

Causal factors in the sexual abuse of children by adults

A psychological summary

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This publication offers an informed approach for understanding and intervening in the serious community problem involving the sexual abuse of children by adults, and related issues.

PREFACE

The effects of child sexual abuse on victims and those around them are serious and sometimes catastrophic. The problem is also cyclical in that certain former victims are at greater risk of perpetuating abuse and associated harms on others than non-victims.

What can be done by way of prevention? The psychological treatment of abusers is one approach which is endorsed, and is designated as a form of **secondary prevention**. What about **primary prevention**? Education of children about appropriate and inappropriate touch, and encouragement to speak up, has been applied for some time, but fails to fully address the problem, as the solutions that reduce risk are properly the responsibility of adults: in particular the carers of children.

In Science and Engineering the concept of **root cause analysis*** is applied to ascertain the determinants of a problem so the relevant factors can be addressed. This publication provides psychological evidence of the root causes of child sexual victimization by adults, so that through evidence-based community education the incidence of this harmful problem can hopefully be reduced over time.

*Root cause analysis is the process of discovering the root causes of problems in order to identify appropriate solutions.





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What do sexual offenders have in common?

*Most sexual offending is learnt and is associated with psychological factors during childhood, notably, "**negative or adverse conditions during early development**" (Faupel, 2015, p.1).*

It is commonly believed that as most former victims of child sexual abuse do not go on to become perpetrators, victimization **is not** a causal factor in that type of crime. That conclusion is unfounded and incorrect :

The overwhelming evidence is that the majority of non-violent adult offenders were victims of child sexual abuse themselves (e.g., Jespersen, Lalumiere & Seto, 2009).

Victimization is thus an important causal factor in the perpetuation of abuse, but it is not the total explanation. A more complete analysis is provided in this publication.

The effects of childhood adversity

Forensic psychological assessment of adult offenders against children in Western Australia (reported in Cicchini, 2015) has identified the following:

- (a) the presence of unmet **dependency needs** as measured by personality tests;*
- (b) produced by a history of affectional neglect during childhood, particularly involving physical touch and care; and*
- (c) the presence in childhood of a history of sexual victimization (most offenders) or engaging in precocious sexual activity with other children* (the minority).*

*Precocious sexual experiences were identified by Gebbhard, Gagnon, Pomeroy & Christenson (1965) as possible precursors of sexual offending by adults.

Dependency needs refer to the need for affection, physical touch, and attention.

Regarding point (a) above, **a research publication in the USA** which compared the psychological need profiles of adult abusers and a control group using the same measure as one used in my psychological assessments of offenders **obtained similar findings in 1988.**

As a consequence of childhood adversity most abusers of children tend to have low esteem, are unassertive, prone to self-blame, are self-focused, highly dependent (needy for affection) and identify with children (Cicchini, 1991).

In sex offenders against children (unlike rapists) the motivation is not anger, violence or power, but the need for affection, affiliation, recognition and to feel special (Groth, 1979).

In a study of 50 sex offenders against children and 50 offenders in each of three other offender categories, the attributions or reasons for their offending were elicited by a researcher. It was found that 68% of the offenders against children offered explanations categorised by the researcher as emotional needs in the form of **“urges to be wanted”, “urges to be loved” and “needs to be cuddled”**.**

In contrast, 96% of rapists’ explanations fell in the categories of “urges to have sex with an adult female”, “situation”, “feelings of anger” and “emotional build up” (McKay-Lawes, 1992).

****An offender who was a victim of sexual abuse and neglect when placed in an institution as a young boy, told me his adult offending was “a crime of love”. In reality this type of offence is “a crime **for** love”.**

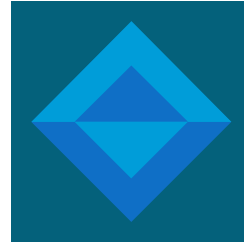
A new understanding derived from clinical experience which I have been disseminating to professionals since 2009 is that sexual touch during childhood in vulnerable boys (those deprived of adequate nurturance and attention) can produce a type of **traumatic sexualization**.

