

Narratives about Non-Coercive and Coercive Sexuality related by Male Adolescents who have Sexually Offended¹

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[Sexual Offender Treatment, Volume 7 (2012), Issue 1]

Abstract

Aim/Background: Few studies focus on how adolescents who have sexually offended understand sexuality. Therefore, the present study aims to contribute knowledge about sexuality as described by adolescents who have sexually offended.

Material/Methods: In this study, interview transcripts from 45 adolescent males who had sexually offended were analyzed thematically.

Results: Sexual memories from childhood concerned unclear boundaries and experiences of sexual abuse. Sexual memories from adolescence were rarely pleasant. The boys seemed to have a lack of sexual knowledge and they had few confidants to discuss sexuality with. Sexuality was mainly described as unimportant. The boys showed resistance to discussing their own commission of sexual abuse, and feelings of shame were evident in their narratives.

Conclusion: There is a need for more knowledge about the role of sexuality in adolescent sexual offences and how best to help these adolescents experience healthy, non-coercive sexuality.

Key words: Adolescents who have sexually offended, childhood abuse, coercive sexuality, non-coercive sexuality, semi-structured interviews, thematic analysis

Introduction

Although the physical and psychological foundations of sexuality exist in the newborn (Helmius, 2010; Westphal, 2002), sexuality is generally associated with puberty and the sexual development that takes place during adolescence. Through sexual experimentation, the adolescent gains sexual experiences that provide the basis of knowledge and skills regarding sexual interaction, which in turn play an important part in guiding the adolescent in future sexual interactions (Cortoni & Marshall, 2001).

Some individuals develop destructive and coercive forms of sexuality that are expressed in their sexual offending against others, often beginning in adolescence (Cortoni & Marshall, 2001). During adolescence sexual desires, experiences, and attitudes are integrated into the developing sense of self. An individual with a fragile sense of self might interpret and act on sexual desires and experiences in non-adaptive ways. The concept of sexual self-efficacy can be described as an individual's attitude about her or his own sexual ability, knowledge, and skills. Male adolescents who have sexually offended have a lower level of sexual self-efficacy than non-offending adolescents (de Bruijn, Burrie & van Wel, 2006; Johnson & Knight, 2000). Some studies also confirm that these adolescents have lower levels of sexual knowledge than their non-offending peers (de Bruijn et al., 2006; Whittaker, Brown, Beckett & Gerhold, 2006; but see van Outsem et al., 2006 for an exception). Furthermore, adolescents who have sexually offended show a less open attitude towards sexuality than non-offending adolescents (Tidefors, Goulding & Arvidsson, 2011).

Several studies relate early attachment deficits to a propensity to violence and sexual offending (e.g. McCormack, Hudson & Ward, 2002), often explained as the offender's unconscious attempt to compensate for deficits in early childhood (Ward, Hudson & Marshall, 1996; Ward, Hudson, Marshall & Siegert, 1995). A child growing up in a chaotic, abusive, or neglectful environment tends to develop a disorganized attachment style in which fear is the primary emotion. Severely disrupted attachment produces chaotic self-states, and the child develops maladaptive compensatory strategies such as self-control through the control of others. Sexual offending and sexualized control strategies are examples of several possible self-regulatory strategies (Burk & Burkhart, 2003).

Thus, the development of abusive sexuality might originate from early childhood when the earliest important relationships are formed. The infant begins to develop a sense of self from early relations and is engaged in emotional communication with the primary caregiver who plays an important role by mirroring the infant's emotional needs (Bowlby, 1988). Continuous mirroring is needed for the infant's development of self-representations, which are later used by the infant to understand its own and other people's feelings and thoughts, i.e. they are important for the ability to mentalize (Allen, Bateman & Fonagy, 2008; Fonagy, 2001). Language and the ability to symbolize help the child build concepts and reflect upon what is happening and why it is happening; i.e. to change perspective (Keenan & Ward, 2000). Fonagy and Target (1996) propose that maltreatment and trauma undermine the development of the child's mentalizing capacity as the child, in self-defense and self-protection, withdraws from the mental world to avoid reflecting upon painful experiences.

Individuals differ in their ways of coping with traumatic experiences and in their potential to recover. Recovery depends upon the severity of the trauma, the characteristics of the individual, and the opportunity to work through the effects of the experience (Bonanno & Pat-Horneczyk, 2011). However, abuse by someone who the child depends upon and trusts is high in betrayal. Memories of betrayal, such as sexual or physical abuse by a caregiver, may lead to repressed memories (Freyd, DePrince & Zuberger, 2001).

