WORKING WITH SEX OFFENDERS
A Practitioner’s Portfolio

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ASSESSMENT OF SEX OFFENDERS.

Introduction.
Officers working in the Probation Service may come into contact with people who commit sexual offences at various points in their offending ‘career’. Most common are the following points of contact:

- Offenders who have been charged with a sexual offence but not convicted.
- Offenders who have been convicted and sentenced to custody or a community sentence.
- Offenders in custody.
- Offenders prior to release from custody.
- Offenders who are being supervised in the community and therefore require treatment in the community.
- Offenders who have a previous conviction of a sexual nature.

Whatever the stage that you come into contact with someone who has committed a sexual offence, the importance of careful assessment cannot be overemphasised. Accurate assessment forms the only safe foundation for effective management and treatment of sexual offenders. Examples of the purposes that assessment might serve are as follows:

- Risk assessment
- Report writing such as PSR/parole reports.
- Assessment for suitability for treatment (e.g., suitability for a group)
- Assessment of treatment suitability (Grendon, SOTP, etc)
- Assessment of treatment efficacy
- Ongoing assessment of relapse prevention plans.
- In order to develop an appropriate supervision plan
- Prior to referral to specialist services (e.g., substance abuse, sexual abuse agencies).
A model of offending behaviour is a ‘conceptual framework’ or ‘way of thinking’ about an offence. Models are useful as they ensure completeness of assessment by directing the assessor to areas which may ordinarily be omitted.

Finkelhor (1984), devised the following model of sexual abuse (offending) which, although primarily applied to sexual offences, can in fact be applied to any offence against the person. Finkelhor describes his model as the ‘Four Preconditions of Abuse’ and as such it outlines the four conditions which are necessarily present for a sexual offence to take place. The model is composed of the following four stages:

**The Four Pre-Conditions of Abuse.**

1. The Thinking Stage.
2. Overcoming Internal Inhibitions or ‘Giving Permission’.
3. Overcoming External Inhibitions or ‘Creating the Opportunity’.
4. Overcoming the Victim’s Resistance.

The model is indispensable when following best practice or ‘What Works’ guidelines in assessing and treating offending behaviour and for assessing the impact of interventions or treatment. Most importantly, it is incredibly user friendly and can be built into the work of even fairly inexperienced practitioners. Once the model has become familiar it need not necessarily be applied formally, but can be ‘carried around’ as a sort of mental heuristic for thinking about offending. A full description of the model and how it is applied follows later in the document.

**Who can use the Finkelhor Model?**

The Finkelhor Model of sexual offending is a very simple model to apply, but it is important that those using the model have had some training in the theory and research underpinning the model and in the process of the application of the model. Equally, it is only possible to become proficient in the use of the model through a period of supervised practice.

Whatever the purpose of the assessment, it is important that the person doing the assessment has a clear understanding of the nature of sexual offending (research and theory) and the ways in which the
offender may try to avoid facing up to the problem. This is particularly essential in working with sex offenders, as they are generally psychologically well defended and go to great lengths to avoid exposure and the stigma that is associated with this.

It is also important that the assessor feels comfortable to frankly discuss complex and emotive sexual matters in relation to the offence.

Finally, sexual offences are committed by men, women and children of all races, cultures, socio-economic groups, sexual orientations and ranges of physical and intellectual ability. It may then be necessary to consider (whilst avoiding collusion) how these matters effect the offender/professional relationship.

**Why use the Finkelhor Model?**

Use of the Finkelhor Model holds the following advantages:

- It provides a structure or ‘way of thinking’ about sexual offending.
- It is comprehensive i.e., ensures completeness.
- The user friendliness of the model and its applicability to other situations allow easier engagement of the offender in assessment.
- It allows the offender to overcome denial.
- It allows identification and assessment of risk factors.
- It facilitates identification of treatment targets.
- It allows assessment of treatment efficacy.
- It is one of the primary bases for relapse prevention plan development.

**When would you use the Finkelhor Model?**

- Any stage when an understanding of the offence is required.
- When the identification of risk factors and the measurement of risk is required.
- To assess for suitability for treatment/ treatment suitability.
- To identify targets for treatment.
- To form an assessment baseline.
- To measure change.
- To develop relapse prevention strategies.
**How to Use the Finkelhor Model.**
The usefulness of the model can be greatly increased if care is taken to apply the model in a way that is acceptable to the offender. This generally means following a procedure that helps the offender to accept the model as a concept and consequently engages him/her as a ‘co-explorer’. The procedure is briefly outlined below.