That effect manifests as a confusion or contamination of affectional needs by pleasurable feelings produced by sexual touch, which endures. This often leads to the use of sex as coping to quell distress or restore wellbeing, which can begin manifesting during development as earlier onset of masturbation, and persist as sexual preoccupations or hypersexuality in adulthood.





When do adults offend?



Offending acts by men are typically triggered by life stresses or losses that bring to the fore their unmet dependency needs, and sexual touch is used to temporarily restore wellbeing. Often the abuser re-enacts aspects of their own childhood sexuality with the victim.

A more detailed explanation of the inner processes in sexual offending relapse (originally described in regard to sexual offences against adult females) is presented by Lievore (2003).

Citing the work of Hudson, Ward & McCormack (1999), Lievore states, "Within the offence cycle, offenders follow different pathways to relapse, but there is a relatively predictable sequence of precursors leading up to offending. **The cycle originates in negative emotions**, moves to fantasy and cognitive distortions, progresses to planning the offence and finally results in acting out the fantasy or implementing the plan" (Lievore, 2003, p. 72, emphasis added).

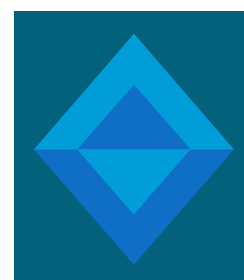
*What I found when conducting hundreds of psychological investigations on offenders (of all types) for the West Australian Courts was that **a major component of the negative feelings or upsets that preceded offending was pain or tensions arising from frustrated needs in childhood, which were typically residing unconsciously in memory.***

In the case of sex offenders against children the feelings relate to dependency needs (the need for nurturance, affection and attention). And the presence of such unmet needs can be measured via psychological instruments.

The clinical evidence

My observations in conducting hundreds of Psychological assessments are that negative emotions are always at the root of sexual and other offences, and that **the underlying emotional state prompting the fantasy & behavioural sequence** described in the previous page **is produced by - and constitutes an index in memory of - a frustrated psychological need in childhood.** Those emotions are elicited or activated (brought to the fore) by current life stresses, and follow the pleasure-pain principle by motivating responses that transform distress into a more favourable feeling state.

When an offender has developed a habit through repeated offending, the drivers described above may not be readily apparent, ***but research shows that relapse in sexual offenders against children is heralded by a deterioration in mood and felt wellbeing*** (e.g., Proulx, Perrault & Ouimet, 1999) ***which if recognized and addressed by seeking professional psychological help, would contribute to a reduced incidence of child victimization.***



So what can we do by way of prevention?

An appreciation of relevant causal factors can be applied constructively to reduce the incidence of adults sexually abusing children, as in the educational resources developed in Western Australia (Cicchini, 2008; 2012; 2013).

Offenders assessed after being convicted of child sex offences were sometimes shocked by their actions, and also hampered by knowing they had a problem, but had no known avenues for getting help.

PREVENTION can be addressed in several ways:

1. providing information about the true causes of sexual offending to better protect children from affectional neglect, traumatic sexualisation, and the risk of being victimised;
2. the provision of information about early developmental, as well as risk factors in adulthood (stressors) commonly associated with abuse, that adults can use to self-assess, and reach out for help; and
3. Offering professional assistance by way of treatment - by making available a contact list of therapists.*

In W.A. these options were provided via prevention information booklets or Guide# (Cicchini, 2012). Printing of the 2012 information booklets was funded by local Psychologists who shared the same vision and offered to make public their availability to offer treatment to adults at risk of offending against children.

***A positive offshoot has been the police making available a contact list of such practitioners to persons charged with Internet-related child sexual offences such as downloading Child Exploitation Material (CEM) to reduce suicide risk and facilitate access to treatment.**

For more information on the Prevention Guide, see
www.PreventingChildSexualAbuse.Org

Why are some offenders violent?