Those who sexually offend develop coping strategies such as denying the offense, diminishing the responsibility by blaming others or certain circumstances, or minimizing the severity of harm to the victim (Marshall, Marshall, Serran & O'Brien, 2009; Ward, Hudson & Marshall, 1995). Marshall et al. (2009) stipulate that low self-esteem leads to a propensity to experience shame, which then blocks the ability to recognize harm. Shame arises from admitting a sexual offence, which leads to feelings of distress and a threat to the person's self-esteem. In this state of mind there is no room left for empathy with the victim (Marshall et al., 2009).

Since sexuality is a life-long force for everyone, it is important to help adolescents who have sexually offended to develop non-coercive sexuality. To accomplish this, knowledge is needed about these adolescents' own views of sexuality. However, to date, few studies have focused on what adolescents who have sexually offended think about coercive and non-coercive sexuality. Therefore, the present study aims to contribute knowledge about sexuality as described by adolescents who have sexually offended.

Method

Participants

Forty-five adolescent males who had committed sexual offences towards children, adolescents, or adults were interviewed. Nine of the 45 boys were voluntary outpatients of the Swedish Psychiatric

Clinics for Children and Adolescents and 36 were placed in institutions (12 by committal and 24 voluntarily).

At the time of the interviews, the boys ranged in age from 13 to 22 years, with a mean age of 16.2 years ($SD = 1.9$). The one 20-year-old and one 22-year-old had committed their offences when they were under the age of 18. At their first offence, 25 of the boys were 14 years old or younger. All interviews were conducted at the beginning of the boys' treatment period.

Almost half of the boys were victims of sexual abuse. Moreover, the boys had a less open attitude towards sexuality than non-clinical groups of male adolescents. About half of the boys had experienced their first act of consensual intercourse at a younger age (median age 13.5 years) (Tidefors et al., 2011) than the average age of 16.8 years for first intercourse for males in Sweden (Lewin, Fugl-Meyer, Helmius, Lalos & Månsson, 1998). More background data for the boys (Tidefors et al., 2011) are described in Table 1.

Table 1: Background data of the participants (N = 45)

Background data	%
Intellectual difficulties	49
Behavioural disorder/acting out	67
Serious truancy	56
Experience of sexual abuse	40
Sexual offender(s) in the family	27
Experience of emotional abuse or neglect	76
Experience of physical abuse	56
Experience of parent's separation	69
Experience of foster-care	40

Procedure

Ethical committees in six different areas in Sweden approved of the study design. Participants were recruited with the help of the staff at the institutions or psychiatric clinics where the boys were patients. First the parents, and then the boys, were fully informed of the purpose of the study and the voluntary nature of participation that allowed the boys to drop out at any time. When both the parents and the boys had signed an informed consent form, an appointment was made for an interview with the first author.

The Interview

The interviews were semi-structured and concentrated on the boys' relationships from childhood to the time of the interviews, and on their sexual histories. The interviews also included questions about how they began to offend sexually, their feelings before, during, and after the offences, their perceptions of the victims and of ongoing offences, and how their offending ended.

Analysis

The transcripts were analyzed according to inductive thematic analyses, a data-driven or bottom-up method, meaning that the material itself generated concepts and themes (Braun & Clarke, 2006). Since the main research question concerned non-coercive and coercive sexuality, the transcripts were first scanned for this information. This was done through reading and re-reading in an open way. Then, the parts of the interview transcripts that covered sexuality were further analyzed. These parts of the transcripts were read multiple times by the three authors separately. To be as open as possible, and to avoid our own preconceptions to influence the process, we discussed how our own presumptions and resistance towards the material could affect our understanding. The data was then coded and a list of ideas for possible structures was compiled. These ideas were discussed and later used when coding the data more precisely. We discussed the different codes and their meanings and agreed that it was suitable to organize the different codes in a time dimension. The coded data extracts were reviewed to investigate whether a time dimension could capture and fit the coded data set. We agreed that it could and labelled the themes: 'Me as a child', 'Me as an adolescent', and 'Me as a perpetrator'. When we organized the data extracts into these three themes, sub-themes were created to give these themes a structure. All data extracts were discussed in relation to the main themes to ensure that the meaning of the themes mirrored the meaning of the data.