1) Explain the model to the offender in terms of everyday behaviours first in order to gain acceptance of the model. Use some of the offender’s behaviours such as smoking or spending money that can be worked on without too much discomfort.

2) Take the offender on board as a co-explorer. It is often useful to explain that only when behaviour is fully understood that it can be changed. People who commit offences ‘out of the blue’ might be construed as far more dangerous as they have no control over it happening again.

3) Spend time on each stage of the model, approaching from different angles. Encourage elaboration and exploration. If you get stuck, apply the particular stage you are examining to an everyday example.

4) DON’T challenge distortions at this stage. Remember that this is an information gathering exercise and you need to know the full extent of the problem. Challenging faulty thinking at this stage increases defensiveness and reluctance to disclose.

5) When looking at stage four, ask the offender in detail about the offence. Pay particular attention to what they said and did.

**Preparation for Using the Finkelhor Model.**
It is important when applying any model of offending to prepare as thoroughly as possible. Generally, the more information that is available prior to the assessment, the more accurate the assessment. For this reason it is important that you gather factual material in advance. The following would be considered essential requirements:

- Read all the depositions in relation to the index offence (victim statements are essential).
- Read the list of previous convictions.
- Gather as much information as you can about previous convictions.
- Gather any information that is available already about the person’s personal and sexual history.
- Gather information from any assessment procedures that have already taken place.
It is also essential to refresh you memory regarding the theory of sexual offending, with particular emphasis on the offence type/s relevant to the individual you are assessing. In particular, you should remind yourself of the following ‘assumptions’ about sexual offending before you start the assessment:

**ASSUMPTIONS’ ABOUT SEX OFFENDING.**

1. They will have committed far more offences than convicted of. Convicted offences will represent the ‘tip of the iceberg’.
2. All offences are **premeditated**.
3. The role of **fantasy** and **masturbation** is central.
4. The offender will try to deny all/some of the offence by **denial**, e.g., justification, distortion, minimisation.
5. They will seek to **lay the responsibility for the offence elsewhere**.
6. They will say that the **offence is ‘out of character’**.
7. They will have built up an **addictive cycle of behaviour**.
8. The offender will say ‘**I won’t do it again**’.
9. There is **no cure, only control**.

The theoretical basis for these assumptions can be read in more detail in the general literature about sexual offending. Ideas for further reading are provided at the end of this document. These theoretical assumptions are central to the Finkelhor Model, and it is these assumptions that it aims to explore, with particular emphasis on assumptions numbers 2,3,4,5,6 & 7.

Specifically, the model is useful in identifying:

- Forms of premeditation and planning.
- The development and nature of sexual preferences and the content of sexual fantasy.
- The cognitive distortions that the offender holds regarding the nature of the offence, the responsibility for the offence, the victim and the effects of their actions.
- Components of the offence cycle.
The best way of illustrating the Finkelhor Model is by exploring each of the four pre-conditions in turn. It is important to acknowledge however, that in reality, the four stages do not necessarily follow sequentially, and that usually the four stages are operating simultaneously to a greater or lesser degree depending on the stage that the offender is at in the commission of the offence.

What is important is that all four conditions MUST be present for an offence to take place. It is also worthy of note that stages 1-3 are not illegal and no offence actually takes place until stage four is embarked upon.

**Stage 1 – The Thinking Stage.**

With the exception of reflexes (such as sneezing, coughing, blinking), all human behaviour is preceded by thought or ‘pre-meditation’. This is equally true of offending behaviour, including sexual offences. An essential ingredient in understanding offending behaviour is a careful analysis of the style and content of the thinking that precedes the offence. In employing the Finkelhor Model, this is undoubtedly the most complex and time-consuming stage of the behaviour to analyse. Many offenders seek to deny this stage by stating that their offence ‘came out of the blue’ and that it was something that they’d never even thought of before. It is important to recognise this as denial. Examination of the thinking behind an offence is an important stage for offenders in acquiring intellectual insight. In basic terms, you are trying to understand where they got ‘the idea to offend’ or the motivation to offend from. People commit sexual offences because at some level they want to. Finkelhor describes three ways in which this manifests.

Wanting to sexually offend because:

1. Sexual offending is sexually arousing. Offenders are aroused by the type of sexual activity contained in their offence, e.g., non-consenting sex, sex with children.
2. Sexual offending satisfies an emotional need, such as the need for power, anger expression and so on. Finkelhor refers to this as ‘Emotional Congruence’.
3. There is no other source of sexual gratification available or (more commonly), there is no other source of sexual satisfaction AS SATISFYING (i.e., the offence is the preferred form of sexual activity) available. He refers to this as ‘Blockage’.

