmatization, and sexual offender typologies. The next step is to address the development of sex offender legislation enacted to treat, monitor, control and restrict the movements of community-based adult male sex offenders.

Sex Offender Legislation

Demleitner (2002) found that the increasing severity of sex offender legislation in the United States occurred in three distinct phases. Phase I began during the victims' rights movement of the 1970s and continued into the 1980s, at a time when victims began demanding an increasing role in the criminal justice system, sought more effective treatment modalities, and called for tougher penalties for certain types of offenders. The

earliest victims' advocates were women's rights groups who, together with survivors of incest, were responsible for bringing the issue of child sexual abuse into the forefront of the nation's conscience, at a time when fear and anger toward sex offenders "had come to be characterized as a national crisis." Each group had its own agenda. Some called for stricter sentencing guidelines, while others sought financial compensation for victims and other groups requested emotional and psychological counseling for the victims.

Phase II occurred during the 1990s and involved the crafting of new or revised offender legislation, driven primarily by groups that had gained the attention of the media and were successful in accessing political power. Legislation enacted during this period was formed using two primary constructs: (a) the most publicized cases focused on victims who were attractive, middle class women and children; and (b) offenders were depicted as unattractive, lower class, white males who compulsively acted out their sexual desires and were highly likely to re-offend. During Phase II there was an increase in mandated community controls for adult male sex offenders released back into the community. The controls consisted of polygraph testing, driving logs, community notification, lifetime registration, and the advent of electronic monitoring.

During Phase III, commencing in 2001 and continuing to the present, the United States Congress directed the U. S. Sentencing Commission to create new categories of sex offenders and to increase the sentencing guidelines for the crimes of sexual assault, sexual exploitation, rape, and pornography. Demleitner (2002) discovered that the recommendations presented by the U. S. Sentencing Commission to the U. S. Congress were based largely on highly subjective anecdotal accounts collected from community action groups. The Commission was charged with failing to collect more objective data,

in the form of actual offense rates, types of sentences imposed, prior criminal history, and individual offender characteristics.

Public fear driven by mass media's intense focus on a series of particularly heinous sex-related crimes prompted lawmakers to enact legislation to protect members of society from what was perceived as an ever-increasing threat to public order (Bandy, 2007; Budd, 2011; Dobbins, 2010; Jessica's Law, 2012; Sample, 2001).

Levenson et al. (2007) wrote that the development of offender legislation evolved in an identifiable pattern: (a) random acts of violence, especially against children, garnered the media's attention much quicker than any other crimes; (b) members of society became alarmed at what they perceived as an increase in violent acts and the emotional, mental, and physical harm these crimes caused their victims; (c) the print and electronic media reported inaccurate facts about sex offenders; (d) the public expressed increasing anxiety and fear, and reacted by becoming over-protective of children and calling for immediate legislative action; and (e) lawmakers enacted legislation in response to society's concerns. The punitive nature of Florida's inaugural sex offender legislation has been attributed to the weight that elected officials placed on the subjective perceptions of criminal justice and child welfare personnel, while failing to review empirical research published by professionals who specialized in the study and treatment of adult male sex offenders (Levenson et al.).

The process from first draft to the enactment of a federal law is an arduous process that usually evolves over a three to five year period. This provides sufficient time for supporters, antagonists and legal counsel to study and prepare their briefs prior to its first public reading. Bandy (2007) reported that the Jacob Wetterling Crimes

Against Children and Sexually Violent Offender Registration Act, Megan's Law, and the Adam Walsh Child Protection and Safety Act (www.fd.org/odstb_AdamWalsh) circumvented the traditional process, allowing them to be fast-tracked into law in record time.

On October 22, 1989, 11-year-old Jacob Wetterling was abducted while he, his brother and a friend were riding their bicycles home from a convenience store in St. Joseph, Minnesota. Despite an immediate call to action by local law enforcement personnel, agents from the Federal Bureau of Investigation and hundreds of civilian volunteers, Jacob's body was never found. In January of 1990 his family members sought solace by creating the Jacob Wetterling Foundation. The Foundation's primary mission of "protecting children from sexual exploitation and abduction, through prevention education, victims' assistance and legislation aimed at sex offenders" (criminal.findlaw.com, 2012). In 1994 the Jacob Wetterling Crimes Against Children and Sex Offender Registration Act was enacted by the U. S. Congress. The Act mandated that each state create a sex offender registration with the purpose of monitoring the movements of all convicted sex offenders.

In 1996, the Jacob Wetterling Crimes Against Children and Sex Offender Registration Act was amended by Megan's Law and the Pam Lyncher Sex Offender Tracking and Identification Act. Megan's Law, the nation's first community notification law, was named in honor of Megan Kanka, a 7-year-old New Jersey girl who, in July of 1994, was kidnapped, sexually assaulted, and murdered. Community notification provides citizens with the offender's name, current address, date of birth, social security number, and a physical description or a recent photograph. In some communities it also

includes the offender's fingerprints, the specific offense for which convicted, and DNA identification.

Under the Pam Lyncher Sex Offender Tracking and Identification Act the Federal Bureau of Investigation was directed to establish a national database for the purpose of recording the names and addresses of all sex offenders released from prison. The Act further mandated lifetime registration for certain categories of sexual offenders. In 1996 President Clinton signed a federal version of the law that included sections of Megan's Law, the Jacob Wetterling Act and the Pam Lyncher Act, which became collectively known by many as Megan's Law. A key component of the new law was a requirement for all convicted sex offenders to register with their local law enforcement offices and department of corrections parole/probation officers within a specified period of time following release from incarceration.

In September of 2005 the State of Florida Legislature passed the Jessica Lundsford Act in honor of a nine-year-old Florida resident who was abducted, raped, and brutally murdered in February of 2005 (jessicalaw.com, 2012). The Act, more commonly referred to as "Jessica's Law", mandates that individuals convicted by the State of Florida for a sex-related offense: (a) serve a minimum sentence of 25 years and a maximum of life in prison for convicted first-time child sex offenders; (b) lifetime electronic monitoring for adults convicted of a lewd or lascivious act against a victim less than 12 years of age; and (c) life imprisonment with no chance of parole for those persons convicted of sexual battery or rape of a child less than 12 years old. A federal version of Jessica's Law has been crafted and proposed but has repeatedly stalled in the House of

Representatives and currently remains in limbo. In the interim, several states have adopted their own legislation, modeled primarily on the Jessica Lunsford Act.

The Adam Walsh Child Protection and Safety Act of 2006 established a national sex offender registry while making significant changes to legislation that regarding the punishment of perpetrators of crimes of sexual abuse, sexual exploitation, and the transportation of children for sexual purposes. The Act expanded federal jurisdiction over existing crimes, increased statutory minimum and maximum prison sentences, and established a three-tier system to differentiate between categories of offenses (Budd, 2011; Dobbins, 2010; Sample, 2001).

Under criteria established within the Adam Walsh Child Protection and Safety Act, a Tier I offender is an individual who is of: (a) a sex-related offense involving a sexual act or sexual contact with another; (b) specified crimes against minors; (c) specified federal crimes and military crimes; or (d) an attempt or a conspiracy to commit one of the aforementioned crimes. While specified foreign crimes and those involving consensual sexual contact are excluded from the Adam Walsh Act, certain juvenile adjudications are included. Tier I offenders are mandated to remain on their state's sex offender registry for a period of not less than 15 years. The offender may be released after 10 years if he was not arrested for any criminal activity during the 10-year period and meets other behavioral criteria.

A Tier II sex offender is an individual who has been convicted of an offense that is punishable by more than one year in prison if: (a) the crime is committed against a minor and is either comparable or more severe than a federal crime involving sex trafficking, coercion or enticement; (b) a minor child is transported for the purpose of

engaging in criminal sexual activity or abusive sexual contact; (c) a minor child is used in a sexual performance, soliciting a minor for prostitution, or the producing or distribution of child pornography; or (d) the conviction is for a sex-related crime while in a Tier I status or after the individual had previously been identified as a Tier I offender. A Tier II offender must remain on the sex offender registry for a period of not less than 25 years with no opportunity for early termination.

Tier III is the most serious classification under the Adam Walsh Act and includes sex offenders who are convicted of an offense that is punishable by more than one year in prison and: 1) is comparable to or more severe than a federal crime involving aggravated sexual abuse, sexual abuse, or abusive sexual contact with a minor under the age of 13; 2) involves the kidnapping of a minor, except in those cases involving non-custodial parent kidnapping; and 3) occurs after the offender has been identified as a Tier II sex offender. A Tier III offender must remain on the sex offender registry for life unless he is a juvenile, in which cases the registration period is 25 years if he does not commit another sex- or a non-sex-related offense during that 25-year period.

Sample (2011) reported that individual states have passed legislation that subjects adult male registered sex offenders to a number of additional restrictions. The legislation includes prohibitions against living in public housing or in housing areas that are occupied primarily by families with minor children. Some states ban registered sex offenders from attending on-campus courses at trade schools, colleges or universities where minor children attend classes. Most states prohibit offenders from taking up even temporary residence within 1,000 feet or more of a school, day care facility, school bus stop, public park, restaurant with a playground, or other places where minor children are

known to gather. Some communities have established an offender-free zone of up to 2,500 feet. There also exists bans on the possession of toys or any other objects that may be of interest to or attract minor children. While some states prohibit access to the Internet for any purpose, other states permit limited access to offenders who were not convicted of an Internet-related crime. There exist bans on the attendance at any family or social gathering where minor children may be present, throughout the offender's probationary period. The functions as a general rule include births, baptisms, school functions and graduation ceremonies, church gatherings, weddings, funerals, etc. All states require registered sex offenders to maintain driving logs and/or wear an electronic monitoring device.

A further prohibition found in all 50 states, under the umbrella of public safety legislation, mandates that the movement of and participation by registered sex offenders is closely monitored on Halloween. Each year all registered sex offenders and probationers not on the registry but court-mandated to participate in outpatient sex offender therapy are prohibited from: the display of Halloween decorations outside of their residence; the distribution of candy; wearing any article of clothing that may be perceived as a costume; and hosting or attending any celebration. All states further mandate a 6:00PM to 6:00AM curfew, with some states requiring police officers or probation and parole officers to conduct home visits of all offenders to ensure that they are in compliance with the curfew. Some local law enforcement agencies require registered sex offenders to place a "no candy at this residence" in their yard during Halloween (criminal.findlaw.com, 2012).

A number of states have enacted civil commitment laws, allowing for habitual sexual offenders or those convicted of particularly heinous crimes to be committed to a prison-like facility for an indefinite period of time. To secure release from the facility the offender is required to undergo an extensive psychosexual assessment and present his case before a board of review. In 1997 the U. S. Supreme Court, in *Kansas v. Hendricks*, ruled that civil commitment laws do *not* violate the Constitution double jeopardy or ex post facto clauses.

In the States of Florida and California, convicted sex offenders may be mandated to undergo injections of Depo Provera, an FDA-approved birth control drug - a process that is more familiarly known as “chemical castration.” The drug has proven to lower testosterone levels, which in turn inhibits one’s sexual urges. A regimen of Depo Provera injections may be ordered for repeat sex offenders, and occasionally for first-time offenders who have been diagnosed as having uncontrollable biological urges. A 1997 Texas law permitted the surgical castration of habitual sex offenders and by May of 2005 three sex offenders had voluntarily undergone the procedure. While a number of safeguards are in place to ensure that surgical castration is an action of last resort, the American Civil Liberties Union (ACLU) has repeatedly argued that chemical castration violates Eighth Amendment bans on cruel and unusual punishment (criminal.findlaw.com, 2012).

The AMBER (America’s Missing: Broadcast Emergency Response) Alert system was established in 2003 to expeditiously provide law enforcement agencies detailed information when a suspected child abduction occurs. The system was named in memory of Amber Hagerman, a 9-year-old girl who was abducted and murdered in Arlington,

Texas in 1996. An AMBER Alert requires the rapid and extensive distribution - via a myriad of electronic means - the name and description of the abducted child, a description of the abductor and the abductor's vehicle and the abductor's automobile license number.

An in-depth historical review of societal perceptions of sex offenders and sex offender legislation was necessary prior to introducing the focal point of this study: identifying, challenging and demystifying the innuendo, misinformation and negative stereotypes that surround and stigmatize all categories of sex offenders and their family members.

The Prevailing Myths

An extensive literature review identified seven problematic myths surrounding sex offenders and are presented in no particular order: sex offenders are a homogenous group; sex-related crimes continue to rise; once an offender, always an offender; perpetrators and victims are largely unknown to one another ("stranger danger"); sex offenders are violent criminals; women do not commit sex-related offenses; and treatment of sex offenders is ineffective.

Myth: Sex Offenders Are a Homogenous Group

Members of the news media are credited with creating society's perception that sex offenders are an easily-identifiable, homogenous group consisting primarily of adult male child molesters and rapists. The media is said to be the primary source of information for legislators, law enforcement personnel and child welfare workers who work with victims of sexual abuse (Bandy, 2007; Budd, 2011; Church et al., 2008; Cumming & McGrath, 2005; Freeman & Sandler, 2008; Gaines, 2009; Galeste, 2010;

Heil et al., 2003; Harris & Hanson, 2004; Katz-Schiavone et al., 2008; Magers, 2009; Quinn et al., 2004; Rogers & Ferguson, 2011).

Fact Heil, et al (2003) conducted a study of “crossover sexual offenses”, those in which the victims represented a wide range of socio-demographic factors. The study involved 223 incarcerated and 266 paroled sexual offenders, and revealed that a substantial number of offenders admitted to sexually assaulting both female and male children and adults. The offenders who were convicted of sexually assaulting children reported victimizing both relatives and nonrelatives, with Heil, et al (2003) concluding that “many offenders do not exclusively offend against a preferred victim type.”

A study conducted by Harris & Hanson (2004) discovered that among adult males who were convicted of a sex-related crime, 35% were charged with molesting minor male children, 24% were charged with rape, 16% for child molestation against minor female children, and 13% had been arrested for an incestuous act.

Church et al. (2008) reported that sex offenders are a heterogeneous group representing males and females, a wide range of age groups, all socioeconomic levels, the use of varying levels of coercion, the types of offenses they committed, their relationship to the victim, and with and without a history of victimization.

Magers (2009) studied a sample of 129 State of Kentucky registered sex offenders who were released from prison and later re-incarcerated for a non-sex-related offense. The researcher discovered that (adult male) “sex offenders engage in a variety of criminal behavior, and are a heterogeneous group.”

The National Forensic Training Institute (Certified Sex Offender Treatment Specialist Training, 2012) has challenged the myth that sex offenders consist of a

homogenous group with readily-identifiable characteristics. The NAFC discovered homogeneity among sex offenders in the types of DSM-IV-TR diagnosable co-occurring disorders that were present: Substance Abuse or Substance Dependence (70-85%); one or more paraphilia (60-70%); Antisocial Personality Disorder (60%); Obsessive-Compulsive Personality Disorder (25% with sexual addiction); Organic Brain Disorder (15-25%); Schizoaffective Personality Disorder (9-15%); Bipolar Disorder (8-12%); Borderline Personality Disorder (5%, generally found among incest offenders); Schizophrenia (4-6 %); Psychosis (4%); and Intermittent Explosive Disorder (2%). The study further reported that Psychopathy (5%) may overlap Antisocial Personality Disorder.

Myth: The Frequency of Sex Crimes Continues to Increase

An uninformed public, relying predominantly on media misinformation, are under the false impression that the incidence of sex-related crimes and the number of new offenders, continues to rise and present a serious threat to individual and community safety. This myth is credited with being the driving force behind the passage of legislation that further controls, monitors and punishes sex offenders. While the legislation is reportedly supported by a large percentage of the general public, of concern to those who treat and advocate for sex offenders is that the laws generalize to all male sex offenders, regardless of their crime (Collings, 2002; Horowitz, 2007; Jones et al., 2001; Katz-Schiavone et al., 2008; Levenson, 2008).