When the descriptive analysis of the data was completed, the themes and sub-themes were conceptualized in more psychological terms in an effort to find a deeper understanding of the transcripts. After discussions about how to understand the material, we agreed to use theoretical concepts from attachment theory.

Results

The themes are presented with explanations. The quotations were edited and abbreviated to make them easier to read. Pseudonyms are used and the participants are referred to as 'boys'. An overview of themes and sub-themes is presented in Table 2.

Table 2: Themes and sub-themes related to sexuality

1. Me as a child	1.1 Indistinct boundaries 1.2 Violated boundaries 1.3 Heavy burdens
2. Me as an adolescent	2.1 Lack of knowledge 2.2 Conflicted thoughts and feelings 2.3 Sexuality as something positive 2.4 Sexuality as nothing special

	2.5 Sexuality as something disgusting
3. Me as a perpetrator	3.1 A wish to forget 3.2 Shame 3.3 Detachment 3.4 Attempts to understand 3.5 Reticence and resistance 3.6 Consequences for the future

1. Me as a child

This theme concerns sexual experiences during childhood, i.e. before puberty. These experiences ranged from confusion about sexuality to experiences as severe as sexual abuse.

1.1 Indistinct boundaries. From what the boys said it was obvious that they had met adults who could not keep their sexual emotions to themselves. Boundaries were indistinct in the sense that the boys were exposed to matters they were not mature enough to handle.

For example, one boy watched pornographic movies with his siblings when their parents abused drugs and fell asleep in another room, 'burning out'.

When mum and dad were burning out, we did a lot of shit, we watched blue movies and things like that (Freddy, 15)

Another boy was exposed to his father's 'women stories', and he was also aware of his father's molestation of his sister and a cousin.

Dad was in the kitchen talking to somebody. I went into the kitchen and he said, 'Yeah, if we're gonna have sex, we'll have to lock my boy in a wardrobe /.../ My dad tried, I don't know, he groped my sister and my cousin (Anton, 16)

1.2 Violated boundaries. The boys who had been sexually abused described both concrete experiences and their attempts to handle these experiences.

One boy described a father who abused a younger sister and forced the siblings to have sex with each other. The boy's coping strategy was to use a mantra; he repeated 'sleep, sleep, sleep'. When he was a child he thought that his father's behaviour was normal.

I saw when dad did the abuse /.../ my little sister ... it was difficult, hard. Sometimes he did it to my older sister in our room, when I and my younger sister slept or slept, slept, slept /.../ Sometimes we woke up ... just difficult. Dad wanted us to do things with each other. All kinds of things ... touch each other. I believed it was something all children did ... it was normal when I was a little boy (Erik, 16)

For some boys the abuse started early. When talking about abuse committed by a mother and her new partner, this boy was occupied by how much he remembered of the event.

I was three or four years old, I don't really know. /.../ I remember a little ... not very well, I don't remember. It was revealed because me and my brother had poo-poo in our underpants. Mum, she was also in on it ... they did it to me and my brother at the same time (Henrik, 17)

1.3 Heavy burdens. Experiences of having been sexually abused were painful to talk about. Some boys expressed a wish to escape the distressing emotions related to having been sexually abused. Others claimed that these experiences did not have any impact on them, and that consequently they had no need for professional help.

I don't need any such help. I have no experiences inside me ... I don't remember anything (Erik, 16)

Some boys became angry when they were asked how they felt about having been sexually abused, but some also expressed feelings of hopelessness. Pasa first claimed that the abuse never entered his mind, but later he said that when he remembered, he wanted to escape.

It was so long ago since mum's boyfriend abused me and my brother, it never enters my memory /.../ I felt nothing [angry]. I don't know what I felt, it just happened. I don't need to talk about it. Sometimes the things he did pop up. What should I do? I go out, spend time with my buddies (Pasa, 14)

2. Me as an adolescent

This theme concerns how the boys described themselves and their sexual development during adolescence.

2.1 Lack of knowledge. Few boys remembered discussing sexuality with anyone and none had visited a youth clinic. Instead of being able to understand sexuality in a constructive way through discussions with others, the boys were alone with their questions.

I don't know what my parents think. We don't talk about sex (Elias, 17)

Some boys had vague memories of sex education in school; others had never participated in the lessons.