For most offenders, offences are sexually arousing and also serve emotional need. Whether the offence is the preferred form of sexual activity is a matter for further exploration at the assessment stage.
Tracing back the thinking behind the offence.

Thinking that is related to an offence can often be traced back to childhood or adolescence. For example, attitudes, beliefs, deviant sexuality, anger, hostility and the desire for power are often deep rooted and begin as a result of an experience or experiences in early development. Attitudes, beliefs and ways of dealing with difficult emotions that are developed in childhood, often continue into adulthood without critical appraisal or change. Styles of relating to others also begin in childhood and continue into adulthood. Similarly, non-offenders can trace their own development such as the development of attitudes to women and any sexual stereotypes they possess (but not necessarily like!) back to childhood.

Often dysfunctional patterns of thinking and feeling begin here and are reinforced by selectively perceiving the environment around us in line with our already existing schemata. For this reason, dysfunctional thought and beliefs tend to be self-perpetuating. This explains why inappropriate beliefs tend to run in families and are difficult to change. In exploring this area, it is a good idea to examine the offender’s view of gender roles, any stereotypes used, ways of experiencing and expressing emotion, attitudes to violence, authority and so on.

Tracing Back Sexual Development.

All of us develop our sexuality by a similar process. That is to say that we are born with an innate sexual drive, the expression of which is to some extent shaped by our environment and learning experiences. That is to say that sexual feelings are experienced from birth and the development of sexual preferences and boundaries around behaviour is somewhat environmentally determined. For this reason, aversive events, such as sexual abuse or observing sexual violence, may effect the path our development will take.

Exposure to sexual activity that is too early in the development of the child, or that is too explicit or is abusive in nature can be damaging. Firstly, it may be damaging to the acquisition of appropriate sexual boundaries, it may lead the child to engage in inappropriate sexual behaviour themselves and specific damage may occur around the issues of power and control or through the development of deviant sexual interests. It is therefore no coincidence that many sex offenders have been abused in some way themselves. Also, many offenders have been exposed to pornography, either very early in their lives or of a nature that features violence and ‘unusual’ (paraphilic) sexual practices (such as bondage, exhibitionism, voyeurism, bestiality and so on). Exposure of this kind can have lasting effects on the...
development of the person’s ‘sexual tastes’. It is important to explore the offender’s early sexual development for these reasons. In addition, early exposure to sexual material or activity can play a role in determining someone’s sexual appetite. For example, people who have been sexually abused in childhood may continue to engage in compulsive sexual behaviour and/or promiscuity into adulthood.

**Sexual Fantasy and Masturbation.**

As already stated, the role of sexual fantasy and masturbation is central to the development of offending behaviour. For all people, offenders and non-offenders, the content of sexual fantasy reflects the type of ideas that we find sexually arousing. That is not to say that everyone would wish to act out all of these fantasies. For most people, their fantasy world (some of which may be ‘deviant’) consists of both ideas that they would act out in reality and ideas that they would not. For offenders, deviant sexual fantasy may occupy their entire fantasy world, may constitute the component that is most arousing, or may constitute the only part that they are able to act out. What is apparent, is that sex offenders have taken fantasies that are harmful to others and by some process translated those into reality, i.e., behaviour. This is why it is important to examine closely the content of offender’s fantasy world and the process by which it became outwardly expressed.

Of particular importance is to trace back thoughts about behaviours associated with the offence and how the thoughts developed over time. For example a rape fantasy may start as a fantasy about overcoming the resistance of a reluctant but eventually consenting partner and rapidly escalate to fantasies involving violence and force. There are two processes usually operating here. Firstly, sexual fantasies are rewarded (in the sense of behavioural psychology) by sexual arousal and ultimately by the rewarding nature of the physical sensations of orgasm. This means that sexual fantasies are potentiated with successive episodes of masturbation or other sexual activity. Secondly, inherent in all our fantasy worlds is the fact that fantasies soon become old and need to change to maintain their effect. These changes often take the form of an increase in the most sexually arousing aspect of the offence – for offenders this may be the violence involved or the age of the ‘partner’. This explains how sexual fantasies become more powerful and may escalate in terms of potential dangerousness. For offenders, fantasies are so powerful that they feel the need to act them out in reality. This generally doesn’t happen overnight and the offender will engage in a degree of planning and premeditation. Some offenders engage in a series of behaviours that are successive approximations to
the offence, i.e., they engage in a series of behaviours that move them closer and closer to the offence of their choice.