Fact: Jones et al. (2001) reported that data from Child Protective Service (CPS) agencies, nationwide, reported a decline of 39% in the number of sexual abuse cases from 1991 to 1999. Collings (2002) credited “restrictive stereotyping” by the media for unduly

influencing social perceptions of the incidence of child sexual abuse. Collings further wrote that when the media grossly inflates the actual number of child sexual abuse reports, “it is likely to create a non-supportive environment for abuse victims.”

Horowitz (2007) searched for articles appearing in a large volume of U. S. newspapers during the 15-year period 1991-2006, utilizing the key words “sex offender” and “sexual predator.” The researcher discovered that newspaper articles written about *sexual predators* increased from 107 in 1991 to 5,006 in 2006, a factor of almost 50, and articles written about *sex offenders* increased from 536 in 1991 to 15,558 in 2006, or a factor of 30. Conversely, during this same 15-year period the incidence of sex-related crimes, as reported by the U. S. Department of Justice, continued to decline: 2.2 per 1,000 persons age 12 and over reported being raped in 1991, while in 2006 the rate was 0.5 per 1,000; and 42.3 per 100,000 persons of all ages reported being raped in 1991, and in 2006 the rate was 31.7 per 100,000.

The media’s intense focus on particularly heinous child abductions and sexually-motivated murders is attributed to a public misconception that predators “are lurking in schoolyards and playgrounds”, increasing society’s fear and paranoia (Katz-Schiavone et al., 2008). Even when presented with research outcomes proving that the majority of convicted sex offenders are not violent criminals, many of those interviewed remained highly skeptical; unwilling or unable to abandon their negative stance (Katz-Schiavone et al, 2008).

The rate of sexually-violent crimes committed by adult male sex offenders in the United States continues to decline (Olver & Barlow, 2010, citing a Federal Bureau of Investigation 2009 Uniform Crime report). A similar decline in sexually-violent crimes

committed by adult male sex offenders has also been reported in Canada (Brennan & Taylor-Burns, 2008).

Levenson (2008) discovered that crimes of a sexual nature have declined substantially over the past decade. Arrests for rape have decreased steadily since 1991 and the rates of substantiated sexual abuse offenses dropped 51% from 1991 to 2005. The decline has been attributed to economic prosperity in the 1990s (which experienced a reduction in all categories of criminal activity), longer prison sentences for the more violent criminals, more effective community supervision measures, and improvements in how reports of abuse are investigated.

Budd (2011) cited a 2009 Federal Bureau of Investigation (FBI) Uniform Crime Report covering the years 1999 to 2008 that reported a 17.7% reduction in reports of forcible rape for adults 18 years of age and older and a 14.1% reduction in all sex-related crimes. Budd further cited a National Crime Victimization Survey that found that incidence of rape had declined by 60% from 1992 to 2001.

Myth: Once an Offender, Always an Offender

A highly publicized and often repeated belief frequently appearing in the print and electronic media is that individuals who commit sex-related crimes re-offend at a much higher rate than other categories of felons (Arkowitz & Lilienfeld, 2008; Bandy, 2007; Beck & Shipley, 1989; Budd, 2011; Crouch, 2011; Dornin, 2010; Fortney et al., 2007; Freeman & Sandler, 2008; Gaines, 2009; Galeste, 2010; Griffin & West, 2006; Grubin & Wingate, 1996; Hanson & Bussiere, 1998; Hanson & Mourton-Bourgon, 2005; Harris & Hanson, 2004; Katz-Schiavone et al., 2008; Langan & Cuniff 1992; Langevin et al., 2004; Levenson, 2008; Magers, 2009; Mann & Hanson, 2010; Marques, 1999; Melvin,

2011; Miethe, Olson, & Mitchell, 2006; Nunes et al., 2007; Parent, Guay, & Knight, 2011; Quinn et al., 2004; Quinsey, Rice, & Harris, 1995; Radford, 2006; Rogers & Ferguson, 2011; Sample, 2001; Sample & Bray, 2003; Sample & Bray, 2006; Sandler & Freeman, 2009; Singer, 2011; Turner & Rubin, 2002; Willis et al. 2010; Wollert & Crane, 2011).

Studies conducted by Eisenberg (1997), Freeman and Sandler (2008), Hanson and Bussiere (1998), and Harris and Hanson (2004) identified a number of commonalities among adult male sex offenders convicted more than once for committing the same or a similar sex-related offense. The offenders tended to be young, unknown to their victims, unemployed, never married, less educated, had past probation violations, possessed deviant sexual interests, and tended to select male victims. The researchers cautioned that repeat male sex offenders represented a small number of convicted sex offenders (*excluding* serial rapists).

Turner and Rubin (2002) offered that society's perception of offenders is simply, "once a sex offender, always a sex offender", and attributed this misperception to media reports of the most heinous crimes, especially those against children.

Arkowitz and Lilienfeld (2008) wrote that because people react to sex-related crimes with strong feelings of revulsion and repugnance, and have been repeatedly exposed to the heinous details of these crimes for protracted periods of time, 75% of the general public holds the belief, "once a sex offender, always a sex offender."

Fact: Hanson and Bussiere (1998) offered their belief that approximately 1-2% of adult males in any given society will be convicted of a single sex-related offense, with a small percentage committing a second or subsequent sex-related offense. Hanson and

Morton-Bourgon (2005) found that the majority of offenders do not commit a second sex-related offense.

Research conducted by Beck and Shipley (1989) discovered that only those felons released from prison after serving a sentence for murder had a lower rate of re-offense for the same crime (6.6%) than sex offenders. Criminals released for theft and burglary were found to have re-offense rates of 33.5% and 31.9%, respectively, while approximately 20% of felons who had been convicted of robbery later committed the same or a similar offense.

Studies have repeatedly found that most categories of adult male sex offenders are non-violent and do not re-offend. However, Langan and Cunniff (1992) found that serial rapists had either current or past convictions for violence, four or more convictions for sex- or non-sex-related offenses, and that all were under the age of 30 at the time of their sentencing. The researchers further learned that individuals convicted of rape, without a prior criminal history, were the least likely of all categories of felons to be re-arrested for the same offense.

A study of adult males convicted of child molestation and later arrested for a second or subsequent offense, conducted by Hanson, Steffy and Gauthier (1993), discovered that the majority of offenders had never been married or been in a long-term committed relationship.

Quinsey et al. (1995) tracked adult male sex offenders for five years following their release from incarceration, and discovered a recidivism rate (defined as being re-arrested for a sex- or a non-sex-related offense) of 35% for persons who victimized extra-familial females, 18% for extra-familial male victims, 23% for rapists, 20% for child

molesters, and a 9% recidivism rate for incest offenders. Hanson and Bussiere (1998) conducted a large-scale longitudinal study and found that 13% of child molesters and 19% of rapists had committed another sex-related offense within a five year period following their release from incarceration.

Grubin and Wingate (1996) studied sexual offense recidivism (in this context, defined as committing a second or subsequent sex-related crime) among convicted sex offenders in the United Kingdom and learned that: the public tends to label all sex offenders the same, not understanding the various categories; there does exist a higher risk for re-offending among certain types of offenders; and that public concern is not supported by empirical research. The researchers found that approximately 7-10% of offenders were reconvicted for a second or subsequent sex-related offense within five years, with a 13% reconviction rate for child molesters and a 19% reconviction rate for rapists. A follow-up study conducted by Dornin (2010) discovered a 1.2% offender re-imprisonment rate for a new sex crime two years following release from incarceration.

A National Center for Institutions and Alternatives Research Volunteers study (National Center for Institutions and Alternatives [NCIA], 1996) reported that 13% of first-time offenders were later rearrested for the same or a similar sex-related crime. The study further cited a Justice Department report that compared re-offense rate of sex offenders (5.3%) to those of burglars (74%), those who committed larceny (75%), grand theft auto (70%), and people who arrested for a DUI/DWI (51%). Both of the studies make it clear that sex offenders have a lower re-offense rate than other felons.

Grubin (1997) conducted a longitudinal study of sex offender recidivism rates over a 12 to 24 year period and found a 13% re-offense rate for the same or a similar sex-

related offense. Turner and Rubin (2002) identified a positive correlation between the length of time spent in prison and rates of recidivism. Offenders who served relatively short sentences were more susceptible to committing a later sex-related offense than those who completed a lengthier sentence. Turner and Rubin concluded that, “upwards of 65% (of all sex offenders) do *not* commit another sex offense.”

A 2003 report compiled by the U.S. Department of Justice reported that 5% of 9,691 adult male sex offenders committed another sex-related offense in a three-year follow-up study, and that the re-offense rate was not static across all offense categories. Adult males who committed a violent sex-related offense were much more likely to commit the same or a similar crime than non-violent or non-contact offenders.

Of more than 272,000 inmates released from prisons located in 15 states in 1994 the re-arrest rates for the same or a similar charge after a three year period were much higher for drug-related crimes (41%), burglary or theft (23%), and for assault (21%) than the re-offense rate for rape (2%) (Sample & Bray, 2003; 2006).

Harris and Hanson (2004) conducted a 15-year longitudinal study of sex offenders released back into the community and identified the recidivism rates for incestuous molesters was 13%, child molesters with girl victims was 16%, child molesters with boy victims was 35%, with rapists having a 24% recidivism rate. The researchers further discovered “very significant” differences in re-offense rates among those who were under the age of 50 (26%) and those who were over the age of 50 (12%) at the time of their release from prison. Harris and Hanson concluded that the younger an individual was at the time he committed an offense the more he was at risk for re-offending.

A meta-analysis of 82 recidivism studies involving more than 29,000 adult male sex offenders from Canada, the United States and Europe found the overall re-offense rate among sex offenders was 14% over a four to six year period (Hanson & Bussiere, 1998). A follow-up study conducted by Hanson and Morton-Bourgon (2005) found higher recidivism rates for rapists (18.9%) and 12.7% for child molesters.

Griffin and West (2006) discovered that, in comparison to other felons, sex offenders are less likely to commit a sex or non-sex related crime when placed in a supportive reintegration program immediately upon release from prison.

In a random sampling of more than 38,000 adult males released from prison, Miethe et al. (2006) discovered that those who committed sex-related crimes generally had a lower rate of recidivism than other felons, such as persons arrested for public disorder or crimes against property.

Radford (2006) found that the recidivism rates for sex-related offenses are relatively low compared to what is generally presented in the media. A 1994 U. S. Bureau of Justice longitudinal study that found 5% of adult male sex offenders were re-arrested for a subsequent sex offense within three years, and a 2003 U. S. Bureau of Justice study found a 3.3% re-offense rate among child molesters.

Nunes et al. (2007) studied the relationship between denial (refusing to accept responsibility for their offense, placing blame on others, etc.) and re-offense rates among adult male sexual offenders. They discovered that denial was associated with increased incidents of re-offending among low-risk offenders and decreased rates among high-risk offenders. The study further discovered that the perpetrator's relationship to the victim

was a valid predictor of re-offending; that perpetrators of incest who were in denial of their crime were at a much higher risk than those with extra-familial victims.

Arkowitz and Lilienfeld (2008) discovered in a 15-year longitudinal meta-analysis of recidivism rates among adult male sex offenders in Canada that there was an overall recidivism rate of 14% over a 5-6 year period, with varying rates among categories of offenses (13% rate for incest perpetrators, 24% for rapists, and 35% rate for child molesters of male victims). (It is noted that the authors did not differentiate between arrests for a sex- or a non-sex-related crime). The researchers compared these recidivism rates to persons arrested for other categories of crimes, and found that about two-thirds of male prisoners who were arrested for crimes other than sex-related offenses eventually robbed, mugged, burgled, or extorted others.

A longitudinal study conducted by Levenson (2008) revealed that: re-offending rates cannot be extrapolated across all categories of offenses; first-time offenders are much less likely to re-offend than repeat offenders; those who follow their probationary requirements re-offend less often than those who violate a condition of probation; individuals who actively participate in rehabilitation therapy are much less likely to re-offend than those who do not; and, sex offenders who perpetrate on strangers are more dangerous than those who perpetrate on family members.

Gaines (2009) tracked the social integration of sexually violent predators (SVPs) and found that all of the subjects reported a benefit to being labeled and required to register motivated them to be more conscious of their attitudes and behaviors so as not to re-offend.

Dornin (2010) conducted an analysis of outcome studies published by a number of states (Iowa, New York, California, Missouri, Alaska, Tennessee, West Virginia, and Indiana), and discovered low recidivism rates across the board. A 2000 Iowa Corrections study reported a 3% sex crime recidivism rate after 4.3 years in the community. A New York State study found a 2% re-offense rate after one year, 3% after two years, 6% after five years, and 8% after eight years in the community. In 2006 California found that 4.3% “of the worst-of-the-worst offenders” had committed new sex offenses after six years on the street.”

Dornin (2010) findings on number of states were revealing. The Missouri Department of Corrections (2007) tracked 3,166 offenders released from prison between 1990 and 2002, and reported a re-arrest rate of 12% for a new sex crime, with a reconviction rate of 10%. In 2007 the Alaska Judicial Council revealed that 3% of sex offenders had committed a new sex crime in their first three years following release from prison. The Tennessee Department of Safety reported a 4.7% re-offense rate after three years in the community. West Virginia found a “less than 2%” re-offense rate in a 2007 study of offenders released in 2001, 2002, and 2003.

The California Department of Corrections and Rehabilitation tracked 4,280 sex offenders paroled in 2003 and discovered that 2.43% had re-offended within the first year, 3.27% after two years, and 3.55% after three years. A 2009 Indiana Corrections report of offenders released in 2005 found a 1.05% re-offense rate within three years.

Adult male sex offenders who were released from prison and immediately provided with case management and other socially-integrative services were much less likely to commit a sex- or a non-sex-related crime (Willis et al., 2010).

A review of the 2000-2010 Proportion of Reported Crime in Florida by Type Report (Florida Department of Law Enforcement, 2010) revealed that forcible sex offenses experienced no more than one-tenth of one percent fluctuation from one year to the next, with 1.4% of the total crimes committed in 2000 (12,388 offenses) to 1.3% in 2010 (8,885 offenses). Perhaps a more serious threat to public safety is the crime of aggravated assault (non-sexual), which experienced a low of 8.6% of all crimes committed in 2009 (71,290 offenses) to a high of 9.9% in 2005 (82,622 offenses), with an average of 9.21% over the 11-year period of the study.

Crouch (2011) discovered that “the overall sex offender re-offense rate is actually lower than that of the general criminal population.” Budd (2011) discovered that adult male sex offenders are at a much higher risk for committing a non-sex-related crime than they are of committing a crime of a sexual nature.

Singer (2011) reported that less than 4% of offenders released from prison in the State of Maine between 2004 and 2006 committed a later sex-related crime within three years of their release, while approximately 21% of those who committed other felonious crimes were re-imprisoned during that same three year period.

Myth: “Stranger Danger”

Lanning (2010) conducted a study of 1950s and 1960s literature written about the sexual victimization of children and discovered that they focused on strangers as predators, described as “the dirty old man in the wrinkled raincoat approaching an innocent child at play.” The Federal Bureau of Investigation (FBI) fueled this misconception by producing and widely distributing a poster that depicted a man with his hat pulled down, lurking behind a tree, and holding a bag of candy; ostensibly lying in

wait to lure unsuspecting children. The top of the poster contained the words: “Boys and Girls, color the page, memorize the rules.”, and at the bottom, “For your protection, remember to turn down gifts from strangers, and refuse rides offered by strangers.”

