

Małgorzata H. Kowalczyk

Nicolaus Copernicus University in Toruń
mhkowalczyk@umk.pl; ORCID: 0000-0002-7950-998X

Sexual Predators Analysis of Risk Factors and Protective Factors in the Context of Undertaken Corrective Interventions

Abstract: The aim of this study is to identify the spectrum of risk factors, both static and dynamic in nature, and to highlight factors antagonistic to them. Understanding the range of factors conducive to engaging in sexually criminal behavior by women has significant therapeutic-corrective implications. It allows the development of interventions tailored to this category of offenders and assesses the risk of recidivism into criminal behaviors. The method used is the analysis of secondary sources. The study is divided into three parts. The first part provides a characterization and interpretation of concepts related to the sexual abuse of children. The second part characterizes women perpetrators of sexual abuse of children. In the final part, risk factors related to committing contact sexual offenses by women are characterized. Both so-called static factors and dynamic factors (DRF) are considered. An additional element useful in developing corrective interventions is the identification of protective factors (PF), which not only reduce the risk of recidivism but also indicate a desirable direction for corrective changes.

Key words: predatory aggression, sexual exploitation of children, female sexual offenders (FSO), dynamic risk factors (DRF), protective factors (PF), corrective interventions.

Introduction

Committing sexual crimes, both contact-based and those excluding direct perpetrator-victim relationships, is primarily attributed to men. This is partly because sexual crimes committed by women attract significantly less attention compared to acts of the same nature committed by men. The lower level of interest may be influenced by the belief that women rarely, if ever, engage in such crimes. Such opinions are supported by the perception of women in our society as mothers and caregivers rather than ruthless perpetrators of child sexual abuse. Even if such behavior occurs, women are often seen as victims of men, succumbing to their pressure. As a result, women are ascribed qualities of passivity and submission rather than aggression, especially sexual aggression. According to findings from researchers in the United States, Canada, the United Kingdom, and Australia, female perpetrators¹ of sexual crimes constitute approximately 5% of the offender population in this category (e.g., Sandler and Freeman 2009; Vandiver and Kercher 2004; Cortoni and Hanson 2005). Female sexual offenders (FSO) require in-depth research, including the development of effective therapeutic and corrective interventions. The aim of this study is to identify the scope of dynamic risk factors (DRF) and protective factors (PF), the recognition of which may contribute to the development of effective corrective interventions. Understanding both risk and protective factors can also aid in assessing the risk of recidivism for women who have committed child sexual abuse. The applied method involves the analysis of secondary sources (Rubacha 2016).

Concepts related to sexual abuse of children

The essence of child sexual abuse is encompassed by the concepts of sexual exploitation, sexual abuse, sexual harassment, pedophilia, sexual violence, and sexual harm (Kowalewska, Jaczewski, Komosińska 2001, p. 52; Beisert 2017, p. 20; Sajkowska 2002, p. 6). However, this does not imply the interchangeable use of these terms. It is necessary, for instance, to differentiate the scope of the concepts of pedophilia, exploitation, and sexual violence. Not every form of sexual exploitation or pedophilic behavior involves violence, meaning that the concept of sexual violence will not be synonymous in such cases.

The term pedophilia (Gr. *paidos* and *philia* – “love for children”) refers to both criminal acts and sexual preferences, characterized by the perpetrator’s

.....
¹ However, it should be noted that these are estimates, behind which lies an unexplored area of dark numbers.

inclination to satisfy their erotic desires with the involvement of children (Podgajna-Kuśmerek 2003).

Pedophilia is recognized as a psychosexual disorder in which an adult experiences sexual arousal and satisfaction through sexual contact with a sexually immature child (Krajewski 2011, p. 43). It is a broad concept and is characterized differently depending on the research perspective. Pedophilia is always associated with the relationship between the perpetrator and the child, their motives, as well as the age and developmental level of the minor. It also concerns the nature of the act. Among clinicians, definitions of pedophilia are created to best describe the phenomenon and make accurate diagnoses based on it. Such disorders are considered as a disease/disturbance of sexual life (Beisert 2017, p. 20–21). In the case of pedophilia, it involves “sexual interests so profoundly disturbed that they impair the ability to maintain an affective-erotic relationship between people” (Seligman, Walker, Rosenham 2003, p. 585). From a legal perspective, this phenomenon is described as a “crime against the sexual freedom of a minor” (Beisert 2017, p. 30). This act is covered under Article 200 of the Criminal Code (Quote: Criminal Code of June 6, 1997).