Offenders commonly deny that they have fantasised about behaviours related to the offence they have committed. Disclosure of accurate details of the fantasy world is often the last stage of denial to be overcome. Initially, offenders may tell you that they ‘only fantasise about consenting sex with an adult female’. This is not the case. The fantasy will be similar to the offence. One way of shedding light on this issue is to closely study the verbal dialogue between the perpetrator and victim. If the words the offender says in the course of the offence are aggressive, threatening, misogynistic or otherwise aggressive, then you can be sure that that is what the offender is thinking at the time and in his fantasy world.

All offences are planned at some level. Planning may vary from sexual fantasy to a map and collection of offence paraphernalia. Never accept that offences ‘just happened’ or ‘came out of the blue’. This may be a blatant untruth or may be denial so deeply entrenched that the offender is not currently fully aware of the planning that went into the offence.

The thinking stage can therefore vary between years, days and hours, depending on which you are focussing - a developing pattern or a specific offence.

**Denial of the Thinking Stage.**

It is very common indeed for offenders to deny this stage in their offending. This is understandable, as it would be far more socially acceptable to commit an offence that occurred ‘accidentally’. However, this is not possible, and it is important for everyone working with offenders to recognise this type of denial when it occurs.

Look out for the following statements that indicate denial of the thinking stage:

- It came out of the blue.
- It’s completely out of character.
- I don’t know what came over me.
- It was an accident.
- It just happened.
- I only ever fantasise about loving sex with my wife.
- I never masturbate/ have fantasies.
These are cognitive distortions. The above explanation outlines why offences cannot happen out of the blue or accidentally and further explains why offending is ‘in character’ for the person.

A full assessment of the thinking stage of the model is essential to appropriate intervention and is essential for the offender in terms of developing their understanding of why an offence occurred and how it can be prevented from happening again.

**Stage 2 – Giving Permission (overcoming internal inhibitions).**

All sex offenders know that the offences that they commit are wrong in some way. However the degree to which they are aware of the ‘wrongness’ of their behaviour and the way in which they interpret this will vary from individual to individual. At one end of the scale an offender may acknowledge the illegality of the behaviour, the immoral nature of the offence and the serious harm that it causes the victim. At the other end of the spectrum, the offender may acknowledge that the behaviour is illegal (but not in other countries!), but believe that it is not morally wrong and is not harmful to the supposed victim. Most offenders fall some way in between. In addition, individuals’ perception of their behaviour may change over time as they convince themselves of the ‘rightness’ of their behaviour, particularly if they never have to face any negative consequences of their behaviour.

All humans commit behaviours that they know to be wrong. For instance many people break the law in minor ways such as speeding, or commit other behaviours that are wrong or harmful, such as smoking, over-spending or having affairs. In order to commit a behaviour that is wrong, a person has to engage in a number of psychological processes to allow it to occur or to ‘give themselves permission’.

These processes are called ‘dissonance reduction’ and ‘cognitive distortion’. Cognitive dissonance, the psychological discomfort that follows trying to hold two contradictory and/or alarming ideas in our head at once, is extremely uncomfortable and therefore must be reduced. Think of the two ideas “I smoke” and “Smoking will kill me”. Pretty uncomfortable! So, smokers endeavour to reduce one side of the equation. They either stop smoking or, most commonly, try to alter the thoughts that tell them it is potentially fatal (or wrong). This is the point where cognitive distortions (CDs) come in to play. For example – ‘my grandmother smoked until she was 107 and never had a day’s illness’, ‘all this research into smoking and cancer is not proven’, ‘that’s all very well but I can’t possibly stop during my exams/divorce’. These thoughts are ‘cognitive distortions’ and serve the purpose of minimising or denying the dangerousness of the behaviour, justifying the behaviour and placing the responsibility for
the behaviour outside of the self. This cognitive distortion therefore reduces cognitive dissonance and allows us to engage in behaviour that we know we shouldn’t be doing. Offenders engage in similar types of psychological gymnastics to allow them to give themselves permission to commit sexual offences. (A full account of cognitive distortion can be found in the FPP portfolio on the subject.)

For sex offenders, cognitive distortions are dynamic risk factors. It is highly dangerous for sex offenders to engage in this process because the cognitive distortions in relation to the offence serve the following purposes:

1) Avoiding responsibility for some/all of the offence.
2) Denying there is a victim – completely or partially.
3) Allowing offending to continue.
4) Avoiding intervention, e.g., SOTP.
5) Avoiding facing own painful experiences/feelings.