The term “stranger danger” to describe the relationship between perpetrators and their victims continues to be used by the media, law enforcement, child welfare organizations, educators and others charged with protecting the nation’s youth. The repeated use of misinformation resulted in a flurry of programs that struck fear in parents, educators and children alike. It was purported that hordes of men lurked near schoolyards to entice unsuspecting children with candy, help in finding a lost pet or some other ruse that would allow them to isolate and sexually molest them (Bandy, 2007; Budd, 2011; Cheit, 2003; Chiotti, 2009; Crouch, 2011; CSOM, 2000; DeMichele, Payne, & Button, 2007; Gaines, 2009; Jones et al., 2001; Katz-Schiavone et al., 2008; LaFond, 2005; Levenson, 2008).

Radford (2006) wrote, “If you believe near-daily news stories, sexual predators lurk everywhere - in parks, at school, in the malls, even in teens’ computers.” The author credits “predator panic” being created by a variety of sources. Senate Majority Leader Bill Frist was quoted as stating, “The danger to teens is high.” Jim Acosta, a CBS broadcast correspondent stated, “When a child is missing, chances are good it was a convicted sex offender.” Chris Hansen on his Dateline NBS series “To Catch a Predator” stated, “the scope of the problem is immense”, (it) “seems to be getting worse”, and (it is) “a national epidemic.” An ABC News report informed listeners, “One in five children is now approached by online predators.” Radford (2006) reported that these public pronouncements had no factual basis.

Katz-Schiavone et al. (2008) cited a 2002 survey of male and female students attending a Colorado college, asking them to share their attitudes and beliefs about child molesters. The majority of interviewees operated under the misconceptions that a large percentage of child abusers and their victims were unknown to one another, and that all sex offenders use force, aggression, or threats in the commission of their crime. They reported obtaining this perception from electronic and print media reports.

Fact The myth that sex-related crimes are committed primarily by perpetrators unknown to their victims has been challenged and debunked numerous times (Cheit, 2003; Crouch, 2011; CSOM, 2000; DeMichele et al., 2007); LaFond, 2005; Levenson, 2008). A 2000 Center for Sex Offender Management (CSOM) study of adult and child victims cited a 1998 National Violence Against Women Survey that found 76% of the respondents reported being victimized either by current or former spouses, a live-in partner, or someone they had dated. A 1997 Bureau of Justice Statistics study reported that approximately 9 out of 10 adult women (90%) who were victims of sexual assault identified their assailant as someone with whom they had an established, trusting relationship.

The 2000 Center for Sex Offender Management (CSOM) study cited research conducted by Lieb, Quanse, and Berliner (1998) that identified approximately 60% of boys and 80% of girls who reported having been sexually assaulted were victimized by someone they or their family members had an established, trusting relationship with. The perpetrators were identified as relatives, caregivers, personal or family friends, or other adults charged with supervising them in their parents' absence.

A 2000 National Violence Against Women (NVAW) survey cited by Budd (2011) reported that 64% of women who reported being raped, physically assaulted or stalked by adult males were victimized by persons known to them; those with whom they shared an established, intimate interpersonal relationship (e.g. current or former spouses, cohabitating partners, boyfriends, or their dates).

The U. S. Department of Justice (Bureau of Justice Statistics, 2000) reported that 34% of sexually abused minor children were assaulted by relatives, about 49% of victims under the age of 6 were abused by a family member, 59% of perpetrators were known to the victims, and only 7% of sex crimes against minor children were perpetrated by strangers. The report offered that 73% of *adult* sexual assault victims were abused by relatives or acquaintances, and 27% of perpetrators were described as strangers.

Madu and Peltzer (2001) studied 414 secondary students in South Africa who were identified as victims of sexual abuse and found that “friend” was identified as the most frequently identified perpetrator, across all categories of abuse.

A Department of Justice study (U.S. Department of Justice, 2001) reported that one-in-five Internet users will become a victim of sexual predators. The survey asked 1,501 Americans aged 10 to 17 to describe their Internet experiences. One-in-five of the respondents reported that they had received an unwanted sexual solicitation within the past year. The term “sexual solicitation” was defined as “a request to engage in sexual activities or sexual talk, or to give personal sexual information that were unwanted or, whether wanted or not, made by an adult.” The validity of the survey is challenged in that a “yes” response was required even when one teen asked another if she or he was a

virgin. A large number of respondents answered this in the affirmative, which grossly distorted the survey's outcomes.

In 2003 Cheit suggested that the media exaggerated crimes involving victims and perpetrators as strangers, while ignoring proof of the increasing occurrence of intra-familial abuse. The author learned that research repeatedly showed that there existed an interpersonal relationship between male offenders and their victims (male and female), and that female sex offenders were more likely to abuse their own children, or children in their care, rather than a child unknown to them.

LaFond (2005) reported that 29% of sex crimes against children were committed by a biological father, 29% by a stepfather, 11% by other male relatives, and 30% by a male acquaintance of the child or the child's family (p. 23). DeMichele et al. (2007) cited a 2000 U.S. Office of Juvenile Justice and Delinquency Prevention report that estimated 96% of sex crimes targeting children were committed by someone known to them, with half of the perpetrators being family members who committed the offense in the victim's own home.

Levenson (2008) challenged the "stranger danger" myth, citing a 1997 study that only 7% of child sexual abuse cases involved a perpetrator unknown to the victim. The researcher discovered that: approximately 40% of sexual assaults took place in the victim's home and 20% occurred in the home of a friend, neighbor or relative; about 7% of all murders involve sexual assault; and the prevalence of sex-related murders declined by about 50% between the 1970s and mid-1990s. Levenson additionally learned that, during calendar year 2007, about 100 abductions of children by strangers were reported in the United State, while at the same time over 500 children under the age of 15 were

killed in accidents involving drunk drivers and over 1,100 children died from physical abuse or neglect at the hands of their parents or caregivers.

A 2009 national Crime Victimization Survey cited by Crouch (2011) reported that approximately 80% of adults and 93% of minors who reported being victims of sexual abuse knew the individuals who perpetrated against them.

The positive gains over the past 60 years to debunk this myth are stymied by the reality that, “the persistent voice of society luring us back to the simpler concept of ‘stranger danger’ never seems to go away” (Lanning, 2010).

Stop It Now! is a national organization with a mission of, “Preventing the sexual abuse of children by mobilizing adults, families and communities to take actions that protect children before they are harmed”, and with a vision that, “Adults (will) engage in respectful, caring behavior with children and other adults to create safe, stable and nurturing relationships for all children. Children (will) grow up free of trauma from any form of violence, including sexual abuse and exploitation” (Stop It Now! 2012). The organization has long held the belief that it is adult males known to their victims who are an ever-present danger.

The Stop It Now! organization educates parents, educators and others concerned with child safety the signs that may indicate an adult is at-risk for harming a child. The first indicator involves relationships: misses or ignores social cues about others’ personal or sexual limits and boundaries; often has a “special” child friend; spends most of his/her spare time with children and shows little interest in spending time with someone their own age and encourages silence and secrets in children. The second indicator involves sexual interactions: links sexuality and aggression in language or behavior; makes fun of

children's body parts, describes children with sexual words, or talks again and again about the sexual activities of children or teens; and has an interest in sexual fantasies involving children and seems unclear about what's appropriate with children; looks at child pornography; or asks adult partners to dress or act like a child or teen during sexual activity. The third indicator involves personal safety and responsibility: has been known to make poor decisions while misusing drugs or alcohol; justifies behavior, defends poor choices or harmful acts, blames others and refuses to accept responsibility for her or his actions; and minimizes hurtful or harmful behaviors when confronted, and denies harmfulness of actions or words despite a clear negative impact.

The unintended adverse effect of the "stranger danger" mentality was that it has deflected attention away from those who committed approximately 90% of crimes against children, which contributed to suspicious of false reports from victims who reported being sexually abused by their father, step-father, brother, grandfather, or other male with which they had an established interpersonal relationship.

Myth: Sex Offenders are Violent Criminals

Adult male sex offenders, regardless if they are violent or non-violent, contact or non-contact, tend to be stereotypically perceived by the public as being violent predators who inflict physical, emotional, and mental harm to their victims (Sample & Bray, 2003; Sample & Bray, 2006; Levenson (2008).

Quinn et al. (2004) discovered that violent offenders occasionally overlap with the rapist population, and that adult males who commit violent sexual offense are also violent in at least one other area of their lives. They learned that these individuals use violence as

a means to have their deviant needs met. The over-reporting of stories involving violent offenders may have contributed to this false perception.

Fact: Although depicted by the media as violent and dangerous criminals, the Bureau of Justice Statistics (2003), Sample (2006), and Sample and Bray (2003; 2006) found that adult male sex offenders are the least likely of all criminals to kill their victims.

Sample (2001) discovered that in the 1990s a sex offender were type cast as, “a compulsive individual whose behavior often escalates to lethal violent crime.” However, a study of law enforcement data collected during that same time frame revealed that the majority of sex offenders were not violent.

Levenson (2008) found that sex offenders who target strangers (estimated at 10% of all offenders) were more dangerous than those who knew their victims. The U. S. Department of Justice (Bureau of Justice Statistics, 2000) reported that sex offenders represent 5.3% of all persons arrested for violent acts.

Galeste (2010) cited a 1998 study conducted by Surette that credited the news media as being responsible for fueling the sex-offender-as-violent-criminal myth through the sensational reporting of particularly gruesome crimes, which in turn led to exaggerated fears of the increasing number of persons at risk for sexual victimization. Galeste (2010) cited a 2005 Gallup poll that found Americans were more concerned with child molesters (66%) than violent criminals (52%) or terrorists (36%).

Myth: Women Do Not Commit Sex-related Offenses

It is a widely-held societal belief that the nurturing and protective role of women inhibits women from committing crimes of a sexual nature (Applegate, et al, 2002;

Castleman, 2010; Chiotti, 2009; CSOM, 2007; Freeman & Sandler, 2008); Frei, 2008; Gaines, 2009; Johansson-Love & Fremouw, 2006; Matthews et al., 1989; Sandler & Freeman, 2009; Snyder & Sickmund, 2006; Vandiver & Kercher, 2004).

Chiotti (2009) wrote that, “Society, through male-dominance, male-identification, and male-centrality has established prescribed modes of behavior for men and women.” The author identified society’s traditional sex scripts, and in particular those that focus on women’s sexuality, as expecting females to be passive, harmless and innocent. Chiotti and others report that society is either unwilling or unable to consider that women may be capable of committing sexual offenses, especially against their own children. When females do commit violent acts their behaviors tend to be explained away as a natural reaction to their own childhood trauma, even though there is little research to support that women who commit sexual crimes were themselves victimized. Another factor that continues to support this myth is that women continue to be perceived as unable to be self-determining, given their societal roles as wives, mothers, sex objects and crime victims.

Fact: Until quite recently, most of the literature that addressed the nature of sex offenders focused primarily on males. Castleman (2010) suggested there is a consensus among researchers that the study of sex-related offenses committed by females is in its infancy.

In an effort to better understand the driving forces behind the behavior, Matthews et al. (1989) conducted studies of adult females convicted of sex-related offenses and identified them as belonging to three distinct categories: the *male-coerced* (passive and co-dependent females); a *predisposition* toward the behavior (histories of incestuous

sexual victimization, and deviant sexual fantasies); and the *teacher-lover* relationship. The latter describes adult women who perceived themselves as romantically involved with, or as assuming the role of sexual mentor for, an adolescent male. While they acknowledged engaging in sexual relations with minors, the women did not consider their behaviors to be criminal in nature.

A study conducted by Sandler and Freeman (2009) used a sample of 1,466 females who were convicted of a sexual offense in New York State and later released into the community, to ascertain re-offense rates. They discovered that the women re-offended at a much lower rate than male offenders, across all categories, and identified two characteristics among those who re-offended: (a) the type of crime for which they were initially arrested; and (b) the presence of a prior criminal history. It is important to note that the 1,466 study participants were a random sampling of convicted female sex offenders in just one state.

The Association for the Treatment of Sexual Abusers (ATSA, 2000) reported that females commit approximately 20% of all sex-related crimes against children in the U.S., and that while males commit the majority of all sex-related offenses against adults and minors, women are convicted primarily for crimes against children.

A U.S. Federal Bureau of Investigation (FBI, 1997) report indicated that approximately 8% of all sex-related offenses were committed by women, but did not differentiate between offenses against adults and those against children. The FBI report revealed that the highest prevalence of female sex-related offenses involved crimes against their own children or children under their care.

While females make up about 51% of the total U.S. population (U. S. Census Bureau, 2001), they constitute approximately 12% of all persons who commit violent crimes (Federal Bureau of Investigation, 2001), and these percentages continue to rise.

Vandiver and Kercher (2004) studied female sex offenders incarcerated in Texas and found that the majority of women victimized children and adolescents of both genders, and against persons related or otherwise under their care. The researchers identified characteristics common among the women: a history of childhood maltreatment, including sexual victimization; the evidence of an existing co-occurring disorder (a mental health and/or a substance abuse diagnosis); the inability to engage in healthy intimate relationships with other adults; and, perpetrating in concert with a male partner with whom they had an intimate relationship.

Johansson-Love and Fremouw (2006) wrote that, “For many years female sexual offending has been ignored or unrecognized” (p. 13). The increasing number of sex crimes committed by females is not limited to adults. Snyder and Sickmund (2006) studied juvenile arrest records for the years 1997 through 2002, and discovered a 6% increase in female-perpetrated rapes, a 62% increase in other violent sex offenses, and a 42% increase in convictions for non-violent sex offenses.

The Center for Sex Offender Management (CSOM) in its March 2007 newsletter reported that there were over 300 sex offender programs nationwide that provide services to adult women, more than 250 programs treating adolescent girls, and that the number of females enrolled in sex offender therapy “nearly doubled” within a single two-year period. The Center further reported that evidence indicates that female perpetrators are under-identified. They attribute this to societal and cultural stereotypes, professional

biases, and societal determinants that inhibit victims' disclosures of offenses perpetrated on them by women.

Frei (2008) identified a pattern of gender bias in the reporting of sex offenses in newspapers, which he attributed to being driven by decision-makers within the print and electronic media who operated under the premise that the detailed and repeated reporting of illicit sexual relationships between emotionally-damaged women and their under-age male victims greatly increased revenues. Frei further reported that gender bias exists throughout society. When under-age males are sexually manipulated by adult females they are portrayed as consenting participants who are minimally, if at all, affected by the relationship (e.g. female teacher and male student). Conversely, when adult males are caught engaging in illicit sexual relationships with an under-age females (male teacher and female student), they are vilified and labeled as deviants.

Chiotti (2009) cited two studies involving the interviewing of female and male college students, to obtain a sample of the prevalence of female-on-female and female-on-male sexual offenses. The first study conducted in 1981 involved 412 male and 540 female students and revealed that 60% of the male students and 10% of the female students reported having been sexually victimized by a female. The second study, consisting of 253 male and 329 female students in 1991, resulted in 58% of the interviewees reporting having been sexually abused by a female. Chiotti cautioned that these studies are not empirical research in that victim self-reporting often cannot be validated.

Castleman (2010) studied 50 media articles about teachers who committed sex-related offenses and discovered that, among female teachers: the average age was 31

(versus 37 for male teachers); all of the victims were males aged 11 to 17 (versus 85% female for male teachers); the word count for articles was not significantly disproportionate among male and female offenders; and that articles about female teachers were more prominently displayed in newspapers than those reporting on male teachers who sexually offended.

Castleman (2010) cited Dowden and Andrews and also Gottschalk as reporting that, “Females are the fastest growing segment of the correctional population” and “The number of women in U.S. prisons has risen more than eight-fold since 1980.” The disproportionately lower arrest rates for females was attributed to police favoritism, biased law enforcement practices, and leniency shown to women by law enforcement personnel, all of which were attributed to misguided “chivalry” and “paternalism.”