The phenomenon of pedophilia is not homogeneous. Existing differentiating criteria indicate numerous possibilities for categorizing perpetrators of pedophilic acts. The most frequently cited criterion takes into account the category of objects that a pedophile focuses their sexual interest on. In the first category, pedophilia pertains to individuals exhibiting strong sexual interest in children, with children being the sole object of their sexual interest. This type of pedophile does not experience sexual interest in adults. The second category involves a pedophile experiencing sexual attraction to both children and sexually mature adults (Seto in: Laws, O'Donohue (eds.), 2008, p. 164). Nicolas Groth, William Hobson, and Thomas Gary employ a similar classification, describing the first type as regressive pedophilia, wherein the perpetrator satisfies their sexual urges with an adult partner but may commit an act with pedophilic undertones under specific circumstances (the child serves as a substitute sexual object and is treated as an object). On the other hand, the second type is termed fixated (true) pedophilia, where the sole sexual preference for an adult individual is sexually immature children. Fixated pedophiles often struggle to restrain their pathological tendencies. Many of them choose professions and activities to ensure optimal access to children (Kowalczyk 2014, p. 175). In Polish literature, a similar division is applied by K. Imieliński, distinguishing between proper pedophilia (fixated pedophiles) and regressive pedophilia (substitute pedophiles) (Imieliński 1970, p. 199). In other cases, sexual impulses may be directed, in line with the perpetrator's age preferences, exclusively towards children at a specific stage of development, such as infants or adolescents. In such cases, distinctions are made for various age preferences: infantophiles: interested in children up to 5 years old, pedophiles: interested in pre-pubescent children, ephebophiles: interested in children between

13 and 15 years old, who have just reached maturity or are in the period just before puberty (Lew-Starowicz 2000). Considering the emotional relationship with the victim, William Groth identified uncomplicated pedophiles, who more often choose boys than girls as their victims, typically in the prepubertal age, and complicated pedophiles, who typically choose girls as victims, displaying characteristics of the initial phase of maturity (quoted in Pospiszyl 2014, p. 76). Although pedophilic behaviors are primarily associated with men, they can also manifest in the preferences of women, as will be discussed further in the study.

Pedophilia, whether viewed from a legal, clinical, or societal perspective, is universally regarded as harmful and undesirable behavior. Therefore, it is disconcerting to note an observable increase in the acceptance of pedophilic behaviors, manifested in activities of groups promoting pedophilia and suggesting that it has certain virtues. Pedophilic activists advocating for so-called “positive pedophilia” suggest that children have their own sexuality and the need to express it, and their actions are meant to aid in their development. “Positive pedophilia” is supposed to be the opposite of “bad pedophilia” associated with the sexual exploitation of children. The North American Man/Boy Love Association (NAMBLA), founded by David Thorstad in 1978, is an American organization that advocates for sex with children, working towards the repeal of laws regarding the age of consent and criminalizing adult sexual contacts with minors. NAMBLA campaigns for the release of men convicted of sexual contacts with minors, claiming that they were consensual.² It is important to emphasize, echoing the opinion of M. Beisert, that the concept of positive pedophilia contains an inherent contradiction. The adjective “positive” cannot be applied to a phenomenon listed as a disorder and classified as pathology. The definition of paraphilia itself speaks of discomfort and causing suffering, and this definitional aspect is subject to intervention, aiming to replace the concept of pathology with a state of health (Beisert 2017, p. 44–46). The phenomenon of “positive pedophilia” focuses solely on activities, completely overlooking the consequences of these relationships, which may arise even after many years.

Another term that arises in the context of involving a child in sexual activity by an adult is sexual exploitation, which refers to drawing the child into a sphere of sexual activity that is inappropriate for their stage of development, involving actions that the child does not understand, cannot accept, and which also violate legal and social norms (Bragiel 1998, p. 51). David Finkelhor defines it as involving a minor in any sexual activity by an adult, regardless of motives (Finkelhor 1986). Meanwhile, the Child Abuse Prevention and Treatment Act – CAPTA considers sexual exploitation of a child as inappropriate sexual behavior involving a child, including forms such as touching a child’s genitals, causing a

.....
² https://translate.google.com/translate?hl=pl&sl=en&u=https://en.wikipedia.org/wiki/North_American_Man/Boy_Love_Association&prev=search&pto=aue, [retrieved on: 01.02.2023]

child to touch another person's genitals, sexual intercourse with a child, incest, rape, sodomy, exhibitionism, commercial exploitation of a child. However, it is worth noting that according to this interpretation, the above behaviors will be considered as sexual exploitation of a child only when the perpetrator is a person responsible for the child's care or related to the child (quoted from: Sajkowska 2002). In the case of sexual exploitation, the adult initiating sexual activity with the child holds a dominant position and knowledge, significantly limiting or sometimes preventing the child from making an independent decision. The interpretation of the term "sexual exploitation" does not take into account the male or female perpetrator's personal sexual preferences.