Maybe we had ... I don't remember, I was never there (Olle, 17)

2.2 Conflicted thoughts and feelings. It was common to be confused because of different views on sexuality. Some boys lived with parents whose views of sexuality differed from that of the majority of Swedish culture. One boy said that his ideals were one thing, but his behaviour when he let '[his] balls' decide was another. He also wished that he had had no sexual experiences.

In the Islam religion, it's illegal to masturbate. I actually think it's wrong to have sex before marriage. People believe that you shouldn't give a shit. But when you're finished fucking, you get a bit scared, but the balls, you know /.../ My parents' view is good. I wish I was a virgin. Of course I want my wife to be virgin. I don't want her to know a lot about sex, I wish I didn't know very much either (Farah, 18)

Confusion might also result from the boys' own ambivalent feelings. Some who had been sexually abused by a male were worried that they might be homosexual. One boy tried to reconcile having had homosexual experiences with his own judgement of homosexuality as abnormal.

I've tried it with guys, but I don't think it's normal. If I'd been gay I would've had to accept it but I hadn't been accepted by my family. Homosexuals are the worst thing they know. I know that I'm not gay (Henrik, 17)

2.3 Sexuality as something positive. Some boys talked positively about the transition from childhood to manhood. The physical changes were exciting, as was masturbation.

I noticed hair growing ... it was exciting, and my voice started to get much darker /.../ masturbating, it's actually nice, or no one would do it (Omar, 14)

However, only a few boys described their experience as positively as the following boy.

We kissed, hugged, rolled around and had fun ... you feel very well liked and you feel love as well (Linus, 14)

2.4 Sexuality as nothing special. The most predominant pattern was to diminish feelings about sexuality. Although the boys were interviewed while going through puberty, or shortly after, many questions about sexuality were answered with 'don't know'.

Puberty? ... nothing special. I don't remember anything (Yngve, 16)

Some boys claimed that they had never, or almost never, thought about sex or masturbated.

Masturbate? I never think about sex. I don't do things like that (Ivar, 15)

The boys' descriptions of their first intercourse experience were probably typical, including fumbling and drunkenness. However, there was a lack of both positive sexual experience and of nuance in their descriptions. To the question of how they had experienced their first intercourse, the boys repeatedly answered that they 'didn't feel anything special'.

I was twelve, I felt nothing special. Then I was together with a girl for awhile, and sex was nice but it was like nothing special (Elias, 17)

2.5 Sexuality as something disgusting. Some boys talked about sex as something they did but did not like. These boys expressed stronger emotions of disgust than the boys who thought that sex was nothing special. One boy who had been sexually abused repeatedly by his mother described feelings of disgust. His coping strategy involved thinking of sexual intercourse as overrated.

Porn ... it disgusts me. I think intercourse is overrated and not all it's cracked up to be quite a letdown if I'm honest (Björn, 22)

Ulf, who talked about a 'family secret' also mentioned disgust, although he minimized what he said by adding that he was 'a bit' disgusted.

We talked a bit about the body and sex ... it was, I don't like talking about those things, I get a bit disgusted (Ulf, 15)

3. Me as a perpetrator

The parts of the interviews that concerned the boys' sexual offences were characterized by a lack of a spontaneous narration; it was evident that this was difficult for them to talk about. The same coping strategies used to discuss being a victim of sexual abuse were used when talking about being a perpetrator.

3.1 A wish to forget. The boys had different variations of not remembering. Remembering was painful and they chose to forget if possible. Some boys thought it was difficult to not remember, although they tried to force themselves to forget. One fourteen-year-old boy said that he did not remember because it was 'long ago'.

I didn't feel anything when I abused my younger brother, I don't remember, if I think about it maybe ... but it was long ago (Axel, 14)

One boy's account of how he dealt with having abused his brother hovered between finding so much to do that he could forget about it and realizing that the experience 'will stay with me for the rest of my life'.

It feels bad that I did that to my brother, I don't think about it so much because I don't

want to think. I have so much to do that I forget it. Sometimes it's difficult, when I do think about it, it happens maybe once a day, oh like shit, you know, it will stay with me for the rest of my life (Sven, 14)

3.2 Shame. Wanting to forget might be a coping strategy used to try to avoid the difficult emotions that were activated. The word shame was repeated in almost every narrative.

I get such thoughts, what the hell have I done? ... force it away ... but yeah it has been shameful (Elias, 17)

A few boys conveyed a feeling of guilt and thereby also an understanding that they had hurt somebody else. One boy's frame of reference was a letter written by his younger brother.