Myth: Treatment is Ineffective

The myth that sex offender treatment is ineffective in reducing re-offense rates and in helping convicted sex offenders to lead a more productive, crime-free life persists among legislators, law enforcement personnel, and those who advocate for child welfare. This belief has no basis in fact with origins that are difficult to trace but may have been borne of anecdotal accounts of repeat offenders.

Fact: A number of outcome studies repeatedly prove that efficacious treatment programs do reduce the risk of re-offending or being arrested for a non-sex-related offense (ATSA, 2000; Dornin, 2010; Gaines, 2000; Hanson & Bussiere, 1998; Hanson et al., 2002; Horowitz, 2007; Lieb, Quinsey, & Berliner, 1998; Marques, 1999; Melvin, 2011; Quinn et al., 2004; Willis et al., 2010).

As early as 1996 an NCIA Research Volunteers Draft Report revealed that, with treatment, a sex offender is able to come to terms with the posttraumatic stress that he caused his victim and perhaps to the victim's family and others. Effective treatment programs focused on helping the offender develop victim empathy and teach him effective means of atoning for the psychological damage that he has caused.

Lieb et al. (1998) conducted a meta-analysis of treatment outcomes and concluded that programs that are empirically based, offense-specific, and comprehensive in nature do contribute to reducing the re-offense rate for all categories of offender. Hanson and Bussiere (1998) reported that sex offenders who did not participate in therapy, and those who failed to complete their treatment objectives, were at increased risk for committing later crimes, both of a sex- and a non-sex nature.

Marques (1999) reported on the California Sex Offender Treatment and Evaluation Project (SOTEP), a 10-year longitudinal research program. The author compared the outcomes between two control groups (one volunteer and one non-volunteer) and a treatment group. Child molesters in treatment had a 13% sex re-offense rate, compared with 16% and 29% for the control groups. Among rapists, the re-offense rate for those in treatment was 10.7%, compared with 17.5% and 10% for the control groups. Marques (1999) learned that rapists were at their highest risk for re-offending during the first year of their release into the community, with violent criminals peaking during year two and then dramatically dropping off, and sex offenders peaking during year three.

A 2000 Association for the Treatment of Sexual Abusers (ATSA) study discovered that treatment programs following incarceration contribute significantly to

community safety; that offenders who actively participate in these programs are less likely to re-offend than those who do not participate in aftercare. The Association noted that treatment efficacy was predicated on key factors: the type of sexual offender; treatment modalities employed; and the community supervision provided by probation and parole. The most efficacious treatment programs were identified as those that employed cognitive-behavioral, relapse prevention, psycho-educational, psycho-dynamic, and/or pharmacological interventions.

The 2000 ATSA report further cited a number of studies conducted by the States of Vermont, Colorado, and Minnesota. A 2000 Vermont Department of Corrections report found a 3.8% re-offense rate for those who completed a formal program, and a 22.4% rate for non-participants. A 2006 Vermont follow-up study reported a 5.4% sex-related crime rate for program participants and a 30% rate for those who did not receive treatment. A 2003 Colorado study reported a 5.3% re-arrest rate for a new sex crime after three years in the community and that “each month an inmate took part in the intensive therapeutic community for sex offenders behind the walls reduced by 1% his risk of committing a later sex crime.” A 2009 Minnesota Department of Corrections report found that offenders who successfully completed treatment experienced a 27% lower sex crime re-offense rate than a non-treatment group.

A prison-based treatment program, using either cognitive-behavioral or relapse prevention methodologies, were proven to be efficacious and cost-effective, especially when compared to the costs associated with re-incarceration for adult male sex offenders who did not receive formal treatment (Shanahan & Donato, 2001).

Hanson and Morton-Bourgon (2009) followed a group of sex offenders that received formal treatment following release from incarceration and another group that did not receive treatment. They found that the untreated group experienced a 17% re-offense rate, with the treated group experiencing a 10% re-offense rate. McClatchy (2006) discovered that approximately 3.3% of those who participated in formal counseling following release from incarceration were rearrested for the same crime within a three year period. Even when moderate levels of cognitive behavioral and relapse prevention treatment methodologies were utilized it has resulted in at least some reduction in recidivism rates (Quinn et al., 2004).

Horowitz (2007) found that, although the American Psychiatric Association advocates for in-prison treatment for convicted sex offenders and empirical research has repeatedly proven that treatment is linked to lower recidivism rates, most states offer no therapeutic services for incarcerated sex offenders. The researcher discovered that those who advocate for mental health or social service treatment for incarcerated sex offenders are also met with negative reactions from the general public. From a civil liberties perspective, “mental health treatment can prevent recidivism, and advocates for therapeutic jurisprudence argue that treating sex offenders in specialized courts or outpatient programs can be immensely effective and Constitutionally sound” (Horowitz).

Dornin (2010) conducted an analysis of outcome studies published by a number of states (Alaska, California, Indiana, Iowa, Missouri, New York, Tennessee, and West Virginia), and discovered a pattern of low recidivism rates. A 2000 Iowa Corrections study reported a 3% sex crime recidivism rate after 4.3 years in the community. A New York State study found a 2% re-offense rate after one year, 3% after two years, 6% after

five years, and 8% after eight years in the community. In 2006 California found that 4.3% “of the worst-of-the-worst offenders had committed new sex offenses after six years on the streets.” The Missouri Department of Corrections (2007) tracked 3,166 offenders released from prison between 1990 and 2002, and reported a re-arrest rate of 12% for a new sex crime, with a reconviction rate of 10%. In 2007 the Alaska Judicial Council revealed that 3% of sex offenders had committed a new sex crime in their first three years following release from prison. The Tennessee Department of Safety reported a 4.7% re-offense rate after three years in the community. A West Virginia study found a ‘less than 2%’ re-offense rate in a 2007 study of offenders released in 2001, 2002, and 2003. The California Department of Corrections and Rehabilitation tracked 4,280 sex offenders paroled in 2003 and discovered that 2.43% had re-offended within the first year, 3.27% after two years, and 3.55% after three years. A 2009 Indiana Corrections report of offenders released in 2005 found a 1.05% re-offense rate within three years following release from incarceration.

Willis et al. (2010) learned that the re-offense rate for adult male sex offenders was extremely low for those who received treatment immediately upon their release from incarceration. Successful programs consisted of supportive re-entry services, case management, supported employment, educational opportunities, the development of loving interpersonal relationships, and respect shown by mental health professionals, family members, and members of the public. Willis et al. identified *desistance theory*, the process of ceasing sexual and general offending and becoming a productive member of society, as being “the subject of intense criminological research over the last 80 years or so.”

Melvin (2011) cited information provided by Seattle Police Department Detective Bob Shilling, the keynote speaker at a training conference in San Mateo, California held by the California Coalition on Sexual Offending. Shilling worked for 21 years as a sex crimes detective, and was a member of Washington State's initiative to establish a prototype resident notification program when offenders move into a neighborhood. He stated, "Offenders need stability", and that a community integration approach greatly reduces recidivism rates.

The Origins of the Myths

While a number of empirical research articles published over the past decade have repeatedly challenged the media-driven perceptions of sex offenders, these findings are rarely reported by the media (Brown, Deakin, & Spencer, 2008; Fortney et al., 2007; Galeste, 2010; Leveson et al., 2008; Reiner, 2002; Weitzer & Kubrin, 2004; Zarate, 2007). It is believed that media outlets shy away from more balanced reporting of sex-related crimes and their perpetrators lest they be perceived as advocating for the rights of sex offenders.

Weekes et al. (1995) reported that correctional officers perceive sex offenders in a much more negative light than other felons, and that their perceptions evolved from media representations, the low status that sex offenders have among all felons and their personal biases.

Jones et al. (2001) discovered that, even when provided with empirical research to the contrary, legislators are hesitant to amend existing offender legislation. The authors posit that the possible reasons for lack of attention to this issue may be a lack of faith in the data systems (not all state data is reliable, and there is a lack of common definitions

within the system), lack of funding for data interpretation, lack of an evaluation orientation (the field of child maltreatment has a weak evaluation and research orientation), and fear that if declines in sex offending cases are publicized policy makers may use the data as an excuse to reduce funding.

Thakker and Durrant (2003) analyzed the extent and nature of New Zealand newspaper coverage of sex offenders. They wrote, “News coverage of crime can, potentially, exert an influence on public opinion.” The researchers drew a correlation between a dramatic increase in media coverage of horrific sex-related offenses and the public’s growing perception that there existed an epidemic of “sex fiends” or “sex beasts.” They discovered that the primary source of information for news articles were persons employed within the legal justice system (police, lawyers, and judges), with little or no input from mental health professionals or academics.

Quinn et al. (2004) posited that society’s reaction to sex offenders is based on the public’s need for assurance of their personal safety, pressure on elected officials to meet these needs through legislative actions, increasingly sensationalized media coverage, highly distorted media reports of re-offense rates, and parental anxiety over how to protect their children in what is perceived as a much more dangerous world than the one within which they were raised. Quinn et al. identified four underlying sociological themes that connect these forces: (a) Inclusive Labeling; (b) Protection of Society and Victims; (c) Census Building and Solidarity Enhancement; and 4(d) Sacred Taboos.

Inclusive labeling is defined as the tendency to consider all sex offenders as predators, failing to consider that sex-related offenses also include consensual acts between minors, and non-contact offenses such as viewing pornography or engaging in

sexually-explicit conversations on the internet. *Protection of society and victims* has effectively swung the legal pendulum from protecting the rights of individual citizens to the protection of society as a whole, while increasing the rights of defendants and ensuring that retribution is the main strategy for controlling crime. *Consensus building and solidarity enhancement* infers that there has coalesced a cultural belief that all sex offenders are unredeemable predators. And, while other categories of crimes are beneficiaries of restorative justice programs, there exist few factions that will risk advocating for the rights of sex offenders. *Sacred taboos* ensure that citizens remain within a range of acceptable behaviors, and that there are consequences for violating the taboos. While rapists, pedophiles, and those who commit incest violate American sacred taboos, the “sex offender” label is equally applied to the 17- or 18-year-old who engages in “consensual” sexual relations with a “victim” who is 15 or 16 years of age. It is at this point that taboos become blurred, in the minds of the citizenry, those empowered to enforce laws, mental health professionals, and the judiciary.

Weitzer and Kubrin (2004) reported that endless updates of crime-related stories of a sexual nature contributed to a distorted view, which has in turn instilled baseless fear among readers and viewers. The researchers posit that television shows contribute more to an individual’s perception of reality than national news: television has a stronger emotive influence than radio or print media; television shows are more creative out of necessity as they rely heavily on ratings to remain viable; and large metropolitan areas have a vast media presence, thus must aggressively compete for audience share.

A study conducted by Craig (2005) revealed that the attitude of society in general is much more negative toward sex offenders than other criminals, and that this attitude has altered only slightly over time.

John Walsh is the founder of the National Center for Missing and Exploited Children, the father of Adam Walsh for whom the Child Protection and Safety Act was named, and considered by many as the national spokesperson for victims of sexual abuse. In 2005 Walsh issued the following statement: “Legislators must revamp our current laws in order to provide a more comprehensive way of tracking down the hundreds of thousands of child sexual predators who live among us.” (Horowitz, 2007). As host of the highly popular television show, “America’s Most Wanted”, Walsh can influence millions of viewers.

Sample and Kadleck (2006) identified 3,633 news articles in three Midwestern newspapers that reported crimes of a sex-related nature and found a 128% increase in exposure. The articles contained repetitive themes that inferred a high recidivism rate and reported that punishment and rehabilitation were ineffective in reducing recidivism. An inordinate number of articles were found to place a greater degree of emphasis on crimes involving sexually-motivated homicides than those of a non-sexual nature. Sample and Kadleck (2006) drew a correlation between the increased frequency of media reports and citizens’ reports of heightened awareness, concern, fear, and anxiety over perceived increases in sexual violence.

Sample and Kadleck (2006) conducted interviews with 25 politicians in Illinois who shared a common belief that sex-related offenses were on the rise, and that offenders

are compulsive, persistent, and irredeemable individuals. The politicians cited their primary source of knowledge as “the media.”

Radford (2006) wrote that a relatively few yet high-profile cases involving sexual predators have created public fear resulting in, “an unprecedented slate of new laws” to provide society with a false sense of security. The researcher found no evidence to support the belief that incidents of sexual abuse have become “a national epidemic”, as reported by Chris Hansen, host of Dateline NBC’s television show “To Catch a Predator.” Hansen was quoted as informing his audience that, “the scope of the problem is immense” and (it) “seems to be getting worse.” During a May 3 2006 ABC News broadcast millions of Americans were informed that, “one-in-five children is now approached by online predators.” The newscaster reportedly obtained this information from an Internet source, adding to the already existing fear, anxiety and general unease caused by unreliable and invalidated resources.

Reiner (2002) reported that while the media cannot justifiably be charged with contributing to an increase in criminal activity, feeding on public fears has generated public support for harsher and more restrictive legislation to further punish and control the movements of convicted sex offenders.

DeMichele et al. (2007) offered that “few policy areas are generating more excitement, media coverage, and political concern than those related to crime and justice” (and) “this media attention fosters a sensationalized perception of sex offender issues, which potentially fosters an emotionally laden policymaking environment.”

Zarate (2007) reported that people in western cultures are highly vulnerable to distortions of criminal activity and that these distortions have evolved from repetitive

airings on television and radio, newspaper articles, and more recently through the internet. Examples are provided by Fox, Van Sickle, and Steeiger (2007) who found that news articles about the Menendez brothers' murder trial spanned a period of 70 months, coverage of the O. J. Simpson murder trial could be found in various media outlets over a 33 month period, and the Rodney King beating trial was reported on over a period of 25 months.

Levenson et al. (2007) conducted a survey in 2005 of 193 residents of driving age who lived in Melbourne, Florida. Females represented 57% of the sample, with a mean age of 37 years, an average of 14 years of education, and a median income between \$30,000 and \$40,000. The ethnicity of respondents was said to be representative of the general population. Seventy-four percent of respondents believed that 76% of child molesters and 74% of rapists end up re-offending. The respondents also believed that only 46% of sex offenders come to the attention of authorities, meaning that 54% of sex crimes go unreported. None of the respondents could cite valid sources for these beliefs.

Surette (2007) has been credited with coining the term "infotainment" to describe crime shows on television that create an audience reality that blurs the lines that separate entertainment and information; fiction from fact.

Horowitz (2007) offered that sex offenders are the victims of media hysteria and that federal child protection legislation enacted in 1978 evolved from a misguided belief that an alarming number of children were being abducted for the purpose of performing in the child pornography industry. In reality, most missing children are runaways, and the majority of child abductions are committed by a non-custodial parent. The researcher's analysis of newspaper stories containing the terms "sex offender" or "sexual

predator” in their title revealed that these articles increased from 107 in 1991 to 5,006 in 2006, fueling the public’s misperception that sex-related crimes were of epidemic proportions. Horowitz stated that, “the relentless coverage of sex offenders creates conditions ripe for false allegations, because the American public believes that violent and predatory sex offenders lurk on every corner.”

Katz-Schiavone et al. (2008) conducted an online sexual violence awareness survey posted on a nation-wide community message board spread among 15 states. They learned that 43% of respondents received their information from television, 29% from newspapers, 10% from magazines, and 9% from radio sources, 9% from school, 10% from friends and 7% from family members. The Internet was identified as an increasing source of information for 38% of respondents. The authors discovered that 98% of respondents believed that first-time sex offenders would eventually re-offend, 84% were certain that juvenile offenders who were victims of abuse would grow up to be adult offenders, and that 66% believed treatment is ineffective in rehabilitating sex offenders.