On the other hand, sexual violence is defined in the literature as any sexual contact undertaken without the victim's consent. Forms of sexual violence can include: coercion into sexual intercourse, forcing the other party into unacceptable sexual activities, forcing sexual intercourse with others, sadistic or sadomasochistic forms of sexual intercourse, excessive jealousy, or broadly defined criticism of sexual behavior (Jedlecka 2017, pp. 16–25). Ogólnopolskie Pogotowie dla Ofiar Przemocy w Rodzinie "Niebieska Linia" (Polish Family Violence Helpline "Blue Line") adds that forms of sexual violence also include groping, commenting on anatomical details, assessing sexual proficiency, or appearance.³ Therefore, sexual violence includes behaviors that violate another person's intimacy. Sexual violence against a child, therefore, involves intentional actions of a sexual nature by a person (not necessarily an adult) aimed at causing harm (not necessarily exclusively in the sexual sphere) to the child (Beisert, Izdebska 2012, p. 48 et seq.).

Related, and sometimes synonymous, with sexual violence is the concept of sexual aggression, which can be examined at three different levels: clinical, legal, and social. For a clinician constructing definitions based on theoretical assumptions and empirical research results, the definition of sexual aggression is built upon conceptual elements such as the sphere of action (human sexuality), the essence of the action (involving another person in sexual activity), the manner of action (disregarding the will of the other person), the perpetrator's intention, and the purpose of the action (satisfying the perpetrator). It describes both the internal states of the perpetrator and their external expression, namely behavior. Therefore, for a clinician, aggression can be narrowly defined as actions aimed at the goal of involving another person/people in sexual activity against their will (Beisert 2013, p. 95). For a lawyer, sexual aggression is defined by the type of behaviors related to the broadly understood sphere of human sexuality that are subject to criminalization (Beisert 2013, p. 96). The second definitional issue is related to determining sexual aggression and violence and establishing the relationship between these two concepts because in some works, they are treated

.....

³ Zespół Stowarzyszenia "Niebieska Linia", *Rodzaje przemocy*, niebieskalinia.info [accessed on: 21.07.2022].

synonymously, while in others, they are differentiated. The concept of sexual aggression describes a phenomenon with a destructive nature, emphasizing the intrapsychic regulatory structures of the perpetrator (intentions and emotional states) and specifying a specific sphere (sexuality) to which the internal states and behaviors of the perpetrator relate. This does not mean that the perpetrator's actions must be solely motivated by sexuality (Beisert 2013, p.97).

According to DSM-III R, the difference between sexual aggression against children and sexual aggression against adults was that the former type was classified as a paraphilia, while sexual aggression against adults lacked paraphilic characteristics and was classified as antisocial behavior.

Aggressive behaviors can be instrumental or intentional, and they can also transition from one to the other, making it very difficult to distinguish them in practice. Therefore, as argued by Kubacka-Jasiecka (2001, p. 78), it is justified to present them as a continuum from behaviors that are merely potential, indirectly destructive, contained within natural adaptive tendencies (instrumental aggression), to direct, hostile destructiveness inherent in the sense of identity (intentional aggression). In the case of instrumental aggression, brutal behaviors and the desire to control the environment are perceived subjectively by individuals as the only possible and effective means of achieving their desires, bringing immediate gratification. Intentional aggression, on the other hand, involves hostile behaviors directed against the environment, ingrained in the identity of destructive individuals, and is the result of early traumatic experiences that disrupt the sense of security. Such behaviors stem from deeply rooted hostility, a sense of being harmed, vindictiveness, or indifference to the suffering and harm of others. Indifference to others is also a denial of feelings towards the self (Kubacka-Jasiecka 2001, pp. 68–70).

At this point, it is pertinent to note the so-called predatory aggression, which is discussed in the context of various sexual offenses. Indeed, predatory aggression (which may be underpinned by neurological changes) differs from other types of aggression in that it does not express anger and is not characteristic of behaviors associated with fighting. Instead, it is goal-oriented, precisely targeted, and methodically carried out. The tension associated with this type of aggression decreases when the goal is achieved (Giannangelo 1996, p. 41).

Sexual predators, FSOs (Female sexual offenders)

– terminological clarifications

Sexual aggression, as well as the perpetration of acts related to the sexual exploitation of children, is primarily attributed to men. This is a false stereotype because women are also among those who commit sexual violence. Therefore, accurately defining the concept of sexual violence perpetrated by women may

encounter certain difficulties. Hannah Ford (2006) is among those who describe sexual behaviors that undoubtedly harm children and fall into the category of sexual violence but may not necessarily be defined as such. Such behaviors include, for example, voyeurism, exposing oneself to a child, seductive touching, kissing, and hugging with a sexual undertone, violating a child's privacy during physiological activities, bathing or washing a child despite their ability to do it independently, asking intrusive questions about physiological activities, or excessively focusing on washing the child's genitalia. These described behaviors may suggest inappropriate relationships between the adult perpetrator and the child. Such an approach primarily stems from the fact that the role of a "sexual aggressor" is mainly associated with male behavior, wherein he initiates sexual acts and controls their course. Meanwhile, a woman is perceived as passive, withdrawn, permissive, and incapable of causing harm. Paradoxically, such pattern applies also to a situation where the male is a child and the female – an adult offender. And when the sexually abusive woman's victim is a girl, the environment tends to seek explanation of such behavior as peculiarly understood love and care for the child (Saradjian 1996, p. 13). A paraphilia directly associated with the issue of child sexual exploitation is pedophilia. Research on the occurrence of paraphilias among women is limited as it is challenging to observe symptoms of such behaviors in them. Stating that some women who have committed sexual violence against children reveal deviant sexual fantasies does not authorize the diagnosis of pedophilia or other deviant behaviors typically observed in men who engage in similar acts.