For illustration, some of the above purposes are enlarged upon below.

Offenders will display cognitive distortions that deny that they are responsible for their actions. This may take the form of admitting that they committed the offence but blaming an external agent for ‘making’ them do it. Therefore, if the offender does not consider him/herself responsible for the offence, there is no need to feel bad about doing it. Examples are:

- I have a very high sex drive; it is beyond my control.
- I commit offences because alcohol makes me do it.
- I can’t control myself.

On the other hand they may distort the ‘wrongness’ of the behaviour. If the behaviour is no longer considered wrong, there is no cognitive dissonance. Examples are:

- Paedophilia is only illegal, not morally wrong.
- Children need to be taught about sex.
- Women really want sex when they say no.
- I was sexually abused and it didn’t do me any harm
- Everyone does it; they just don’t get caught.
- Men have a right to take sex if they want it.
Alternatively, they may place blame with the victim. Again, this means that they do not feel responsible or guilty. Examples are:

- **Women out alone at night want to be raped.**
- **Children are very seductive.**
- **Women really like it rough; they just can’t admit it.**

They may then deny harm to the victim to justify their actions:

- **Rape doesn’t really hurt anyone.**
- **They’ll get over it.**
- **Children don’t understand so it does them no harm.**
- **The child will be too young to know what is going on.**

Finally, they convince themselves that they will not be caught as a final way of giving themselves permission. This is called ‘super-optimism’. (In reality, they probably won’t get caught, so this is less of a distortion than it appears.) What is important is that they believe they won’t get caught in order to avoid any anticipatory anxiety about the consequences for themselves. This is one of the reasons why various forms of deterrence are not effective. If this is not a first offence, evidence from previous offences is used to further give permission, e.g., not being caught, not seeing any negative consequences for the victim.

In summary, in order to commit a sexual offence, offenders need to give themselves permission to do so. This process may be engaged in for years, weeks or days before the offence is committed. Some offenders will have rehearsed these thoughts so often that they believe them.

It is very important that in the course of assessment that all ‘permission givers’ are elicited for the following reasons:

- It will help you understand how the offence came to occur.
- They are dynamic risk factors.
- They may be used to give permission to commit another offence.
- They are one of the primary targets for treatment.
Stage 3 - Creating the Opportunity.

In stage one, the offender has thought about the offence and probably rehearsed it many times in his mind. In stage two, the offender has changed their stance on the ‘wrongness’ of the offence and equipped themselves with a number of reasons why offending is a ‘reasonable’ or less harmful thing to do. In the third stage, the offender needs to create an opportunity for the offence to occur. Sexual offences don’t ‘just happen’. On the contrary, the opportunity for the offence to occur has to be created by the offender. Some degree of forethought and planning has to take place for an offence to occur. For example, it is unlikely that someone will run into a communal probation office and commit a sexual offence and it is unlikely that a rape would occur in the middle of a crowded supermarket. The reason for this is that offenders are generally very careful about where they commit offences. In fact, the offender takes care to create an opportunity to offend that fulfils the following conditions:

1) The victim is alone and therefore vulnerable
2) They are unlikely to be seen/caught.

The exact nature of this ‘creating the opportunity’ will be unique to the perpetrator but there are a number of common themes that will become apparent. Firstly, there are often similarities between offender types and secondly the same perpetrator often uses the same modus operandi on each occasion. The choice of method may simply be that this is the best way of creating the opportunity but, for some offenders, the conditions under which the offence is committed are an essential component to fulfilling the offence fantasy. This is often how offenders are caught - through analysis of the conditions under which they offend.

Offences against adults often involve a degree of targeting. This means that a person is ‘chosen’ to be the victim of the intended offence. At a basic level, the victim might simply be targeted because they are alone at night in an isolated spot. When this occurs, the perpetrator is often cruising, i.e., looking for just such a potential victim. On the other hand, victims may be targeted on much more complex grounds, such as appearance, age, occupation, being someone against whom the offender has a grudge or has been rejected by, and so on. In these instances, more complex ‘creating the opportunity’ occurs, and may involve stalking, following and monitoring the victim’s behaviour to ensure privacy. Most offences fall somewhere in between. Sometimes, perpetrators go to great lengths to create an opportunity, such as entering a particular occupation where victims are vulnerable, e.g., operating theatre technician, counsellor, DJ.
Most rape offences against adults are committed by someone the victim knows, but ‘creating the opportunity’ still occurs, albeit in a more subtle form. In date rape and rape against partners, it is very easy to create the privacy needed as it is part of an every day interaction and moreover, the perpetrator believes that they are unlikely to be reported and the victim unlikely to be believed if the offence is reported.