Petrunik and Deutschmann (2008) examined the differences in criminal justice and community attitudes toward sex offenders between Europe and North America. They found that while Europeans tend to be more accepting of offender rehabilitation and societal reintegration, their public safety laws have been based on the same premise as those in Canada, Mexico and the United States (public fear and misunderstanding, high profile cases, and anecdotal reports).

Cook and Lane (2008) conducted a survey of Florida politicians and learned that 61% of respondents obtained most of their knowledge about offender issues from media reports, with 87% stating that their constituents’ views on a particular issue were largely

responsible for how they voted on policies. Essentially, if their constituents voiced concerns about child molestation, abductions, and other sex-related crimes, the legislators felt compelled to support legislation that punished and restricted the movements of offenders.

Mass media (print and electronic) have traditionally portrayed those who commit sex-related crimes as “predators”, “monsters”, or “psychopaths” (Olver & Barlow, 2010). These skewed portrayals are perpetuated by repeated appearances in films, on evening news broadcasts, in newspaper articles, and in crime-related television shows (Fortney et al., 2007; Greer, 2003; Reiner, 2002; Sample, 2001).

Dreilling (2010) discovered that it is an ill-informed public that continues to perpetuate these negative myths toward sex offenders and that this behavior is not unique to the United States. Community surveys conducted throughout England and Wales identified similarly low levels of knowledge about policies related to sex-offenses.

Willis et al. (2010) offered that while the media tends to label all sex offenders as “unpredictable, evil, and very dangerous”, individuals who are well-versed in science-based offender research possessed a more objective perspective.

Olver and Barlow (2010) offered that the public’s stereotypical assumptions of all categories of sex offender, whether violent or non-violent, contact or non-contact, can be attributed to the media’s repeated use of “predator”, “monster”, or “psychopath” when covering sex-related crimes. The sensationalized reporting of particularly brutal crimes, and unfair media focus on the relatively few offenders who commit a second or subsequent crime also contribute to society’s perceptions.

Galeste (2010) wrote that, “Individual sex offender policies were also found to be statistically related to the presentation of sex offender myths in newspaper articles”, the media habitually portrayed images of offenders based on irrational beliefs rather than empirical research, and an inordinate number of public policies have been developed based solely on these beliefs. Galeste’s study identified crime as the number one topic on all the major television networks during the 1990s, leading viewers to believe that sex-related crimes were growing at an alarming rate. Widely-held sex offender myths were also present in newspaper articles that mentioned offender residency restrictions.

Willis et al. (2010) found that researchers have repeatedly found society’s attitudes and behaviors toward sex offenders as being much more negative and discriminatory than that toward any other group of criminals.

Myths and assumptions regarding sex offenders are not restricted to the general public. Levenson, Fortney, and Baker (2010) sought the views of 261 Florida-based professionals who work with sex offenders regarding offender notification policies and other issues. They discovered that: more than half of the interviewees would support more stringent policies, in the absence of scientific evidence of their effectiveness; the majority suspected that notification did not significantly decrease sexual abuse; those working with victims of sexual abuse held a much more negative view of offenders than those working primarily with offenders; the majority of respondents supported the benefits of therapeutic interventions; and one quarter expressed some discomfort with offenders residing within their own communities.

Dreiling (2010) utilized Standpoint Theory to explain public policies that were derived from misinformation. The theory explains how individual world views

consisting of activities, viewpoints, and experiences influence society's construction of reality. Thus, if a large or a highly vocal segment of society believes that there is a proliferation of sex-related crimes, it pushes fear-driven legislation to the forefront. Dreiling further wrote that what occasionally follows is science-based research that results in the amendment or redaction of the original legislation. Changing the public's construction of reality will take a long period of time and will not occur in the immediate future.

McNaughton-Cassill (2001) reported that repetitive exposure to misrepresentations of sex offenders in crime shows, combined with "inflexible cognitions and irrational beliefs", has fed and increased society's growing fear and anxiety.

Rogers and Ferguson (2011) surveyed 355 male and female undergraduate students in an introductory psychology course at a large Midwestern public university. They distributed two vignettes, one describing a non-sexual crime and the other a sex-related crime, and asked the participants to mete out the appropriate punishment for each offense. The punishment assigned to the sex offender was much stronger than that doled out to the non-sex offender, inferring that "moral panic" may explain the harsher punishment assigned to the sex offender. The moral panic theory promotes the belief that certain types of offenses elicit much stronger, more negative emotions (fear, anger, anxiety) and cognitive (punishment and control) responses than other crimes. Rogers and Ferguson (2011) determined that, lacking any supportive data upon which to make an objective decision, individuals tend to make choices based on their perception of how others in their society would react to the same situation.

Crouch (2011) called for a cessation of the media-driven fear and anxiety that has led to enacting legislation purported to protect society but in reality serve to seek out and punish the offender. The researcher discovered that legislative actions have not contributed significantly either to a reduction in crime or an increase in public safety.

The “Family Watchdog” website (2012) contains the warning, “Family Watchdog makes no representation, implied or expressed, that all information placed on this web site is accurate”, yet goes on to report the following information: 1 in 4 girls and 1 in 6 boys will be molested before their 18th birthday; the typical sexual predator will assault 117 times before being caught; the re-arrest rate for convicted child molesters is 52%; and that 90% of all sexual assaults against children are committed by someone whom the victim knew. All but the latter claim are not supported by scientific research.

The National Alert Registry (NAR) was formed for the purpose of “making readily available to all citizens a sex offender search” in all 50 states (NAR, 2012). The information posted on the organization’s website informs the reader that: over two thousand missing children are reported *every day* in the United States (inferring that a number of them are abducted by child molesters); the chances of a child residing in the U.S. being the victim of a sexual predator is 1 in 3; convicted rapists report that 66% of their victims were under the age of 18, and 58% said their victims were age 12 or under; there are over 374, 270 registered sex offenders in the United States; 8 out of 10 rapists are released on bail prior to going to trial; and the typical sex offender molests an average of 117 children, most of whom do not report the offense. The National Alert Registry (NAR) did not cite the sources for their information.

Predicting Re-offense Rates

While the aforementioned research repeatedly shows that sex offenders, as a group, are less likely to re-offend than all other categories of felons, and that re-offense rates are much lower than what is presented by the media, some believe that we are not doing enough to reduce re-offense rates. Grubin and Wingate (1996) reported that there are predictive factors that can be used to identify which sex offenders are at a high risk for re-offending, and suggest that these factors may be used to identify prepubescent and adolescent males who present as being at risk for committing a sex-related crime.

Adult males convicted of child molestation have been identified as a high risk population based on documented and self-reports of having committed prior (reported and unreported) sex offenses against children, and a pattern of inability or unwillingness to sustain legitimate, healthy, adult sexual relationships. Grubin and Wingate (1996) offered that never having been married or been involved in a long-term committed relationship is a strong indicator that an adult male child molester will continue to molest. This belief is predicated on the knowledge that these individuals lack the emotional support provided by a spouse or significant other that help decrease feelings of loneliness, inadequacy and rejection.

Grubin and Wingate (1996) further found that convicted adult male rapists were found to have a pattern of violent behavior, committed both sex- and no-sex-related crimes, and were under the age of 30 at the time of their first conviction. Adult males convicted of exhibitionism were found to be at a high risk for increasing their deviant behavior by committing a sex-related contact offense if they had a conduct or personality disorder in childhood, were convicted at an early age, participated in some other criminal

activity, and if they experienced conflicts in their interpersonal relationships. An individual's age is considered a valid predictor of re-offending; that is, the younger an offender is at the onset of a deviant behavior, the greater the odds are that he will continue that behavior.

CHAPTER THREE: METHODOLOGY

This chapter reviews the methodological approach used in this study, beginning with a discussion of how a qualitative approach was selected and its pertinence to research of this kind. Next, it addresses how participants were selected, then the relationship between participant and research in qualitative studies. All previously mentioned topics led to the research questions and are followed by methodological assumptions and limitations, procedures, and the plan used for data analysis.

Research Design

Patton (2002) identified three kinds of qualitative data: interviews; observations; and documents. In the case of this study, interviews were selected as the most effective method to collect data. The interviews consisted of open-ended questions that captured the interviewees' experiences, perceptions and feelings related to the stigma of being an adult male registered sex offender. Qualitative research was identified as the most efficacious method to achieve this study's goals: (a) identify society's core beliefs about adult male registered sex offenders; (b) identify the primary sources from which society obtains its attitudes and behaviors toward adult male registered sex offenders; (c) compare these core beliefs to findings contained in empirical research; (d) obtain the experiences, perceptions and feelings from a random sampling of adult male registered sex offenders in outpatient therapy; and (e) present a more objective view of adult male registered sex offenders.

Hoyt and Bhati (2007) identified three core beliefs about the use of qualitative studies. First, it is believed that some phenomena cannot be adequately measured or

explained through quantitative means. The second belief is that qualitative inquiry allows researchers to use smaller samples, which make them more manageable to the researcher while ensuring that descriptive data is obtained. Finally, diverse populations can be better represented through the use of qualitative research interviews. Statistical data does not capture the impact that cultural beliefs, laws, and social stigma have on an offender and his family members.

Patton (2002) wrote that qualitative research addresses the context of one's experiences in a natural setting, which contributes to drawing meaningful connections to the topic under investigation. Patton (2002) further wrote that a strength attributed to qualitative research is that the participants' detailed accounts of their life experiences have the potential for being generalized to the population being studied.

Selection of Subjects

There are currently forty-eight adult male sex offenders in community based outpatient sex offender therapy at a clinic in southwest Florida. Participants must have been in therapy at this clinic for a minimum of two years. Selection bias has been reduced by randomly assigning numbers to the remaining clients and selecting fifteen from that number. In the event that a participant later drops out of the study for any reason, the researcher will select a replacement from the remaining pool of volunteers.

Instrumentation

Ten open-ended questions have been formulated specifically for this study with the intent of identifying the tangible effects that the stigma associated with being an adult male registered sex offender has on the offender and the offender's family and friends. The interview instrument is contained in Appendix A.

Socio-demographic information will be obtained from each interviewee and will be used to compare this information to the findings contained in chapter 2. The socio-demographic information form is contained in Appendix B.

Assumptions

Terms traditionally associated with quantitative research - internal and external validity, objectivity, and reliability – are replaced in qualitative research with the terms credibility, dependability and transferability (Patton, 2002).

Credibility can be achieved by resolving three inquiry concerns: rigorous methods for doing fieldwork that yield high-quality data that is systematically analyzed; the credibility of the research, depending on training, experience, track record, status and presentation of self; and philosophical belief in the value of the qualitative inquiry (Patton, 2002).

Dependability refers to how readily the study can be replicated at another time or by another researcher (Morrow, 2008). In this case, another certified treatment specialist providing outpatient therapy to adult male registered sex offenders could obtain a random sampling of clients, collect the same socio-demographic information contained in Appendix A, and ask the same questions contained in Appendix B.

Patton (2002) and Morrow (2008) wrote that *transferability* can be achieved through a researcher providing sufficient context of the research via the collection of personal information pertinent to the study. The literature review provides a context for the research, while the researcher provides the context from which the problem and analysis can be conceptualized.

Procedures

Hoyt and Bhati (2007) reported that the emphasis of qualitative research is not on the participants but on the unique insights that they possess. The results in this study evolved from the responses obtained from fifteen voluntary participants from a pool of forty-eight adult males in outpatient sex offender therapy at a center in southwest Florida.

Socio-demographic questionnaire.

To protect the privacy of the participants, each one was assigned a numerical code (1 through 15) and will be referred to by that code when presenting his information. The demographic questionnaire asked the respondent to provide his ethnicity, Florida Statute for which charged and convicted, whether a contact or a non-contact offense, what type of legal representation was provided, the age(s) of his victim(s), the gender(s) of his victim(s), whether the victim was unknown or known to the respondent, the number of prior sex-related and non-sex-related offense for which he was convicted, his age at the time the offense was committed, highest educational grade achieved, personal income 12 months prior to committing the offense and the past 12 months. The purpose of the socio-demographic questionnaire was to collect data specific to adult male registered sex offenders in outpatient therapy and compare it to the myths that surround this unique category of offender.

Participant interviews.

All interviews began with the researcher meeting privately with each participant and obtaining his signature on an informed consent form. Participants verbally acknowledged that they understood the open-ended nature of the questions and were asked to respond in an open and honest manner. Each interview consisted of asking the

participant the ten questions contained in Appendix B, without any variation, and the researcher recording the responses in writing, verbatim. The researcher asked the participant to expound upon his thoughts when he provided a one or two word response. At the end of each interview the participant was afforded the opportunity to review and amend his previous responses, and was thanked for his participation in the study. At the conclusion of all fifteen interviews the researcher transcribed the participants' response to typewritten form and commenced the data analysis process.

Data Processing and Analysis

In that qualitative research does not require the researcher to hypothesize outcomes prior to data collection (Patton, 2002) the participants' responses to the ten verbatim questions were collated, as was the information contained in the socio-demographic questionnaire.

The frequency table of socio-demographic information contained in Appendix C was analyzed and discussed. The researcher identified key themes among the participants' responses to the ten interview questions and indicated which participants provided the information to support these themes. Finally, the findings were triangulated by interviewing community based registered sex offenders who did not participate in the study, to ascertain if their responses would be similar to those provided by the study's participants.

Demographics of Participants

All of this study's participants were Caucasian, and were chosen from a community that is 87% Caucasian. It bears repeating that the two African-American and one Hispanic offender in treatment with this researcher did not meet the time-in-treatment

criteria. The Florida Statutes for which the study's participants were found guilty were: 7% (1 respondent) Florida Statute 794.05 (sexual battery on a victim less than 16 years of age); 13% (2 respondents) Florida Statute 794.011 (sexual battery on a victim less than 12 years of age); 66% (10 respondents) Florida Statute 800.04 (lewd/lascivious act on a victim less than 16 years of age); 7% (1 respondent) Florida Statute 827.071 (possession of child pornography); and 7% (1 respondent) Florida Statute 847.0135 (Internet solicitation). Thirteen of the participants (87%) were arrested for a contact offense, with thirteen (87%) reporting that they received the assistance of a public defender. The victims' ages ranged from 9 to 12 years of age (33%), 13 to 15 years of age (54%), and with 13% (2 individuals) of an unknown age due to the Internet solicitation of an unidentified minor.

The majority of the victims (74%) were female, with 13% being male and 13% unknown. None of the participants were found to have both male and female victims. A full 87% of the participants reported having an established relationship with their victim at the time that the offense was committed, with 40% reporting that they were related to their victim. None of the study's participants were found to have ever been arrested for a prior sex-related offense, and only 1 respondent (7%) reported having a prior non-sex-related offense.

The ages of the participants at the time that their offense was committed ranged from 25 to 39 (40%), 40 to 59 (46%) and age 60 plus (14%). The majority (87%) reported having a high school or higher level of education. The gross income reported for the year prior to their incarceration ranged from less than \$25,000 (14%), \$25,000-

39,000 (60%), \$40,000-59,000 (0%), and \$60,000 or greater (26%). A full 93% of the participants reported that their gross income over the previous 12 months was less than \$25,000.

In summary, the socio-demographic information collected from this study's participants challenges the public perceptions that adult male registered sex offenders: are a homogenous group of individuals; re-offend at a high rate; commit violent acts; perpetrate on victims unknown to them; are middle aged or older; and are likely to have committed at least one non-sex-related offense. While these perceptions may be applied to a number of incarcerated sex offenders, they may not apply to community based registered adult male registered sex offenders who are actively engaged in outpatient therapy.