Although pedophilia is not generally diagnosed in women who commit sexual violence against children, some researchers suggest that clinical observations may indicate the presence of certain symptoms of regressive pedophilia (lack of fixation on a child) in women (cf. Nathan, Ward 2001).

Clinical case descriptions of women diagnosed with pedophilia indicate that these women exhibited sexual interest in children for an extended period, engaged in masturbation while fantasizing about children, and revealed specific sexual preferences concerning children in the 3–4 year age range (Chow, Choy 2002, pp. 211–215). The lack of unequivocal diagnostic possibilities for pedophilia in women does not exclude the possibility of the emergence of deviant sexual fantasies related to pedophilia and sexual arousal triggered by these themes among Female Sexual Offenders (FSOs). Mathews, Matthews, and Speltz (1989) found that women they studied experienced sexual arousal during the commission of acts of violence. Interestingly, this arousal diminished when they imagined their victims as adult partners (Mathews et al. 1989).

It cannot be ruled out that sexual arousal and the pursuit of sexual satisfaction by female perpetrators of child sexual exploitation play a significant role in their behavior. Therefore, it is crucial to determine whether the sexual arousal associated with pedophilia will motivate violent behavior towards

children. Research in this area indicates that deviant sexual arousal will be more significant for women acting alone than those who act as accomplices to men (Gannon et al. 2008).

Studies on deviant sexual preferences in women may suggest that the emergence of sexual fantasies with pedophilic themes will be a significant motivating factor for deviant sexual behaviors. Similar to male perpetrators, it may be considered a risk factor conducive to committing sexual assault against children (Rousseau, Cortoni 2010, p. 76).

Speaking of risk factors, which will be discussed more extensively in the next part of the study, it is worth noting significant differences related to various categories of Female Sexual Offenders (FSOs). These differences not only include typologies of offenders that often highlight the motive of the perpetrator's actions but may also suggest varying intensity or significance of risk factors for offenders situated in different categories.

Based on the characteristics of 16 sexual offenders, Mathews, Matthews, and Speltz (1989) describe three main types of offenders: predisposed (transgenerational type), teachers/lovers, and submissive to men. The victims of the first type of offenders are typically their own children. The fundamental characteristic of their behavior is the replication of their own experiences (transgenerationality). They, too, experienced sexual violence in childhood. Offenders described as teachers/lovers choose victims in their teenage years. Unlike the first category, they do not have their own victimization experiences, so they perceive sexual contact with a minor as initiatory experiences allowing the victim to explore their own sexuality. The third category is characterized by a high level of submissiveness to the dominant partner. Fearing rejection from the partner, they decide to participate in the sexual exploitation of the child (Mathews et al. 1991, pp. 199–219). Within the category of offenders cooperating with men, Mathews distinguishes between submissive women and those subordinate to men, and those cooperating with men. Additionally, they also described a type of offender with mental disorders, lacking characteristics of the previously described categories. The category of offenders forced (subordinated) by men was further developed by Nathan and Ward (2001), who suggested that the motivational criterion ambiguously differentiates FSOs who were coerced into collaboration by men. They deemed it justified to distinguish three additional subtypes, including submissive, rejected/vindictive, and willing/submissive victims. In their typology, Nathan and Ward differentiate motivations that reflect either excessive dependence on men or a sense of rejection by the child or partner in favor of the child, causing anger and a desire for revenge on the child. Despite this development of subtypes of offenders coerced by men, Harris (2010) observes that various typologies, including those developed by Sandler and Freeman (2007), Sarrel and Masters (1982), and Vandiver and Kercher (2004), marginalize the involvement of male co-perpetrators as a variable category. The distinction between female offenders

committing sexual exploitation of children independently or in cooperation with men is significant not only for establishing motivation but also for risk factors and the course of their criminogenesis.