Offences against children are also committed within the context of a carefully prepared opportunity. Occasionally, lone children are attacked by a stranger but, more commonly, the scene is carefully staged. Again, offences against children are more commonly committed by someone known to the victim, such as a relative, sports coach or someone who has ‘befriended’ a family. The opportunity is created by, over time, the perpetrator placing themselves in a position of trust. This means that the perpetrator can be alone with the child and can also exercise a degree of authority. Again, offenders may go to great lengths to create the opportunity such as training in a particular occupation, doing voluntary work and so on.

It is not uncommon for offenders to deny that they deliberately engineered offence conditions. They will say that ‘I was in the wrong place at the wrong time’ or statements such as ‘I was just taking a short cut’, or ‘I was just driving around at night’. Of course the level at which individual offenders are aware of this behaviour varies, but this behaviour is always purposeful and is never a coincidence. Denial of intent or ‘creating the opportunity’ is a cognitive distortion and therefore a dynamic risk factor.

In treatment programmes these creations of the opportunity are referred to as ‘Seemingly Irrelevant Decisions’ or SIDS. In the analysis of the offence it always transpires that these decisions, such as the paedophile walking through the park or the rapist walking through dark alleys, were anything but irrelevant. It is important to extract all the SIDs for each offender as the acknowledgement of these is essential in taking responsibility for the offence and avoidance of these behaviours will be an integral feature in relapse prevention.

**Stage 4 - Overcoming the Victim’s Resistance.**

In stages one to three, the perpetrator has fantasised and planned the offence, convinced themselves that the behaviour is reasonable and created the opportunity for the offence to occur. In none of these stages has an offence been committed. It is only in the fourth stage of the model that an offence
occurs. In fact, many offenders and non-offenders may go through the first 3 stages and change their mind prior to an offence being committed.

In the final stage of the model, the offender must overcome the resistance of the victim. Again, perpetrators may deny this stage of the offence, often with an account of how the victim did not resist in a visible or audible way. This is not to say that the victim was not resistant, it simply means that the way in which the offender overcame the victim’s resistance was highly effective. In violent sexual offences it is easy to see how the resistance of the victim is overcome – by the use of direct violence, weapons, bindings, verbal intimidation and threats. Offenders invariably minimise this aspect of the offence and it is important to read the victim statements to know the real picture.

Another way of overcoming the victim’s resistance is to render them otherwise unable to resist. Date rapists have long used alcohol to overcome the resistance and lately Rohypnol (a controlled drug) is being used to great effect. Rohypnol is particularly popular as it also initially deprives the victim of any memory of the events. Alcohol and drugs are used commonly by paedophiles to overcome resistance and also as a part of the grooming process.

**Grooming** is the term used to describe behaviour by the perpetrator that overcomes the resistance of the victim over a course of time. Generally, this term is applied to child molesters or paedophiles, but it is also a technique sometimes used by perpetrators of offences against adults with whom they have a relationship of some sort. Grooming involves manipulating the victim into acceding to sexual contact by a series of rewards and threats/punishments. Commonly, the perpetrator has increasing social contact with the victim and paves the way for offending by offering gifts or providing special attention or treats. In many cases, individuals who are vulnerable to this type of attention are targeted, e.g., neglected children or emotionally needy adults. This way, the perpetrator develops a ‘special’ relationship with the victim, and is often trusted and loved. The perpetrator may also show flashes of anger on occasion or otherwise indicate that they can be dangerous, so that the victim is aware of the potential for violence, even though it may not have yet occurred. Threats of rejection are also used as a means of securing a close bond with the victim. Finally, the perpetrator introduces minor sexual contact into the relationship, often as part of ‘rough and tumble’. If the victim resists, this behaviour is justified as a part of a ‘loving’ relationship or as a special secret, or threats may be made. Either way,
the behaviour occurs, resistance stops and the secret is safe. Gradually, the sexual contact increases in
severity and frequency. Threats may increase correspondingly and may be directed towards the victim
or someone/something the victim values. Victims are also commonly told that they will not be
believed if they speak out. Paradoxically, the victim may become more attached to the perpetrator as a
result of this behaviour and therefore more willing to give in to the behaviour and protect the
perpetrator from the law. This type of grooming is most commonly committed by adult perpetrators
against child victims, but may also occur against adults, particularly when there is a power imbalance
within the relationship and where other types of violence or threat are occurring (domestic violence
being an obvious example).