I think, I don't know, but I think that my little brother wrote that he wanted to die. Yes, I would rather want me to die than him (Linus, 14)

3.3 Detachment. It seemed difficult for the boys to describe what had happened and they tried to distance themselves from their own behaviour.

I think it's a bloody sick behaviour. Some things you can understand about yourself, with other things you feel like a bystander (Farah, 18)

Although questions were asked about thoughts and emotions, the boys talked only in non-specific terms such as 'feeling bad'. The emotions that were described were often emotions felt after the abuse. One boy described that he felt 'bloody awful' before the abuse, but that he felt liberated afterwards.

I was twelve the first time and thirteen the second. I felt bloody awful. I don't remember what I thought, it's hard to talk about. The second time ... I felt like shit. It was even worse, but afterwards I felt liberated (Viktor, 16)

The abuse was described as something that inexplicably 'happened' and was unrelated to the person the boy was or had been. There was resistance to talk about the victims and perhaps the boys lacked the ability to fully understand the consequences of their actions. One boy, who experienced the offence as something that 'just happened', added that he thought his actions were unacceptable.

If someone would have asked me if on my way home I would commit a sex crime against my sister, I would have hit the bastard. So I didn't make any plans, it was pure coincidence, or fate (Gustav, 16)

The sexual abuse was even more unfathomable for the boys who had experienced consensual sexual relations.

I thought it was disgusting when we did it. After the first time I had real sex I thought why did I do it with her? (Pasa, 14)

3.4 Attempts to understand. Few boys related their offences to anything that had happened to them earlier in life. However, some boys related their behaviour to vulnerability, a need for revenge, or a need for escape.

Mum and dad didn't listen to me, and I felt powerless. That's what I think. I wanted to take my aggression out on somebody else. It's at least a bit of an explanation (Yngve, 16)

Another boy talked about a home situation characterized by severe deficiency, where everything was 'topsy-turvy'.

It was so-so in the evenings when dad and mum slept. We lived in a bedsit, then we were eight ... it's probably not very common to masturbate with your sister ... everything was topsy-turvyI tried to make it stop, but it just continued (Elias, 17)

A majority of the boys who had committed sexual abuse against siblings or children considerably younger than themselves had a history of being bullied. One boy related the emotion he felt when he was bullied to him 'getting on the wrong track'.

One thing can be the bullying, that felt bad. I tried to find comfort, but in the wrong way. I got on the wrong track like (Åke, 20)

Another boy tried to explain the inexplicable by saying that he had 'two sides'.

Something from inside came out. I have two sides ... one is criminal and sexual and the other, like mum says, is nice, kind, and sweet (Ludvig, 17)

3.5 Reticence and resistance. The boys were reluctant to talk about their own offences. This reticence was evident in the interview situation, but also in the way the boys expressed their doubts about the possibility of treatment leading to anything good.

Reluctance to talk about the offences may have stemmed from the boys' imagined reactions of their important others. Although some boys described strong reactions from their parents when the abuse was revealed, they also said that they never talked to their parents about the abuse after the

initial revelation. One boy who had abused a five-year-old girl described his parents' reactions.

They have really put it aside. I have basically solved it now, by paying the award for pain and suffering. Nothing we talk about any longer (Niklas, 18)

Another boy described feeling relieved after having talked about his offence with the staff at the institution. However, when he thought about confessing to his parents he felt anxious and insecure.

I want to, but at the same time I don't dare to admit to my parents. I don't know if they would still like me if I told them about that (Gustav, 16)

Reluctance to talk about the abuse extended to an unwillingness to talk to a therapist.

Every time I check the diary and realize that it is therapy, I think, is there any reason to continue? Unfortunately, nobody touches my soul (Linus, 14)

Most boys denied that they needed help in dealing with what they had done. One boy's explanation was that his difficulties early in life were impossible to deal with later through talking with a therapist.

They can't help, they just think they can, but you can only do what you want to, what you choose yourself. Somebody else can never make it not happen again ... Maybe if I'd had help when I was little, then it might not have turned out this way (Gaby, 17)

3.6 Consequences for the future. The boys' thoughts about the future in light of their offences ranged from hopeful to pessimistic, with varying degrees of realism. One wish was that the abuse could be forgotten.

When I get home, I'll forget everything and continue with life where it stopped ... to live like normal people (Calle, 15)

Another boy talked about what had happened as something that he could parenthesize, as if his offences could be locked away and forgotten.