Research by Vandiver (2006) conducted among 232 adult women accused of sexually exploiting children showed that women cooperating with men harmed more underage victims than those acting independently. The victims of cooperating offenders were both related and unrelated children, including both girls and boys. The process of their criminogenesis was also more complex, revealing previous convictions for offenses other than sexual ones. Similar findings were made by Muskens et al. (2011), who examined 60 adult female perpetrators of child sexual exploitation referred for psychiatric and/or psychological treatment in the Netherlands. They found that the victims of both independently acting and cooperating offenders were primarily children under the age of 13. Furthermore, like Vandiver (2006), they found that independent offenders more often chose unrelated male victims, while cooperating offenders more often chose female victims, both related and unrelated. However, no differences were observed in the criminogenic course of both categories of offenders. They showed a similar number of prior convictions for sexual offenses, the use of violence, and offenses in other categories. The significant difference lay in the diagnosis of the mental state of both categories. In the category of independently acting offenders, mood disorders were predominant, while in the second category, the spectrum of diagnosed disorders was significantly broader, with a leading susceptibility to borderline personality disorders and dependent personality disorders. These women were more susceptible to manipulation and accepting deviant sexual activity (Muskens et al. 2011). However, there are no significant differences in the observed clinical characteristics of offenders in both categories. Studies have shown similarities in the level of childhood sexual victimization, neglect, intimidation, as well as physical and emotional victimization (Gannon et al. 2008; Kaplan, Green 1995; Strickland 2008). The clinical characteristics in adulthood include sexual and/or physical victimization (Gannon et al. 2008), personality disorders, mental illnesses, substance abuse (Muskens et al. 2011; Strickland 2008; Turner et al. 2008), relationship problems, intimacy deficits, and sexual exploitation (Gannon et al. 2008; Nathan and Ward 2002).

Establishing dynamic risk factors (DRF) and protective factors (PF) as the basis for effective interventions

In the case of each category of sexual offenders, both men and women, it becomes crucial to assess the likelihood of a return to such behaviors. Attempting to estimate the risk of reoffending requires considering the diversity of sexual offenses in which women may be involved as perpetrators. The priority group of

female offenders would be those who have committed contact sexual offenses. Other behaviors lacking direct sexual contact with the victim, while certainly condemnable, do not show significant tendencies towards recidivism. This primarily includes offenses related to disseminating pornography, inducing prostitution, facilitating or profiting from the prostitution of minors, or engaging in new forms of prostitution (research by Sandler and Freeman (2009), Vandiver and Kercher (2004)). Identifying problems, behaviors, or tendencies related to sexual exploitation, especially contact sexual offenses, can guide intervention efforts to reduce the risk of recidivism.

An integral part of risk assessment is determining the type of anticipated behavior (sexual recidivism, sexually violent crime, deceit) and assessing the likelihood of its recurrence (high, moderate, low), as well as the conditions that may lead to such behavior. In this case, both dynamic factors and situational factors related to them should be taken into account (Cortoni, Gannon 2016). These determinations are based on an understanding of static and dynamic risk factors and protective factors. The concept of risk factors should be interpreted as individual characteristics of the offender (or perpetrators) that may increase the risk of criminal behavior. Protective factors, on the other hand, are those that decrease the likelihood of committing another (new) sexual offense. Among the risk factors, a distinction is made between static and dynamic factors, depending on whether they can be altered through targeted interventions. Static factors are related to the life history of the offender, factors that cannot be changed through rehabilitation or therapeutic interventions (e.g., early age of first offense). They can be significant indicators of the likelihood of reoffending; however, changes in the risk level cannot be tracked for these factors. Therefore, they have significantly less importance than dynamic factors, also known as the risk state (in contrast to static risk factors). Dynamic Risk Factors (DRF) can be defined as variables related to individuals and their environment that may suggest a higher risk of criminal behavior. Additionally, among them, stable, enduring weaknesses (e.g., personality traits) and more temporary states have been distinguished, which may constitute acute or direct risk of reoffending (Heffernan et al. 2019). They have a predictive rather than explanatory nature. Their weakness lies in the lack of coherence and specificity. They can encompass various types of variables. It cannot be ruled out that they also form cause-and-effect relationships, but they resemble more generalized categories that include situational, behavioral elements (e.g., viewing child pornography), or psychological aspects (e.g., feelings of loneliness). However, the mentioned lack of specificity means that they cannot be used to determine which potential causes are essential for explaining certain phenomena (e.g., recidivism) (Heffernan et al. 2019, p. 10). However, this does not change the fact that identifying Dynamic Risk Factors (DRF) and managing them in individuals who have committed crimes, especially sexual offenses, is a paramount issue in the development of rehabilitation and therapeutic programs in and outside