Finally, murder is the ultimate means of overcoming the victim’s resistance. The murder may be an
integral part of the sexual fantasy, or it may be a means of avoiding detection.
It is very important to ascertain the method of force used and to work on this with the offender. Firstly,
this allows cognitive distortions about the victim and the offender’s actions to be identified and
treated. Secondly it allows the offender to take responsibility. Thirdly it allows analysis of attitudes to
victims and is the beginning of victim empathy work. Fourthly, analysis of this area will give you
insight into the motivation of the offender and the content of their fantasy world. The method of force
used will be part of the initial sexual fantasy and will reflect the purpose of the attack. Verbal dialogue
during the offence is particularly powerful in revealing motivation.

**CHECKLIST FOR COMPLETING THE FINKELHOR MODEL.**

1. **Thinking Stage.**
The following area of functioning should be explored with the offender to ensure completeness.
   • Full personal history (emphasis should be placed on relationships with parents, partners and those
     represented by the offence such as women, children. Also, analysis of the experience and
     expression of emotion.)
   • Psychosexual history (consider using an interview guide such as the Sone Sexual History
     Background Form (Sone, 1984)). Particular attention should be paid to abnormal sexual
     experience, previous offences, the use of pornography, masturbation and fantasy.

**Recent Factors**
• What recent events have contributed to the thinking stage?
• What are the person’s current sexual outlets, practices, tastes?
• How has the person’s thinking about the offence developed recently?
• Is there any evidence in escalation of fantasy content/pornography use?
• How often was the offender masturbating to fantasies about the offence prior to its commission?
• How was the offence planned?
• Did the offender rehearse any of the offence components?
• Are any factors/events evident to explain the move from fantasy into reality? (Consider doing a multi-modal offence analysis (Lazarus, 1979))
• What emotional needs did the offence serve? Why had the need increased recently?

Can you now understand how this offence fulfilled Finkelhor’s categories of being sexually arousing, fulfilling an emotional need, and blockage? If not, seek more details.
Remember that denial concerning this stage is almost universal and that initial accounts are unlikely to represent the true picture.

2. Giving Permission.
In exploring how the person gave him or herself permission to offend, make sure you explore the following issues.
The offenders view regarding:
• Their view of the offence in terms of right or wrong.
• The level of responsibility they take for the offence.
• The other factors/people they hold responsible.
• How they justify to themselves committing the offence.
• Their view of the effects for the victim.
• Their attitude to the victim.
• Their view at the time of the likelihood of getting caught.

Consider using a cognitive distortion checklist (such as the checklist in the FPP portfolio on Cognitive Distortion).
3. Creating the Opportunity to Offend.

Make sure you have asked about the following:

• Where did the offence take place?
• Why was the offender there? (look out for SIDs)
• Why was the victim there?
• Why were they alone?
• How did the offender minimise the risk of getting caught/ make sure they had privacy?
• How was the victim chosen/targeted?

4. Overcoming the Victim’s Resistance.

• How did the offender overcome physical/psychological resistance – violence, weapons, threats, substances?
• What did the offender say to the victim (use the victim statements)?
• Did anything in the environment overcome the victim’s resistance?
• If grooming was employed, detail all the rewards, punishments, threats and any violence used.
• How did the offender try to stop the victim disclosing the offence?
• If the victim was killed, how does the offender explain this?

USING INFORMATION DRAWN FROM THE FINKELHOR MODEL.

The information drawn from the Finkelhor Model forms the basis of a number of ways of working with the offender. Some of the ways are outlined below.

Risk Assessment.

Accurate risk assessment can only be performed when in receipt of a full set of information about the person’s offending. Only then can estimates be made of the likelihood of someone re-offending in a particular way and the type of risk presented to others as a result of this offending. Two factors need to be taken into account:

• Static Risk Factors
• Dynamic Risk Factors.
1. Static Risk Factors.
Static Risk Factors are factors about the offender that cannot change over time, such as historical factors and demographic factors. The primary assumption in assessing static risk factors is that past behaviour is the best predictor of future behaviour. For this reason, the Finkelhor model can be used to gather information about past offence related behaviours such as previous offences (not necessarily convicted). Particular note should be made from the analysis of the ‘thinking stage’ of previous offences, the nature and number of offences, the relationship between victim and perpetrator, and the circumstances under which the offence took place. Two factors should be borne in mind:
• The greater the number of offences, the greater the risk.
• The broader the range of offences (sexual/violent, types of victim, types of offence), the greater the risk.