It's probably something I'll pack in a bag and it will stay there (Peter, 19)

Others felt that it would remain as difficult in the future to avoid thinking about their offences as it was now. Memories of the offences would follow them in life.

If I hear somebody talk about it, watch news about a little girl who's been raped, it will pop into my head. I'll live with it all my life (Gustav, 16)

Comprehensive understanding

Some boys had been exposed, , to behaviours that were difficult to remember and impossible to understand during childhood. Many talked about a lack of boundaries concerning sexuality or of boundaries that were violated.

Experiences of sexual abuse were difficult to talk about. For most boys, the first time they talked about their own abuse was when their offences were revealed, perhaps because no one had ever asked. Instead, they seemed to have used whatever coping strategies they could devise to deal with the trauma. One strategy was to avoid thinking and talking about the abuse, which was difficult to do since the memories had a tendency to emerge. When the memories emerged they seemed to evoke emotions that were difficult to handle, such as anger, fear, and a sense of powerlessness.

The narratives about consensual sexuality were characterized by a lack of both positive experience and nuance. Either the boys did not have sex at all or they had had sex with many partners. In their apparent wish to portray themselves as normal, they made a point of discussing sexuality as something unimportant.

The narratives about their own offences were marked by the boys' efforts to avoid to thinking and talking about the assaults and their consequences. The boys who did talk about the offences described them as events that were beyond their control. They attributed responsibility for the offences to situational or other factors, but shame was a reoccurring theme in the boys' narratives.

Foremost in the findings was the ambivalence of the boys' feelings about their offences and their difficulty in understanding their own emotions and actions. Few talked about their offences in relation to past abuse or future behaviour. Those who talked about the future in relation to their offences hoped that the offences would somehow disappear and would not influence the future.. Only a few felt that their offences would always be present in their lives.

Discussion

During the analyses unique aspects of each main theme emerged, but common aspects such as unclear or violated boundaries, possible consequences of dysfunctional attachment patterns, and coping strategies also appeared.

The boys' narratives are in line with earlier studies showing that adolescents who sexually offend tend to come from dysfunctional backgrounds (Dent & Jowitt, 2003; Jonson-Reid & Way, 2001) and often use distorted perceptions to cope with their sexual offences (e.g. Marshall et al, 2009). However, our findings complement those with added understanding of how these adolescents try to describe or avoid describing both what has happened to them and what they have done to others.

Parental influence and attachment were important here, but more as harmful threats than protective shelters. Traumatization, often found in adolescents who sexually offend, might lead to traumatic reactions such as dissociation. This could explain some of the features characterizing this group, such as attention problems (Leibowitz, Laser & Burton, 2011). According to Leibowitz et al. (2011), clinical observations such as tendencies to disconnect from feelings and a lack of awareness of the

victim's feelings, i.e. lack of empathy, may also be explained as expressions of dissociation.

The boys in this study seemed to use different strategies to manage life strategies that may have been useful during their own abuse such as minimizing and denial. These strategies, used habitually, could have resulted in tendencies to suppress thoughts and feelings. Another reoccurring strategy was the repression of memories, which may cause a disorganization of the inner world and contribute to severe mental illness later in life (Gold & Elhai, 2007). There may be a relation between different attachment styles and coping strategies; individuals with an avoiding attachment style report a higher degree of somatisation, hostility, and avoidance than individuals with secure attachment. Individuals with a secure attachment style are also more likely to seek support (Mikulincer, Florian & Weller, 1993). This may, to some extent, explain why the boys in this study expressed little hope to get helped through therapy and few positive expectations for relationships.

Different coping strategies were also apparent in their struggles to avoid thinking about their offences. Many boys displayed caution when asked to guess or imagine their victims' thoughts and feelings, perhaps because that would mean approaching painful feelings about the offences and about themselves and their past relationships. It could also be the case that the boys, as a result of early defensive strategies, had deficits in their capacity to mentalize and consequently had genuine difficulty taking the perspectives of others.

Another aspect of avoidance was the boys' wish to forget the offences due to the pain and distress connected with remembering. By simply stating 'I don't know', the boys escaped from further exploration of the subject. They seemed, sometimes, to be aware of their avoidance and make an active choice not to think about the offences. In so doing, they seemed to indirectly admit feelings of pain and/or difficulty surrounding the assaults and express some ability to self-reflect. The wish to lessen the extent of the offences or to reformulate them in a non-abusive way could be understood mainly as unconscious strategies aimed at avoiding having to face reality.