prisons. DRFs can also be referred to as “criminogenic needs” (Andrews, Bonta 2000) because they can be seen as potential causes of criminal behavior. These factors are susceptible to change and, as such, can be addressed during therapy or subjected to correctional and educational interventions. Examples of dynamic factors include emotional control issues, sexual preference disorders, accepting criminal behaviors, and deficits in social skills. The literature identifies eight categories of dynamic factors called the “Big eight,” describing causal relationships between these factors and criminal behaviors. These factors encompass various aspects, including manifestations of antisocial behaviors, an antisocial personality profile, preference for antisocial values and behavior patterns, maintaining relationships with individuals exhibiting similar antisocial behaviors, problematic family situations, problematic school or work situations, lack of constructive leisure activities and behaviors, and substance abuse (Andrews, Bonta 2010). For Female Sexual Offenders (FSO), static factors primarily involve those related to sexuality and victimization processes, such as experiencing sexual abuse in childhood, prior commission of contact sexual offenses, selecting unrelated male victims, child abuse, and previous non-sexual criminal experiences. Estimating these factors, given the relatively limited research on female sexual offenders, can be quite challenging. In this regard, it is relatively straightforward to draw on experiences and knowledge related to men committing similar offenses (as done in this case). Studies by Sandler and Freeman (2009) and Vandiver (2007) suggest that static factors predicting recidivism in women and men are generally similar. In particular, previous criminal experiences may indicate an antisocial personality, a characteristic observed in offenders of both genders. However, in the case of dynamic factors, DRFs exhibit greater specificity, although creating a comprehensive catalog of such features is equally challenging due to relatively low rates of sexual recidivism. Female sexual offenders (FSO) may display similar characteristics and properties as male offenders, but these features manifest in different ways specific to women. The catalog of dynamic factors in DRF may include, for example, denial or minimization of criminal behavior, distorted beliefs about sexual offenses and sexual exploitation, emotional deficits in relationships, intimacy deficits, using sex to fulfill emotional needs, passive-dependent personality (Gannon et al. 2008; Nathan, Ward 2002; Saradjian, Hanks 1996). Additionally, deriving sexual satisfaction from interactions with victims or co-offenders, remaining in an intimate relationship with a co-offender, or pursuing instrumental goals such as revenge or humiliation (Gannon et al. 2008; Saradjian, Hanks 1996). This category of factors also includes diagnosed symptoms of pedophilic paraphilia, weakened or severed emotional ties with the family, antisocial personality traits and partner behaviors, social isolation, and substance abuse. These factors indicate personal circumstances that contributed to the sexual exploitation of children and should be the focus of corrective interventions. It is irrelevant whether the offender acted independently or cooperated with a co-offender (Andrew, Bonta 2010).

The second category considered is Protective Factors (PF), which decrease the risk of relapse into criminal behavior and play a significant role in designing corrective actions. They can be used to assess the risk level, achieve treatment goals, eliminate criminogenic needs (Andrews, Bonta 2010), and evaluate the level of rehabilitation and the possibility of continuing further interventions outside prison. In the literature on sexual offending, there are various terms for DRF and PF, but they generally refer to the same scope. Ward and Heffernan capture DRFs and PFs in the following five areas (domains): sexuality, interpersonal relationships, emotion management, self-regulation and attitudes. Family factors and especially family support and positive emotional relationships with family members are worth considering as priorities. Also, having children is a predictor of successful social readaptation.

Taking into account the mentioned domains, it can be stated that a risk factor in the area of sexuality would be significant sexual involvement and engagement (resulting, for example, from a strong drive), while a protective factor would be moderate intensity of sexual drive and maintaining contacts with adult partners, along with the absence of disturbed sexual preferences concerning the object. Another area emphasized by Ward is self-regulation, considered a crucial factor in terms of sexual offending (Ward, Hudson, Keenan 1998). Self-regulation is the “ability to modulate emotions, thoughts, interactions, and behaviors.” It primarily involves self-control (i.e., behavioral inhibition), problem-solving, planning, and goal-directed actions. Risk factors associated with this domain include lifestyle impulsivity, characterized by low self-control, instability, making irresponsible decisions, and issues related to establishing long-term goals (which are limited and unrealistic). These fundamental problems may manifest in a parasitic or chaotic lifestyle, interpersonal conflicts, rule/law violations, substance use, unemployment, and an unstable lifestyle (cf. Ward, Heffernan 2017). Protective factors indicating proper mechanisms of self-regulation include a goal-oriented life, problem-solving skills, engagement in work and/or constructive recreational activities, and maintaining sobriety. Additional factors in this domain encompass self-control, a sense of willpower, and a stronger internal sense of control. In the realm of intimacy (linked to sexuality and interpersonal relationships), a risk factor might be the inability to create emotional closeness with adult partners and a lack of concern for others. Among the protective factors in this area, we can include the ability to create and maintain a long-term emotional and intimate relationship with adult partners, the ability to care for and show concern for others, trust, honesty, acceptance of the other person, mutual trust in the relationship, making the partner in age-appropriate romantic relationships an object of desire who is capable of giving consent and participating consciously in erotic and sexual relations. Furthermore, a significant protective factor will be a low level of conflict in the relationship, preventing the child from being perceived as a more satisfying partner with whom it is easier to reach an agreement. In terms of

emotional aspects, risk factors will include dysfunctional coping mechanisms, feelings of hostility, and resentment, while protective factors will involve the ability to communicate emotions, tolerance, and constructive problem-solving. Regarding presented attitudes, risk factors will encompass attitudes supporting aggression and hostility, Machiavellianism, and non-compliance with rules and norms. Protective factors, on the other hand, will involve attitudes supporting age-appropriate sexual relationships, recognition of the rights of others, trust/forgiveness, and a motivated and optimistic attitude towards difficulties.