CHAPTER FOUR: FINDINGS

This chapter reviews the purpose of the study and its research questions. It next addresses the items contained within the questionnaire, detailing how the participants responded to each of the ten questions. What follows is a comparison of the participants' responses to the myths surrounding adult male registered sex offenders contained within Chapter Two.

Restatement of the Purpose

The purpose of this study was to: (a) identify society's core beliefs about adult male registered sex offenders; (b) identify the primary sources from which members of society obtain their attitudes and behaviors toward adult male registered sex offenders; (c) compare these core beliefs to the findings contained in empirical research; and (d) present an objective view of adult male registered sex offenders.

Research Questions

A review of the research made clear three pertinent ideas: (a) the media projects onto society a belief that all sex offenders are alike, and therefore should be treated in a similar manner; (b) research tends to focus on high risk offenders; and (c) scant attention has been paid to the offender who has been assessed as being at a low risk for re-offending. The primary goal of this study was to identify how the current system of labeling sex offenders impacts the way that they are treated by society and the criminal justice system, and what safety issues does it present for society. To attain this goal, the following questions were answered:

Research Question One

How accurate are the current typologies in describing community-based sex offenders? The most frequently identified typologies are that adult male registered sex offenders are a homogenous group, the frequency of sex crimes continues to increase, once an offender, always an offender, beware of “stranger danger”, sex offenders are violent criminals, women do not commit sex-related offenses, and that treatment has proven to be ineffective. These typologies were found to be driven primarily by media misrepresentations of community based adult male registered sex offenders.

Sex offenders as a homogenous group.

The study’s participants were discovered to represent a wide range of socioeconomic levels, at the time that they committed their offense: income; type of offense committed; level of education at the time that they offended; their age at the time; and having female or male victims. The participants reported their gross annual earnings the 12 months prior to their incarceration ranging from \$19,000 to \$105,000. Participant 10 earned \$19,000, participant 13 earned \$23,000, participants 1, 2 and 3 reported earning \$25,000, participant 12 earned \$26,000, participant 4 earned \$30,000, participants 7 and 11 reported earning \$32,000, participant 8 earned \$35,000, participant 6 earned \$36,000, participants 14 and 15 reported earning \$60,000, participant 9 earned \$72,000 and participant 5 earned \$105,000 the 12 months prior to committing their offense.

The type of offense for which they were convicted involved five separate Florida Statutes and included non-contact offenses (possessing child pornography and online

solicitation of a minor for sexual purposes) and contact offenses (lewd and lascivious conduct, sexual molestation, and sexual battery).

The participants' level of education at the time that they were charged with a sex-related offense ranged from the 11th grade to an associate's degree, with participants 9 and 15 reporting earning college credits beyond an associate's degree, but less than those required for a bachelor's degree. Participants 4 and 12 completed the 11th grade, participants 1, 2, 6, 8, 10, 11, 13 and 14 are high school graduates, participants 3, 5 and 7 reported completing one year of college.

Their ages at the time of that they committed their offense ranged from 22 to 63 years of age. Participant 10 was 22 years of age, participant 5 was 25, participant 11 was 27, participant 13 was 33, participants 2 and 14 were 39 years of age, participants 1, 8 and 9 were 48 at the time of their offense, participant 12 was 51, participant 15 was 53, participant 5 was 54 years of age, participant 7 was 59 and participant 6 was 60 years of age at the time of his offense.

Two participants (numbers 5 and 13) reported victimizing males, participants 7 and 15 did not know the gender of their victims, with the remaining 11 participants reporting having female victims. None of the study's participants were convicted of sex-related offenses involving both a male victim and a female victim.

The frequency of sex crimes continues to rise.

The participants in this study were charged with their crimes over a period of 14 years: 1998 (participant 9); 2002 (participant 2); 2003 (participants 5, 8, 10 and 12); 2004 (participant 13); 2005 (participant 4); 2006 (participants 6 and 14); 2007 (participant 7); 2009 (participants 1, 3 and 11); and 2011 (participant 15). There does not appear to be

any discernible growth pattern in the frequency of sex-related crimes committed by this study's participants.

Once an offender, always an offender.

An analysis of the socio-demographic information collected for this study revealed that none of the participants were re-arrested for a sex- or non-sex-related crime, or for a violation of their probationary order, since their release from prison. Fourteen of the fifteen participants committed one sex-related offense, with one participant (number 4) reporting that he was arrested for a drug-related charge prior to the commission of his sex-related offense.

“Stranger danger.”

Two of this study's participants (numbers 7 and 15) reported that they had no established relationship with their victims given that they were convicted of a noncontact offense. The remaining participants (87%) stated that they had an established interpersonal relationship with their victims prior to the commission of the offense.

Sex offenders are violent criminals.

None of the fifteen participants involved in this study were charged with violence in the commission of their sex-related offense, nor have they been convicted of a non-sex-related violent crime.

Women do not commit sex-related offenses.

Given that this study focused solely on community based registered male sex offenders, and the researcher interviewed only adult male registered sex offenders, no finding could be reached.

Treatment is ineffective.

The participants in this study have actively participated in an objective-driven community based sex offender therapy program for a period of 2 to 7 years, with none of the participants having committed a later sex- or a non-sex-related offense during their period of treatment. It is noted that all fifteen of this study's participants have been administered and repeatedly passed their polygraph examinations.

Research Question Two

How do current sex offender labels impact the ability of community based adult male registered sex offenders to access social capital? Ten interview questions were posed to each participant represent a group of fifteen volunteer, community based adult male registered sex offenders to measure the participants' ability to access social capital.

Interview question #1.

“How has being labeled a Registered Sex Offender affected your ability to seek and obtain gainful employment?” Two themes arose when this questions was posed to the study's participants, the first being that four respondents (27%) are in receipt of Social Security Income (SSI) or Social Security Disability Income (SSDI), and are not actively pursuing employment, and the second being that eleven of the study's participants, representing 73% of those interviewed, reported that being a Registered Sex Offender has *severely* hampered their ability to obtain employment. Participant 1 replied, “My probation officer tells them (prospective employers) that I'm a registered sex offender and the doors close.” “If it wasn't for my family (financial support) I wouldn't have a place to live or food on the table.” Participant 2 stated, “Substantial. It's very difficult to obtain employment. I haven't had a job in four years.” Participant 4 offered,

“I couldn’t find a job anywhere when I first came out of prison. After about a year of being turned down by everyone I started my own business. You can’t wait around for things to happen.” Participant 5 responded, “It’s been the biggest stumbling block in my life.” Participant 7 stated, “Now that I have my Social Security it’s gotten a lot better. Before I could only find part-time work here and there and was always struggling to pay my bills. I don’t know how some of the guys make it.” Participant 8 offered, “I was getting three to five responses a week on Career Builders. When they found out I was a sex offender they wouldn’t even talk to me.” Participant 10 offered, “No one will hire me. My probation officer tells them (prospective employees) that I’m a registered sex offender and the doors close. We don’t even get a chance to tell our side of the story.” Participant 11 replied, “It’s hard to find full-time work that will pay my bills. If it wasn’t for my family I wouldn’t have a place to live or food on the table. If people would only give me a chance I’d show them how good a worker I am. I could be their best worker.” Participant 13 commented, “It makes it difficult because of the curfew and all the restrictions of being on probation as a sex offender.” Participant fourteen replied, “I probably have 2% ratio of people who call me back.” Participant 15 stated, “I haven’t been able to find a job in four years.”

Interview question #2.

“How has been labeled a registered sex offender affected your ability to gain access to suitable housing?” Four themes emerged from interviews with this study’s fifteen respondents: 1) five participants (33%, represented by participants 2, 3, 7, 13 and 15) owned their own homes prior to incarceration were permitted to resume residence upon release from prison; 2) five participants (33%, represented by participants 4, 6, 8, 10

and 11) were invited to move in with a relative; 3) five participants (33%, represented by participants 1, 5, 9, 12 and 14) have struggled to obtain suitable housing; and 4) some probation and parole officers are said to sabotage the offender's attempt to secure adequate housing by taking it upon themselves to meet with prospective landlords and providing them with details of the offender's arrest record. Respondent 1 commented, "I live in a tiny room in a rundown motel out in the boonies. But I don't have any choice. I could get a furnished apartment for much less, but I can't pass the background check." Respondent five stated, "Just outrageous. Because you're a registered sex offender no Realtor will talk to you. Their law firm won't write the contract because I'm a registered sex offender." Respondent 9 replied, "I was turned down so many times I can't count them. They had one excuse after another, but I knew it was because I'm a sex offender. One of the guys (another registered sex offender) let me live with him until I found a place. It's out in the boonies, which costs me a lot more in gas money." Respondent 12 stated, "I have been refused housing repeatedly." Respondent 14 offered, "I've been turned down every place that I've tried. As soon as they find out I'm a sex offender they turn me away. The probation officer wants to talk to the landlord. As soon as they find out they have to talk to a probation officer they back away."

Interview question #3.

"How has being labeled a registered sex offender affected your interpersonal relationships with family members?" Respondents 4, 6, 8, 9, 10 11 and 13 (47% of study participants) reported that relationships with family members have not been negatively affected to a serious degree. Conversely, respondent 1 stated, "They (probation) won't let me travel out-of-state, even to a funeral. They can't afford to come down here. It's

just me.” Respondent 2 replied, “The victim’s two siblings and father (relatives of the respondent) have broken off all contact with my family.” Respondent 3 commented, “My biggest regret is not being able to have contact with my grandchildren. That affects me on a daily basis. We come from a close-knit family. Family was everything.” Respondent 5 stated, “It’s been uncomfortable for them. The stigma that’s on you makes it uncomfortable for them. My sister has nothing to do with me.” Respondent 7 commented, “I have no one down here. My daughter lives in another state with her husband and children. We talk all the time but they can’t visit me and I can’t visit them.” Respondent 12 stated, “My mother-in-law totally rejected me.” Respondent 14 offered, “It (his arrest) tore apart my whole family. It’s such a stigma, they are better off not having anything to do with me. I lost all of my in-laws.” Respondent 15 replied, “My brothers and sisters (who reside in another State) don’t understand why they can’t visit us since they and their spouses are not at all worried about me being around their kids. They are angry at the system for keeping us apart. We’ve always had Holiday family get-together and they say it’s not the same without me and my wife.”

Interview question #4.

“How has being labeled a registered sex offender affected your ability to actively participate in community activities?” One constant theme evolved from the interviews - the inability to participate in community activities has negatively impacted all of the participants’ mental and emotional well-being, contributed to feelings of low self-worth, and resulted in at least some social isolation. Participant 1 stated, “We can’t do anything or go anywhere. I’m scared to death to be in a store and someone recognizes me (as a registered sex offender) and shouts it out. I have this nightmare where people are chasing

me, wanting to kill me. I make my shopping list, get it (the items) and get out (of the store).” Participant 2 commented, “I no longer have access to parks and beaches. I can’t attend birthday parties, family gatherings, and so forth.” Participant 3 offered, “I can’t volunteer some places where I used to. I still volunteer with my church, but I can’t now because I’m on house arrest (for a GPS violation).” Participant 4 stated, “I only hang around adults. I don’t go anywhere there might be some kids.” Respondent 5 replied, “It’s virtually non-existent. First of all you’ve got your curfew. I haven’t gone to church because of the rejection factor. They still look at you as if you’re a monster.” Participant 6 commented, “I’m not allowed to attend parades and other stuff I used to. I can attend church but only once a week. I went to the Food Bank and left my box (GPS device) in the truck. A couple of weeks later I was at the Laundromat and it malfunctioned. They put me in jail for 90 days. They told me I was facing 10 years in prison if I don’t take community control.” Participant 7 stated, “I’ve gotten to the point I don’t want to be around people any more. They don’t give a darn about me so I don’t care about them. I used to play in a softball league, play chess and go to the library.” Participant 8 offered, “You are just limited to where you can go. I asked my probation officer about going bowling. He said I could go, but had to leave if any kids were there. You are limited on what you can do. I don’t feel relaxed in public; like everybody’s looking at me because they recognize my picture. I can’t even go in my own (swimming) pool because of the monitor (GPS). If it gets ruined I’ll be violated.” Participant 9 replied, “I used to be involved in all kinds of stuff. I donated a lot of time and money to community programs that helped people who were down on their luck. I don’t have the funds to help out but have lots of time on my hands. Problem is, we’re not allowed to volunteer anywhere.”

Participant 10 stated, “I’m a healthy adult male who enjoys female companionship, but I can’t go anywhere I can meet women. I’m not allowed to go to a gym, participate in any sports or visit any park because a kid may show up. When my cousins visit I have to leave the house and can’t come back until they’re gone.” Participant 11 offered, “I can’t attend my kids’ games (soccer, baseball, etc.) or their school functions. My daughter cried because she doesn’t understand why I couldn’t go to her kindergarten graduation. It (being labeled a registered sex offender) has ruined my life.” Participant 12 commented, “I avoid contact with any young females. I want to avoid any opportunity for confrontation.” Participant 13 offered, “I have no desire to participate in community events, in fear of rejection. Before the conviction I participated in numerous volunteer opportunities such as Salvation Army soup kitchens.” Participant 14 replied, “I can’t participate in a lot of activities because of my curfew. I get off work and have a couple of hours to do anything. I used to always shoot pool, but can’t because of the curfew. You can’t put yourself around drinking people.” Participant 15 commented, “I can’t do anything or go anywhere. I used to belong to some clubs (American Legion, Kiwanis, etc.) but I can’t go there anymore. My probation officer said they have meetings where families attend and it would put me at risk.”

Interview question #5.

“How has being labeled a registered sex offender affected your prior interpersonal relationship with friends?” It is noted that thirteen of the respondents resided in southwest Florida at the time of their conviction and chose to return here following their release from incarceration. Participants 3, 5 and 9 (20% of respondents) reported that their relationships with those they befriended prior to being arrested remain supportive.

Participant 3 stated, "It hasn't. My friends all know me. They know what I'm capable of and not capable of." Participant 5 commented, "Most of them all know me. I haven't had any issues whatsoever." Participant 9 replied, "Most of my old friends have kept in contact. They check in now and again to see how I'm getting along. My friends know the real me, not the person they (law enforcement) say I am." A larger portion of the participants (80%) reported that being labeled a registered sex offender has negatively impacted interpersonal relationships with friends, neighbors and others in the community. Participant 1 replied, "What friends? The only people I spend any time with are the guys (other registered sex offenders) who live next door (in the same motel). I'm afraid to speak to anyone else." Participant 2 commented, "I don't associate with them anymore. Most of them have children so I can't." Participant 4 stated, "When I came home I cut ties with everybody. They were drug dealers and drug addicts." Participant 6 replied, "I lost friends when I got arrested. They are afraid that talking to me will make them look bad." Participant 7 replied, "I don't want to be around anyone. My life is a lot simpler that way." Participant 8 commented, "Being a registered sex offender, I can't just travel when I want to." Participant 10 offered, "I've lost friends because they would invite me to parties and other things and I'd have to turn them down; after a while they just quit inviting me." Participant 11 stated, "I don't hang with anyone. Most of my old friends did drugs and partied and I'm not into that anymore. I spend all my time with my family." Participant 12 replied, "I'm told what to do, who to see, where to go. I'm not a threat to the community." Participant 13 offered, "My old friends I have not spoken to since getting out of prison. I have new friends, through work." Participant 14 stated, "I was confronted by an old neighbor. He said 'don't let me catch you in the neighborhood

around my kids.’ My kids and his kids used to play together. He was just mad because we were really good friends at one time. I ruined his trust. He talked to my boss. I don’t know what was said, but I was fired.” Participant 15 replied, “Me and my wife don’t have any friends. We stay at home. We don’t go out. It’s just easier that way.”

Interview question #6.