2. Dynamic Risk Factors.
Dynamic Risk Factors are factors about the individual that directly contribute to the offending and are changeable over time. There are a number of core dynamic risk factors for sex offenders, but these occur in different quantities and combinations for individuals. Examples of dynamic risk factors are:
• Deviant sexuality (offence related sexual interests)
• Cognitive distortion
• Emotional loneliness
• Deficits in victim empathy
• Poor relapse prevention plans.
• Victim stance (where the offender sees themselves as the victim).

Each of these dynamic risk factors can be identified from the Finkelhor model. For each offender, other dynamic risk factors may contribute to offending, such as mental health problems, substance abuse and so on. Remember that a dynamic risk factor only contributes to the risk if a) it applies to that individual and b) it is related to the offending. Risk changes by alteration of these dynamic risk factors. For example, increases in cognitive distortion increase the risk, or an improvement in victim empathy decreases the risk.
Report Writing.
Whatever type of report is required, there are usually sub-agendas of outlining the risk that is presented and identification of treatment targets. The best way to do this is to identify the dynamic risk factors for the individual and comment on the extent to which they are still operating and the means by which they might be reduced. For example, it is appropriate at PSR stage to comment on any cognitive distortions, the degree to which the offender can accurately empathise with the victim and so on. The same rules apply to reports for parole, reports detailing treatment progress and so on.

Treatment/Intervention.
Literature on the treatment of sex offenders can be broadly divided into: i) that concerned with helping the offender gain insight into their offending and ii) that helping the offender to control or remove those influences which maintain the offending. Given the complex nature of sexual offence acquisition and maintenance, both approaches are important, (Perkins, 1991). Use of the Finkelhor Model can greatly facilitate both these processes of treatment.

One of the rules of successful intervention is that the aims of the intervention must match the needs of the offender. The treatment of sex offenders is therefore designed around targeting dynamic risk factors (or criminogenic need). In selection of interventions, the worker should aim for the ‘best fit’ between the needs of the individual and the aims of the group. The Finkelhor model is often explored with the individual within treatment groups (e.g., the SOTP), but this is not always the case. An advantage of using the Finkelhor model prior to any group is that it identifies some of the relevant dynamic risk factors and allows the focus of the intervention to be placed where it is most needed. If for some reason the person is unsuitable for group interventions, then individual interventions can also be designed on the findings.

The Finkelhor model can also be used as a way of evaluating interventions. Attendance at and participation in a group alone does not reduce the risk of re-offending (though non-attendance may increase the risk). Instead, systematic measures have to be made of the offender’s performance on the dynamic risk factors that are relevant to their offending. This can be done in relation to the Finkelhor Model. At the end of treatment, offenders should be able to identify the elements of the thinking stage that are relevant to their own offending. Secondly, they should have identified and challenged the ways in which they give themselves permission to offend. Thirdly, they should understand the way in
which they created the opportunity to offend and be able to demonstrate ways of avoiding these activities in the future. Finally, they should understand how they overcame the resistance of the victim. As a consequence, they should be able to accept full responsibility for the offence, express appropriate victim empathy and have developed a comprehensive relapse prevention plan. These targets should form the basis of any post-treatment report. If any of these targets have not been met, then a means by which outstanding treatment needs can be met should be devised.

Relapse Prevention.
Relapse prevention work can only be done after intervention, i.e., the offender must be in the ‘maintenance’ stage of the stages of change model (Prochaska and DiClemente, 1986). The reason for this is that relapse prevention essentially means ‘behavioural self-management’. In order for offenders to manage their own behaviour they need to know the following:

• Why they commit sexual offences.
• How those offences come about in terms of high risk thoughts, feelings, behaviours and situations (lapses).
• How to avoid, control or escape the above high risks.
• The effects of their behaviour on their victims.

The literature on Relapse Prevention outlines more fully how this is achieved (for suggestions, see the end of the document). However, the Finkelhor model is invaluable in assessing the areas of the offenders’ functioning that impact directly on their propensity to offend.

Confidentiality.
In using the Finkelhor model as a way of analysing sexual offending, it is likely that you will receive information that lies outside of normal confidentiality agreements. Examples of this type of information are details of the offender’s own sexual abuse, details of offences that have been committed for which the offender has not been convicted and any statements of intention to re-offend. For this reason, it is essential that clear boundaries are set with regard to confidentiality prior to commencing work on the model.
References.

Suggested Reading.