A challenge associated with assessing the risk of recurrence of activities related to the sexual exploitation of children by women is the lack of comparative studies allowing for a more comprehensive and in-depth analysis of risk factors. This is due to the low recidivism rate among women in sexual offenses. It is much easier to achieve this goal by referring to studies on male perpetrators of sexual offenses. Therefore, the indicated characteristics of risk and protective factors have a somewhat general nature, but they can still provide significant guidance for correctional interventions.

Conclusions

Although there is a growing number of publications addressing the issue of women sexually exploiting children (FSO), providing a better understanding of the phenomenon, not all questions receive satisfactory answers. For the purposes of social rehabilitation and therapy interventions, it can be valuable not only to analyze the victimization process of the perpetrators (both occurring in childhood and continuing in partner relationships) but also to identify defense mechanisms, tendencies toward risky behaviors (including sexual behaviors), and analyze personality disorders and issues.

References

- [1] Andrews D. A., Bonta J., 2010, *The psychology of criminal conduct*, New Providence, New York.
- [2] Beisert M., 2004, *Modele działania kobiet – sprawców wykorzystywania seksualnego w rodzinie*, „Dziecko Krzywdzone. Teoria, Badania, Praktyka”, 3(2).
- [3] Beisert M., 2013, *Agresja seksualna kobiet*, „Nauka”, 2.
- [4] Beisert M., 2017, *Pedofilia. Geneza i mechanizm zaburzenia*, Gdańskie Wydawnictwo Psychologiczne, Sopot.
- [5] Beisert M., Izdebska A., 2012, *Wykorzystanie seksualne dzieci*, „Dziecko Krzywdzone”, 2(39).
- [6] Brągiel J., 1998, *Zrozumieć dziecko skrzywdzone*, Wydawnictwo Uniwersytetu Opolskiego, Opole.

- [7] Cortoni F., Gannon T. A., 2016, *The Assessment of Female Sexual Offenders*, Wiley-Blackwell, Chichester, UK.
- [8] Chow E. W. C., Choy A. L., 2002, *Clinical characteristic and treatment response to SSRI in a female pedophile*, „Archives of Sexual Behavior”, 31.
- [9] Finkelhor D., 1986, *A sourcebook on child sexual abuse*, CA: Sage Publication, Beverly Hills.
- [10] Ford H., 2006, *Women who sexually abused children*, Chichester, England: John Wiley & Sons.
- [11] Gannon T. A., Rose M. R., Ward T., 2008, *A descriptive model of the offense process for female sexual offenders*, „Sexual Abuse: A Journal of Research and Treatment”, 20.
- [12] Giannangelo S. J., 1996, *The Psychopathology of Serial Murder. A Theory of Violence*, Paeger Publishers, Westport CT.
- [13] Glasser W., 1998, *Choice theory: a new psychology of personal freedom*, Harper Collins Publishers, New York.
- [14] Green A. H., Kaplan M. S., 1994, *Psychiatric impairment and childhood victimization experiences in female child molesters*, „Journal of the American Academy of Child & Adolescent Psychiatry”, 33.
- [15] Harris D. A., 2010, *Theories of female sexual offending*, [in:] *Female sexual offenders: Theory, Assessment and Treatment*, (ed.) T. A. Gannon, F. Cortoni, Wiley, Chichester, UK.
- [16] Heffernan R., Wegerhoff D., Ward T., 2019, *Dynamic Risk Factors: Conceptualization, Measurement, and Evidence*, „Aggression and Violent Behavior”, 48.
- [17] Imieliński K., 1970, *Dynamiczna teoria zbroczeń płciowych*, PZWŁ, Warszawa.
- [18] Jedlecka W., 2017, *Formy i rodzaje przemocy*, „Wrocławskie Studia Erazmiańskie”, 11: Przemoc w prawie i polityce.
- [19] Kaplan M. S., Green A., 1995, *Incarcerated female sexual offenders: A comparison of sexual histories with eleven female nonsexual offenders*, „Sexual Abuse: A Journal of Research and Treatment”, 7.
- [20] Kowalczyk M. H., 2014, *Przestępcy seksualni. Zabójcy, gwałciciele, pedofile i ich resocjalizacja*, Wydawnictwo UMK, Toruń.
- [21] Kowalewska A., Jaczewski A., Komosińska K., 2001, *Przemoc seksualna wobec dzieci w rodzinie*, „Problemy Rodziny”, 61, 4/5/6.
- [22] Krajewski R., 2011, *Przestępstwo publicznego propagowania lub pochwalania zachowań o charakterze pedofilskim*, „Przegląd Sądowy” 6/43/.
- [23] Kubacka-Jasiecka D., 2001, *W poszukiwaniu tożsamości – od agresji potencjalnej do destruktywności*, [in:] *Dewiacje wśród młodzieży. Uwarunkowania i profilaktyka*, (ed.) B. Urban, Wydawnictwo Uniwersytetu Jagiellońskiego, Kraków.
- [24] Lew-Starowicz Z., 2000, *Seksuologia sądowa*, Wydawnictwo PZWŁ, Warszawa.
- [25] Mathews R., Matthews J., Speltz K., 1989, *Female sexual offenders: An exploratory study*, Orwell, VT: Safer Society Press.
- [26] Mathews R., Matthews J., Speltz K., 1991, *Female sexual offenders. A Typology*, [in:] *Family sexual abuse, Frontline research and evaluation*, (ed.) M. Q. Patton, Sage Publications, London.
- [27] Muskens M., Bogaerts S., van Casteren M., Labrijn S., 2011, *Adult female sexual offending: A comparison between co-offenders and solo offenders in a Dutch sample*, „Journal of Sexual Aggression”, 17.