“How has being labeled a registered sex offender affected the career goals that you were in pursuit of prior to being convicted?” All but one of the participants reported that being identified as a registered sex offender has virtually ended their previously established career goals. Participant 1 stated, “I just started work as an apprentice electrician. I don’t see any hope for the future.” Participant 2 offered, “I was moving up through the ranks. I can no longer work in that field.” Participant 4 commented, “I had no career goals when this all happened. I was dealing drugs, a dead beat on the streets. I just didn’t care about anything.” Participant 5 replied, “It’s done. In business people won’t even talk to you. They’re afraid and won’t take a chance (on hiring a registered sex offender).” Participant 6 stated, “Seven years in prison destroyed the job I took seven years to get. The job went away when I got arrested. Because I’m a convicted felon I’m a security risk. That career is no longer open to me. It’s killed me financially.” Participant 7 offered, “I’m too old to start a new career.” Participant 8 commented, “I always liked working and fixing people’s houses, but I can’t do it anymore. I was always into sales and you need to go into people’s houses, but I can’t do that anymore either.” Participant 9 commented, “I’ll never be a long-distance trucker again. I had to give up any hope of that.” Participant 10 replied, “I have been able to do day labor, but only after they check the place to ensure that there won’t be any kids there. Maybe 70% of the time

they won't take me." Participant 11 stated, "My (business) license was taken away so I can't work in my field anymore. I was making good money and people still ask me to do work for them. They don't understand why my career was taken away from me."

Participant 12 commented, "I lost my motivation to do anything. Sometimes I get really depressed." Participant 13 replied, "There is no sense of having career goals because that is all you can get. I wanted to be a gemologist before my conviction." Participant 14 offered, "It's pretty much brought it to a screeching halt. Your job is the root of everything. I'm not used to being without money. It's learning a whole new way of life." Participant 15 stated, "I lost my career. I was getting good evals and got along with everyone. When I was arrested it was like I was a leper. No one wanted to talk to me. They let me go without giving me credit for all the good things I did for the company."

Interview question #7.

"How has being labeled a registered sex offender affected your ability to further your education?" Eleven participants (73%) reported that being a registered sex offender has repeatedly blocked their attempts at pursuing a higher education, with the remaining 3 participants (20%) expressing no desire to further their education. Participant 1 stated, "I can't go to Vo-Tech. They have kids on campus. My grades aren't good enough to get me into college." Participant 2 replied, "I have lost all motivation." Participant 4 commented, "I can't go to school because of the hassle going through probation. It (sex offender probation) is designed not to help you. It's made to make you fail." Participant 5 offered, "I don't have any desire. There's no desire, no drive. When they find out you're a registered sex offender you're treated differently." Participant 7 replied,

“There’s many, many online degrees available. It’s not the same as attending classes on a school campus, but a sex offender has to take what’s offered. You have to accept that we’re treated differently.” Participant 8 stated, “When you go to a school you have to tell them you’re a registered sex offender. If they have kids or a daycare there, I can’t go.” Participant 9 commented, “I kid myself that I’m too old to go back to school, but the real reason is that I don’t want to start all over again.” Participant 10 replied, “I tried applying to local colleges but was told I couldn’t come on campus because they have a daycare. I got frustrated and gave up.” Participant 11 stated, “I could get my master’s certificate, but what good would it do? I would probably never be able to use it. The state would make sure of that. I don’t want to change my career. I’m not good at school.” Participant 13 replied, “I really have not tried because I am afraid I might violate my probation with not telling everyone at school I am a registered sex offender.” Participant 14 commented, “I’m willing to learn anything new. Any trade or anything, but no one is willing to teach me.” Participant 15 offered, “I was getting ready to go back to school when I was charged. It would have helped me in my career, but now it doesn’t matter. No one will hire me anyway.”

Interview question #8.

“How has counseling helped you to address these issues?” All 15 of the study’s participants reported that they value actively participating in community based registered adult male sex offender therapy. The main themes were: 1) obtaining assistance from other offenders who have developed effective coping skills; 2) being offered an open forum where they can exchange ideas without being attacked or ridiculed; 3) learning that they are not the only ones who are suffering from the stigma applied registered sex

offenders; and 4) learning how to effectively function in spite of the stigma. Participant 1 stated, "My counselor and the other guys let me talk about things that bother me. I can be honest with them. They listen. They're the only ones I trust." Participant 2 commented, "It's a very vital tool in dealing with the labeling of sex offender. It gives me a chance to talk about my problems." Participant 3 responded, "I enjoy counseling. I like to interact with the other guys." Participant 4 offered, "By allowing me to open up to people who had the same problems; like I'm not the only one out there with this problem."

Participant 5 stated, "Being able to talk to someone. I get things off my chest. I get answers. It's been very beneficial to me. I have a better week afterwards." Participant 6 commented, "I believe it's very helpful because you (the researcher and therapist) have the background and knowledge I needed to succeed. I've learned how to deal with people and situations that I wasn't prepared for when I got out (of prison)." Participant 7 offered, "I fought going to group at first. I thought they would talk about my charge over and over again. We talk about the problems that we are all having and the ways that some of the guys have learned how to cope. Now I look forward to my nights."

Participant 8 replied, "I met a woman and was invited to accompany her to a wedding. I had to tell her no. You don't know what to tell them. I didn't know how to approach her. I talked about it in group and got some good answers." Participant 9 stated, "People here treat me like a human being. They don't judge me. I can speak my piece without being ridiculed." Participant 10 offered, "I need it to preserve my sanity. Talking to other guys who've gone through the same stuff I'm going through really helps. There isn't anyone else I can talk to who really understands." Participant 11 replied, "Nobody helps us when we get out (of prison). If it wasn't for counseling I would have made a lot of mistakes

and probably ended up violating (probation). The probation officers don't tell us anything. Being told what we can and can't do takes a lot of the guessing away." Participant 12 commented, "Teach me how to protect myself." Participant 13 stated, "It points me in the right direction." Participant 14 offered, "It's good to have input from others; to find out what's working and what's not." Participant 15 replied, "I'm not the only one who is struggling. Other guys telling me how they coped with being labeled (a sex offender) helps me not stay depressed. Without the guys in group to talk to I wouldn't have anyone."

Interview question #9.

"What have you found beneficial or not helpful about treatment?" All 15 of the respondents voiced their belief that treatment is beneficial to them. The common themes were: 1) learning how to overcome being labeled a registered sex offender; 2) being provided a forum where they can enjoy a free exchange of information; 3) learning new life skills or honing existing skills; 4) learning why they acted out their deviant thoughts and how to protect themselves from repeating these behaviors; and 5) becoming empowered to lead a healthier and happier life. Participant 1 stated, "I don't think I would make it if I didn't have the group to come to every week." Participant 2 replied, "It's crucial to me. Without the counseling I would be lost. Counseling helps me deal with life's problems and the shame that I feel." Participant 3 offered, "The interaction with you (the researcher and his therapist) and the other guys is really important to me (and) being able to talk about things openly really helps." Participant 4 commented, "It has helped me keep my head on straight. It's allowed me to overcome the things I didn't think I could overcome. It's allowed me to talk about past issues with my family we

should have talked about a long time ago.” Participant 5 stated, “Individual therapy is important to me. There are things I can’t say in group.” Participant 6 replied, “I’ve learned that I’m not the Lone Ranger. There are many of us in the same situation. By discussing these issues I learn to cope.” Participant 7 commented, “I have a better understanding of why I did what I did. I can put it behind me.” Participant 8 offered, “Learning ways to handle things you might face with. In class I feel 100% open and accepted.” Participant 9 stated, “I’ve learned ways to cope with difficult people and situations.” Participant 10 replied, “I can be me when I’m in group. No one shames me. I can say what I want to without someone jumping in my case.” Participant 11 offered, “I don’t know where I’d be if I wasn’t given counseling. We talk about all kinds of stuff, not just sex offender issues.” Participant 12 stated, “I am accepted when I come here. People accept me for who I am, not what I did.” Participant 13 commented, “Group encourages me. I like everything about counseling.” Participant 14 replied, “I’m most comfortable in group than I am anywhere.” Participant 15 offered, “I understand some of my past behaviors. It’s no excuse, but learning about why I did certain things will keep me from repeating them.”

Interview question #10.

“What else would you like to be included in counseling?” Six of the respondents (40%) expressed a need for assistance in seeking and obtaining employment. Four respondents (20%) stated that they would have benefited from an incarceration-to-community transitional program for themselves and their family members. Two respondents (14%) replied that therapists who treat sex offenders should “educate the community (law enforcement personnel, probation officers, apartment complex owners,

employers, legislators and others) that we aren't ogres." "We did something really stupid, have learned from our mistakes, and need to get on with our lives."

Research Question Three

How does the current system of typologies impact the counseling treatment received by community-based sex offenders? The typologies identified among this study's participants, and in other community-based sex offender treatment programs, involved lewd and lascivious behavior on a minor child, sexual battery on a minor child, Internet solicitation, and possession of child pornography. Absent among community-based low risk sex offenders were many of the typologies typically included in sex offender research: rape; trafficking or prostitution of children; making and/or distributing pornography; and the kidnapping or false imprisonment of adults or children. Also absent among the study's participants were a history of criminality and the presence of co-occurring substance abuse or mental health disorders.

CHAPTER FIVE: SUMMARY, CONCLUSIONS, AND RECOMMENDATIONS

Summary

An extensive literature review identified and demystified the seven most negative myths that are attributed to sex offenders by a large segment of our society. The beliefs that adult male registered sex offenders as a group are violent criminals with a high re-offense rate, are largely unknown to their victims - dirty old men in trench coats lurking around school yards, cannot be rehabilitated, and for whom treatment has proven to be ineffective find their origins in media presentations of sex offenders. The myths continue primary because they have gone unchallenged by child welfare workers, educators, law enforcement personnel, and others who interact with victims of sexual abuse on a recurring basis.

Socio-demographic information was collected and one-on-one interviews were conducted by this researcher with fifteen randomly-selected adult male registered sex offenders who were enrolled in a community based outpatient sex offender therapy center in Southwest Florida.

The results of this study revealed that the negative and highly damaging myths that surround adult male registered sex offenders have contributed to individual and institutional discriminatory practices against this particular category of offender; practices that are not applied to other categories of felons. The study further revealed that the power of the media is such that a section of society receives its beliefs from television programs, newspaper and magazine articles and movies that continue to portray sex offenders in a false light. Additionally, the study revealed that the stigma affixed to sex

offenders is often applied to their family members, those who choose to maintain an interpersonal relationship with them, and for employers who dare to risk hiring a convicted sex offender.

Limitations of the Study

The number of participants in this study was fifteen, which is considered to be relatively low when compared to all community based adult male registered sex offenders residing in Florida; however, it may be representative of the clients in the sample population. A limitation of this study was the lack of longitudinal studies that tracked the progress of low risk adult male registered sex offenders actively participating in community based treatment programs.

All 15 of the study's participants identified themselves as Caucasian males. This is thought to be a fair representation of the sample population which consists of forty-five Caucasians, one Hispanic, and two Black persons. The lack of racial and ethnic diversity may have limited the scope of the study. The outcomes of future studies similar to this one may achieve varying results if members of other racial/ethnic groups participate.

The outcomes of this study generated the revision of an existing low risk outpatient treatment program, with increased focus on integrating the needs of the offender and his family members and significant others. The study has also generated the development of a Certified Sex Offender Treatment Counselor (CSOTC) course that is intended to teach therapist, counselors, case workers, child welfare proponents, parole and probation officers, law enforcement personnel, religious leaders, educators and academics, and others who work with and advocate for the victims of sexual abuse. The course will foster a better understanding of how the stigma associated with registered sex

offenders impacts all members of his family, and to members of the community to a lesser extent.

Review of Findings

The research questions involved in this study were: How accurate are the current typologies in describing community-based sex offenders? How do current sex offender labels impact their ability to access social capital? How does the current system of typologies impact the counseling treatment received by community-based sex offenders?

In response to the first question, the typologies contained in sex offender literature focus primarily on high risk offenders who have co-occurring disorders and other criminal attitudes and behaviors, with little attention paid to low risk offenders. The media occasionally draws on this research, which in turn continues to fuel the misconception that all offenders are alike. In reality, sex offenders represent a cross-section of society consisting of all socio-economic levels, both genders, a variety of races and ethnic groups, a wide range of ages, varying types of offenses, both related and unrelated victims, and male and female victims.

Department of Justice reports conducted over the past two decades reflect a continued decrease in the incidence of sex-related crimes. During this same period, newspaper articles written about sexual predators increased from 107 to 5,006, a factor of almost 50 (Horowitz, 2007). Given that newspaper articles receive much wider distribution than crime reports and empirical research, the lay person cannot be faulted for concluding that there sex-related offenses continue to be a serious public safety issue.

There are a relatively small portion of adult male sex offenders who possess similar characteristics that may reliably predict re-offense rates (young, unknown to their

victims, unemployed, never married, less educated, past probation violations, possessed deviant sexual interests and with male victims) (Eisenberg, 1997; Freeman & Sandler, 2008; Hanson & Bussiere, 1998; Harris & Hanson, 2004). Longitudinal studies also reveal that offenders who immediately engage in community-based sex offender programs following their release from prison are at a low risk for committing the same or a similar sex-related offense.

Two of the respondents revolved in this study were charged with Internet pornography and solicitation and were unable to identify their victims. The remaining participants (87%) reported having an established interpersonal relationship with their victims. The results of this study appear to support the findings of other studies: a 1997 Bureau of Justice Statistics study that found 9 out of 10 (90%) women who reported being victims of sexual assault knew their attacker; and a 2000 Center for Sex Offender Management (CSOM) study that found 60% of minor males and 80% of minor females reported being sexually assaulted by someone with whom they had a personal relationship.

Quinn et al. (2004) wrote that adult males who commit violent sex-related crimes are also violent in at least one other area of their lives (e.g. domestic battery, fighting in public, road rage, etc.). Levenson (2008) reported that those who target strangers are more likely to harm their victims. While none of this study's participants were found to have been arrested for a violent sex-related or non-sex-related crime, this may be due to the offenders having an established relationship with their victims.

Sex offender research has historically focused on adult males, while paying scant attention to the increasing incidence of female-initiated child sexual abuse and molestation. Johansson-Love and Fremouw (2006) wrote, “For many years female sexual offending has been ignored or unrecognized”, which Frei (2008) attributes to a pervasive pattern of gender bias. There exist any number of anecdotal stories about women who were suspected of sexually abusing a minor child - often their own or a child under their care – but were not fully investigated to the extent that their male counterparts are. This researcher conducted an unscientific review of the arrest records of female school teachers who were charged with sexually-inappropriate behavior with a male student. The record review revealed that a small percentage of the alleged perpetrators were imprisoned, a handful served short period of time in jail, most received probation in lieu of incarceration, none were placed on electronic monitoring, and there was no mention of mandatory polygraph testing.

Shanahan and Donato (2001) wrote that outcome studies of prison-based treatment programs have been proven to be cost-effective in that they contribute to a much lower re-offense rate when compared with non-treatment groups; however, many states remain unwilling to fund these programs. The Association for Treatment of Sexual Abusers (ATSA, 2000) reported that outcome studies of adult male registered sex offenders who actively participated in community based treatment programs were much less likely to commit another sex-related crime than those who did not receive treatment.

Answers to the second research question, “How do current sex offender labels impact their ability to access social capital?” were obtained during one-on-one interviews with the study’s participants. The interviews identified the following barriers to social

capital for this group of community based adult male registered sex offenders: difficulty in obtaining gainful employment and therefore pursuing their chosen career; numerous residential restrictions evolving from individual and institutionalized written and tacit discriminatory practices; the inability to improve one's education due to a ban on attending courses at vocational schools or colleges; prohibitions against attending community functions, family gatherings, church activities, and their children's school functions; occasional harassment by neighbors and strangers, with no recourse to report and stop the harassment; prohibitions against the offender and his family members celebrating Holidays; and local and long distance travel restrictions.