Sexual offences against children and adults where violence is involved are primarily due to the perpetrator having experienced severe developmental trauma, such as the experience of cruelty, or similar adversity. Such events can induce learnt behaviours and personality features whereby wellbeing and reduction of distress is facilitated by control-seeking or the experience of pleasure by transforming helplessness into feeling powerful, and from sexual arousal associated with hurting or the domination or humiliation of a victim .

In Australia such offenders against children are a minority.

Common precursors to offending

Initial offending or recidivism in adults (involving both violent and non-violent sexual offences) typically occur in response to the triggering of vulnerabilities (negative feelings in memory from traumatic childhood events and neglect) by current stresses, disappointments or set-backs.

All sexual activities that transform or displace negative feelings can be habit-forming and undermine motivation or desire to desist. Some sex offenders in therapy are able to acknowledge ambivalence about giving up undesirable, but pleasure-producing, habits – and this can be addressed.

Since developmental processes during childhood are principal determinants of child sexual abuse, domestic violence and other offences, a preventative community health approach to such harmful activities needs to supplement the present policies relying on deterrence through punishment.

The psychology profession and the media have a responsibility to inform the community about the true causes of offending behaviour to promote more constructive solutions to prevent harmful activities, many of which in Australia are currently incorrectly explained via gender-biased ideology. This is most apparent in the way the issue of family violence is being managed by ignoring the psychological data base on the childhood origins of domestic violence and other antisocial behaviours, and the harmful effects of poor parenting, attachment issues, and neglect.

what can we do to improve community awareness?

A need exists for educational initiatives which explain that unmet needs for attention, affection, security, etc. through neglect, misadventure and trauma during development are primary ingredients in the perpetuation of community problems such as sexual offending and family violence.

Psychologists and well-informed citizens can be in the forefront in advocating for a shift from a punishment to a mental health approach to crime, including in the ever-growing problem of the use of Child Exploitation Material (CEM) obtained via the Internet for stimulation, which can predispose individuals with relevant childhood histories and other difficulties to become addicted.

Four CEM offenders recently assessed for Court purposes all suffered from erectile dysfunction, from various confirmed medical conditions including **diabetes, heart disease** and **prostate cancer**. None had interests in abusing children, but became attracted to the materials in attempts to promote mental arousal and excitement. Judicial processes and outcomes ought to take such factors into consideration.

Apart from sharing knowledge about the care and nurturance of children, ***opportunities and encouragement for affected individuals to seek help to overcome inappropriate behaviours and habits need to be put in place and promoted by Governments, professionals, and the media.***

I have suggested that **the National Strategy to Prevent and Respond to Child Sexual Abuse** needs to include a government funded facility that:

- (a) prepares and disseminates relevant educational material to the community;*
- (b) has a comprehensive help centre or referral service that adults at risk of sexual offending or having inappropriate sexual habits can contact for assistance;*
- (c) includes a contact list of psychologist practitioners who can provide the therapeutic interventions required; and*
- (d) promotes a Government amnesty so addicted persons with electronic devices can for a fee have the noxious content removed, not be prosecuted, and be referred for psychological treatment.*

About the author

Mercurio Cicchini is a semi-retired Clinical Psychologist in private practice who specialised in preparing psychological assessments on behalf of the WA Government on generalist, violent and sexual offenders for over 30 years.

Mercurio has an interest in community and professional education about the childhood origins of crime and mental health issues in adults that impact on the wellbeing or safety of members of the community, with a view to encouraging prevention.

He is the author of an award-winning self-help book for adults for improving self-esteem: **Let your true self shine: How to recognise and overcome the Barrier that maintains low self-esteem.** (2009)

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Child Sexual Abuse Prevention: Links to resources

AUSTRALIA

www.bravehearts.org.au

www.safecare.org.au

www.PreventingChildSexualAbuse.org

www.stopitnow.org.au

www.childsafety.pmc.gov.au/

(Australia's National Strategy to Prevent and Respond to
Child Sexual Abuse 2021-2030)

INTERNATIONAL

www.stopitnow.org

www.d2l.org/ Darkness to Light (USA)

www.troubled-desire.com/en

(TROUBLED-DESIRE Global Dunkelfeld Project)

also www.dont-offend.org

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