- [28] Nathan P., Ward T., 2001, *Females, who sexually abused children: Assessment and Treatment issues*, „Psychology and Law”, 8.
- [29] Nathan P., Ward T., 2002, *Female sex offenders: Clinical and demographic feature*, „Journal of Sexual Aggression”, 8.
- [30] Podgajna-Kuśmirek M., 2003, *Pedofilia*, Wydawnictwo Uniwersytetu Jagiellońskiego, Kraków.
- [31] Pospiszyl K., 2014, *Przestępstwa seksualne*, Wydawnictwo Naukowe PWN, Warszawa.
- [32] Rousseau M. M., Cortoni F., 2010, *The Mental Health Needs of Female Sexual Offenders*, [in:] *Female sexual Offenders Theory, Assessment and Treatment*, (ed.) T. A. Gannon, F. Cortoni, John Wiley & Sons, London.
- [33] Rubacha K., 2016, *Metodologia badań nad edukacją*, Wydawnictwo Akademickie i Profesjonalne, Warszawa.
- [34] Sajkowska M., 2002, *Wykorzystywanie seksualne dzieci. Ustalenia terminologiczne, skala zjawiska, oblicza problemu społecznego*, „Dziecko Krzywdzone. Teoria, Badania, Praktyka”, 1(1).
- [35] Sandler J. C., Freeman N. J., 2007, *Typology of female sex offenders: A test of Vandiver and Kercher*, „Sexual Abuse: A Journal of Research and Treatment”, 19.
- [36] Seligman M. P. E., Walker E. F., Rosenhan D. L., 2003, *Psychopatologia*, Wydawnictwo Zysk i S-ka, Poznań.
- [37] Seto M. C., 2008, *Pedophilia. Psychopatologia and Theory*, [in:] *Sexual Deviance. Theory, Assesment, and Treatment*, (ed.) D. R. Laws, W.T. O'Donohue, Guilford Press, Nowy Jork.
- [38] Saradijan J., 1996, *Woman who sexually abused children: From research to clinical practice*, John Wiley & Sons, London.
- [39] Saradijan J., 2010, *Understanding the prevalence of female-perpetrated sexual abuse and the impact of that abuse on victims*, [in:] *Female sexual offenders: Theory, Assessment and Treatment*, (ed.) T. A. Gannon, F. Cortoni, Wiley, Chichester, UK.
- [40] Sarrel P. M., Masters W. H., 1982, *Sexual molestation of men by women*, „Archives of Sexual Behavior”, 11.
- [41] Strickland S. M., 2008, *Female sex offenders: Exploring issues of personality, trauma, and cognitive distortions*, „Journal of Interpersonal Violence”, 23.
- [42] Turner K., Miller H. A., Henderson C. E., 2008, *Latent profile analyses of offense and personality characteristics in a sample of incarcerated female sexual offenders*, „Criminal Justice and Behavior”, 35.
- [43] Vandiver D. M., 2006, *Female sex offenders: A comparison of solo offenders and co-offenders*, „Violence and Victims”, 21.
- [44] Vandiver D. M., Kercher G., 2004, *Offender and victim characteristics of registered female sexual offenders in Texas: A proposed typology of female sexual offenders*, „Sexual Abuse: A Journal of Research and Treatment”, 16.
- [45] Ward T., Heffernan R., 2017, *A comprehensive theory of dynamic risk and protective factors*, „Aggression and Violent Behavior”, 37.
- [46] Ward T., Hudson S., Keenan T., 1998, *A self-regulation model of the sexual offense process*, „Sexual Abuse: A Journal of Research and Treatment”, 10(2).
- [47] Warylewski J., 2010, [in:] *Kodeks karny. Część szczególna. Komentarz do artykułów 117–221*, t. 1, (eds.) A. Wąsek, R. Zawłocki, Warszawa.

Netogrophy

- [48] Zespół Stowarzyszenia „Niebieska Linia”, *Rodzaje przemocy*, niebieskalinia.info [dostęp: 21.07.2021].

Legal Acts

- [49] Ustawa z dnia 6 czerwca 1997 r. Kodeks karny, <http://prawo.sejm.gov.pl/isap.nsf/download.xsp/WDU19970880553/U/D19970553Lj.pdf>