I triangulated my findings by meeting with two groups of community based adult male registered sex offenders (9 and 10 persons, respectfully) from the group of offenders that I drew my study's participants. I distributed copies of the participants' responses to the ten interview questions and asked the two groups if they agreed or disagreed with their responses, and any additional comments they might have made had they been part of the study. The interviewees were assigned fictitious names with their responses recorded verbatim.

Group one interviewees are identified as Adam, Bertram, Delmar, Iain, Troy, Joseph, Andrew, Wilhelm, and Kyle. All of the interviewees concurred with the responses provided by the study's participants, with some alterations and the addition of personal experiences. Bertram described occasions when he was harassed (verbally) by an older, adult, male neighbor. The neighbor reportedly would see Bertram outside of his home and would "scream profanities at me." He stated that he contacted the local police station to file a complaint and was told that no crime had been committed. The law

enforcement officer who heard his complaint commented that the neighbor's behavior was not harassment because "you people (registered sex offenders) deserve what you get." Adam, Delmar, Troy, Andrew and Kyle reported experiencing similar forms of harassment from their neighbors shortly after moving in, when law enforcement personnel informed everyone in the neighborhood that there was a registered sex offender living among them. They refrained from reporting or reacting to the incidents because most of the harassment abated after a period of time, and with the commonly-held belief among registered sex offenders that, "It wouldn't do any good."

Iain added that registered sex offenders (residing in Florida): have less civil rights than murders; are on probation for longer periods of time; have more restrictions; and are trusted by their probation and parole officers much less than other felons. The remainder of group one concurred with most of Iain's perceptions. Delmar commented that his probation officer has conducted random "bed checks" at his home on a number of occasions at midnight or one o'clock in the morning. Delmar reported that both he and his wife are employed and leave the house by 7:00 A.M., thus are in bed no later than 11:00 P.M. He stated that he shared his frustrations with the probation officer who reportedly "copped an attitude." His wife asked him not to pursue the matter.

Wilhelm offered that he has neither experienced any form of harassment by his neighbors, nor has he been disrespected by his probation and parole officer and hasn't experienced the same frustrations as the other group members. Troy remarked that Wilhelm was treated differently because he was born and raised in this area and that his family has a lot of money and therefore he is treated differently than registered sex offenders who are from less-connected families.

Joseph commented that he experienced feeling hopeless, helpless, and completely lost during the period that he transitioned from prison to the community and that meeting other sex offenders greatly relieved his anxiety and depression; it seemed that no one showed any compassion for his plight. The remaining interviewees, with the exception of Wilhelm who had an unusually smooth transition, echoed Joseph's sentiments.

Delmar lamented the absence of public funds to assist him in reentering society and the unanticipated financial burden that it caused his family. Delmar and his family members made the erroneous assumption that his financial responsibilities would be suspended until he could attain financial stability. His parents were not prepared nor did they play to assume the burden of monthly probation fees, electronic monitoring, mandatory polygraph examinations, or sex offender treatment. The remainder of the interviewees shared their own frustrations when faced with financial burdens they were not prepared to assume.

This group of interviewees offered two solutions to reduce the myriad of stressors experienced by registered sex offenders when transitioning from prison to community-based control. One solution involved the implementation of a prison-based transition program which would prepare registered sex offenders and their family members for a smoother prison-to-community control transition. The second solution, and considered the most feasible, was for this researcher to obtain funding to assist future registered sex offenders until they could achieve financial stability. The interviewees believe that the funding would provide transitional housing, employment assistance, temporary transportation and case management. This researcher experienced difficulty finding a federal or a state program that funded reentry services for convicted sex offenders.

Group two interviewees are identified as Joshua, Abraham, Montgomery, Matthew, Henry, Bill, James, Oscar, Franklin and Kent. This group, residing in an adjoin county, were much more vocal than the first group of interviewees. These individuals reside in a county where it is the sheriff's policy to assign an officer to meet each registered sex offender when he moves into his county and are strongly encouraged to seek residency elsewhere. The sheriff euphemistically refers to this policy as "a buddy program." Henry commented that he (as a registered sex offender) spent so much time "just fighting to survive" the first twelve to eighteen months following his release into the community that it is important for him to let go of the maltreatment he has experienced as a registered sex offender and get on with his life. Franklin, Joshua, Oscar, Kent, James and Abraham, all quite a bit younger than Henry, expressed that they were having difficulty letting go of their resentments against local law enforcement personnel. Montgomery stated that, when he first moved into his deed restricted community, "four cop cars full of detectives drove up and down the street knocking on doors and handing out flyers, or leaving them in their mail boxes." The reaction from neighbors included yelling profanities at him when they walked or drove by his home, throwing nails in his driveway, dumping garbage on his front lawn, the taping of flyers to light poles, and representatives of the Neighborhood Watch visiting and advising him (politely but firmly) that it would be best for everyone if he moved elsewhere. Montgomery signed a 12-month lease; therefore, it was highly impractical for him to relocate elsewhere. Although two neighbors left notes on his windshield apologizing for the behaviors of others, ongoing harassment from other neighbors motivated Montgomery to leave for

work early in the morning and return home late at night, to avoid any contact with his neighbors. When his lease was up he moved to a rural area. While it greatly increased his travel time to and from work, Montgomery commented that “it’s a small price to pay.”

Oscar commented that the responses to the ten questions by the fifteen study participants were “way too kind; too soft.” He offered that no one can fully understand the repercussions of being a registered sex offender in the State of Florida. Oscar acknowledged full responsibility for his sex-related offense and the consequences of his actions, but questioned why sex offenders are given few options; either go to trial and risk being sent to prison for fifteen years or take a plea deal. He expressed his dismay that his family could not find an attorney that would defend him, even though the case against him allegedly was “weak.” Oscar opted for a public defender, whom he stated that he did not meet until the public defender visited him in jail and handed him a document wherein he agreed to one year in jail followed by five years of felony probation. A survey of the remainder of group two interviews revealed that all of them were assigned a public defender and took a plea deal to avoid a promised extended period of incarceration.

Franklin, Matthew, Joshua, James, Bill and Kent all shared that while they found employment within six months of being released into community control they were all in part-time, minimum wage jobs that offered little hope for advancement. As a group they expressed the need for registered sex offenders in transition to be provided job training and placement so that they could earn a livable wage. They concurred with group one

that they would have greatly benefited from transitional housing, temporary transportation, and other social services to assist them in adjusting to community-based living.

Interview groups one and two agreed with the study's participants that: the stigma placed on their family members posed an unfair burden for which they cannot remedy; the drastic decline in the socioeconomic status of registered sex offenders pre- and post-incarceration is not reported by the media, thus is unknown by society; the challenges facing registered sex offenders in adjusting to community-based control have motivated many of them to assist newly-released offenders in the transition process; some continue to struggle with resentments against others for their perceived maltreatment; and that it is important for this researcher and others who work with registered sex offenders and their family members to inform the public of their plight and to advocate for fair and equitable legislation.

Implications for Research

The fifteen volunteers who participated in this study may represent the attitudes and behaviors of other community based low risk adult male registered sex offenders currently residing in the State of Florida. Considering that each state establishes its own community controls, some of the participants' concerns (e.g. the 1,000 foot rule, electronic monitoring, one-time permission to attend a significant event, and barriers to housing and gainful employment) may not be expressed during interviews with low risk offenders in other community based outpatient sex offender treatment programs outside of the State of Florida.

It is important that additional research be conducted to determine if there exists the need for a new sex offender typology with commensurate treatment modality. The typology may be identified as “low risk offender”, one who has committed a non-violent offense, has no prior criminal charges of a sex- or non-sex-related nature, possesses achievable short- and long-term personal and professional goals, enjoys a stable living environment, has secured and maintained steady gainful employment, has healthy interpersonal relationships, does not possess a mental health or a substance abuse disorder, and who adheres to all aspects of his probationary order.

Implications for Practice

Professionals who work in community-based sex offender treatment settings need to know that the majority of workbooks, textbooks and other materials evolved from studies that focused primarily on high risk offenders, thus they tend to be ineffective and may even be counterproductive when working with low risk sex offenders. Requiring low risk sex offenders to complete a workbook or homework assignments that are intended for those deviant attitudes and behaviors found among repeat sex offenders and violent criminals may lead to a “denial by comparison.” Low risk offenders (e.g. non-contact offenders and those whose charges were reduced to lewd and lascivious conduct) compare themselves to the pedophile, the rapist and the incest perpetrator and minimize their own deviant behaviors. The danger to the sex offender is that this false sense of security interferes with the client’s commitment to change.

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During program development or remodeling it would be highly beneficial to include an extensive biological, psychological and social assessment over 3 to 4 sessions, to properly identify the treatment needs unique to that client. It is also important to meet with the client’s spouse or significant other and other key members of his family to gain their support of the client and his treatment plan goals.

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Recommendations

Future studies of low risk community based adult male registered sex offenders should be conducted by a large number of sex offender therapy specialists and by

academics interested in the subject matter, with the goal of identifying the most efficacious treatment programs for this particular community.

An additional contribution to this body of research would require conducting interviews with a national cross-section of community-based low risk sex offenders to determine those factors that prohibit or inhibit the participants from re-offending. Essentially, what attitudes and beliefs do they possess and act upon that inhibit them from re-offending?

The findings of this study may contribute to a reduction in the negative stereotypical assumptions about adult male registered sex offenders that are prevalent among therapists and counselors, law enforcement personnel, child welfare advocates, probation and parole officers, academics and researchers, and other segments of society. Changing these negative perceptions may lead to a compassionate acceptance of low risk sex offenders, which would in turn alleviate the individual and institutional discriminatory actions and constraints currently placed on all adult male registered sex offenders, regardless of their offense.

Conclusions

This study challenged the prevailing myths associated with adult male registered sex offenders and, through an extensive literature review, identified that they are a heterogeneous rather than a homogenous group of individuals, that they are represented by a cross section of socio-economic groups, cover a wide range of ages, are both male and female, are not violent in nature, had an established interpersonal relationship with their victims, and that they commit a wide range of offenses.

It was discovered that adult males who committed sex-related crimes, with the exception of rapists, are at a lower risk for committing a sex- or a non-sex-related future crime than all other categories of felons. All of this study's participants have participated in community based outpatient therapy for a period of two to seven years and have not committed any other offense or violated any portion of their probationary order.

It was discovered that the incidence of committing acts of a violent sex or non-sex nature are rare among adult male registered sex offenders, which appears to be supported by the data garnered from this study's participants.

Research revealed that females are capable of and often do commit sex-related crimes, that their victims are predominantly minor children under their care, and that the number of females committing sex-related offenses are on the rise.

The literature review reflected that participation in community-based outpatient therapy is successful in ensuring a smoother transition to community-based living. The participants in this study reported that participation in a community based treatment program eased their transition and that meeting with other offenders was important aspect of their emotional, mental and physical wellbeing.

It was further found that approximately 80-90% of sexual perpetrators and their victims were known to have an established interpersonal relationship at the time that the offense was committed. Two of this study's participants were found to commit non-contact Internet offenses thus were unable to identify their victims. The remaining thirteen participants (87%) reported having an established relationship with their victims.

An unanticipated outcome of this study was the development with two other therapists the Certified Sex Offender Treatment Counselor (CSOTC) course of

instruction sponsored by the International Association of Trauma Professionals (IATP). The two-day, thirteen continuing education credit (CEU) course was developed to teach therapists and counselors, case managers, child welfare advocates, parole and probation officers, law enforcement personnel, academics and others who work with sexual abuse victims and/or perpetrators in community based settings in the assessment and treatment of all categories of male and female youth, adolescent and adult sex offenders. The course developers drew heavily from Chapter 2 of this dissertation to ensure that the CSOTC students obtained the most up-to-date and correct information regarding the attitudes and behaviors of sex offenders. A pilot program was presented in May of 2013, the curriculum was revised to reflect items that needed to be revised, deleted or added to the curriculum. Future CSOTC courses of instruction will be posted on the IATP website.

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APPENDICES

APPENDIX A:
Interview Questions

1. How has being labeled a registered sex offender affected your ability to seek and obtain gainful employment? (Gainful employment is described as employment that provides you with financial security and a sense of purpose).
2. How has being labeled a registered sex offender affected your ability to gain access to suitable housing?
3. How has being labeled a registered sex offender affected your interpersonal relationships with family members?
4. How has being labeled a registered sex offender affected your ability to actively participate in community activities?
5. How has being labeled a registered sex offender affected your prior interpersonal relationships with friends?
6. How has being labeled a registered sex offender affected the career goals that you were in pursuit of prior to being convicted?
7. How has being labeled a registered sex offender affected your ability to further your education?
8. How could counseling help you to address these issues?
9. What have you found beneficial or not helpful about treatment?
10. What else would you like to be included in counseling?

APPENDIX B:
Socio-demographics Information

1. Ethnicity: Black Caucasian Hispanic
Other _____
2. The Florida Statute(s) for which you were charged:

3. The Florida Statute(s) for which you were convicted:

4. Was it a contact or a non-contact offense? (circle one)
5. Who defended you? ___no one ___public defender ___private attorney
6. The age(s) of your victim(s): _____ or unknown
7. The gender(s) of your victim(s): _____ or unknown
8. Was the victim known to you? ___yes ___no
9. Was the victim related to you? ___yes ___no
10. Number of prior, sex-related offenses for which you were convicted: _____
11. Number of prior non-sex-related offenses for which you were convicted: _____
12. Your age at the time you committed your offense: _____
13. The highest grade completed in school at the time you committed your offense:

14. Your personal gross income the 12 months prior to committing your offense:
\$ _____
15. Your personal gross income the past 12 months: \$ _____

APPENDIX C

Demographics of Participants

P	Race	F.S.	Off. Type	Defense	Vic. Age	Vic. Gender	Vic. Known	Vic. Related	Prior SRO	Prior NSR	Age at Offense	Highest Grade	Prior Income	Current Income
1	C	794.05	C	PD	15	F	Yes	No	0	0	48	12	25K	15K
2	C	800.04	C	PD	9	F	Yes	Yes	0	0	39	12	25K	none
3	C	800.04	C	PD	15	F	Yes	No	0	0	63	13	25K	7K
4	C	800.04	C	PD	14	F	Yes	No	0	1	25	11	30K	20K
5	C	794.01	C	PA	9	M	Yes	Yes	0	0	54	13	105K	30K
6	C	800.04	C	PD	15	F	Yes	Yes	0	0	60	12	36K	7K
7	C	827.071	N	PD	Unk	Unk	No	No	0	0	59	13	32K	14.5K
8	C	800.04	C	PD	15	F	Yes	Yes	0	0	48	12	35K	8.5K
9	C	800.04	C	PA	14	F	Yes	No	0	0	48	14	72K	14K
10	C	800.04	C	PD	15	F	Yes	No	0	0	22	12	19K	3K
11	C	800.04	C	PD	14	F	Yes	No	0	0	27	12	32K	11K
12	C	800.04	C	PD	11	F	Yes	Yes	0	0	51	11	26K	12K
13	C	794.011	C	PD	10	M	Yes	No	0	0	33	12	23K	9K
14	C	800.04	C	PD	12	F	Yes	Yes	0	0	39	12	60K	5K
15	C	847.0135	N	PD	Unk	Unk	No	No	0	0	53	14	60K	17K

Key:

Race: C, Caucasian

Offense Type: C, Contact; N, Noncontact

Defense: PD, Public Defender; PA, Private Attorney

SRO: Sex-Related Offense

NSR: Non-Sex-Related Offense