The need to extenuate their offences could also be seen as a compromise between wanting to be truthful, or at least not entirely false, while not revealing the full extent of what they had done. This can be seen as a strategy to detach themselves from painful feelings, most especially shame, provoked by the memories of the offences.

Avoidance was also evident in the way the boys spoke of their offences as if they themselves had had little or no responsibility for their own behaviour. They commonly described the assaults as if a force beyond their control had taken over, using passive phrases such as 'then it started' or 'what happened, happened'. Only rarely did a boy make a link between his past and his present, or explicitly make a link between his experiences as a victim and his behaviour as an offender.

The different coping strategies that became apparent in the interviews did not seem to be favourable for a young person's development. These coping strategies also might say something about their childhoods and possible future vulnerabilities. This indicates the necessity, during treatment, to focus on the internal working models of relationships (Bowlby, 1988) of young offenders in an effort to replace disconnection with connection as a first step towards exploring the development of non-coercive sexuality.

A major obstacle in the prospect of forming any relationship is uncertainty. A sexual relationship requires a degree of vulnerability and risk-taking that can be difficult for anyone, especially for those with low self-confidence (Cook, 2000). The establishment of new intimate relationships and bonds should have been an important part of the boys' lives and conversations because they were in their adolescence. However, few boys talked about friendships or their emotional closeness to others.

In the total population of adolescent boys, the degree of sexual experiences in our study group differed widely. However, about half of the boys had experienced their first consensual intercourse at a younger age (median age 13.5 years) (Tidefors et al., 2011) than the average 16.8 years for males in Sweden (Lewin et al., 1998). An early sexual debut can be interpreted as compensation, filling a need for intimacy that was not fulfilled during childhood. Adolescents who have formed insecure attachment relations with important others often have an early debut because, it is thought, their unfulfilled emotional needs have been transformed into sexual emotions (Kim & Smith, 1999).

These boys' conversational styles and the content of their stories seemed to be marked by their identification as adolescents who had sexually offended. The lack of pleasant memories of sexual experiences was striking and the boys minimized themselves as 'sexual human beings'. Perhaps the majority of the boys had dull sexual experiences and passed through puberty without noticing. It seems more likely that they were afraid that any expression of sexual interest might be interpreted as something related to their offending behaviour. They may have thought that by minimizing their sexual feelings and interests they were giving the 'right' responses to questions during the interview. They may also have met professionals during their assessment whose primary and one-sided focus on their sexual offences taught them to hide other aspects of their sexuality.

In their narratives, the boys seemed to lack both sexual knowledge and someone to talk to about sexual matters. This is in contrast to the results from other Swedish studies that report that a large majority of adolescent boys have a confidant with whom they can discuss sex and other intimate issues (Statens Folkhälsoinstitut/The Swedish National Institute of Public Health, 2000). The high school dropout rate in our group could partly explain their lack of sexual knowledge.

It may be argued that focusing solely on the sexual dimension in these boys' lives is reductive and that this dimension is only meaningful in the context of their relationships in general, how they form relationships and navigate between too much closeness and too much distance. We argue, however, that this group's descriptions of sexuality in general, and their specific sexual feelings, practices, and shortcomings are closely connected to and indicative of their capacities for any sort of relationship. The boys in this study conveyed a fear of the nearness, love, and sexuality that they simultaneously longed for. Behind this fear and avoidance, it was possible to sense loneliness and an ongoing question of how to handle relationships. This indicates a need for interventions to promote sexual esteem and self-efficacy in adolescents who have sexually offended.

A possible limitation of this study might be that the boys were interviewed by a relative stranger. It could be argued that the boys may have been more open and honest if they had had a previous trusting relationship with the interviewer. Efforts were made to reduce this possible shortcoming. The interviews were conducted by a person with several years' experience as a clinician in this field, skilled in talking about different aspects of sexuality, who spent time with each boy before the study interview to develop a rapport and to establish the trust necessary for honesty. However, it is not necessarily the case that the boys would have felt reluctant to talk about this sensitive subject with a relative stranger. On the contrary, it may be easier to talk about difficult events with a stranger (McWilliams, 1999).

Concluding remarks

More needs to be learned about what works in the treatment of adolescents who sexually offend. We need to learn how to create a context where it is possible to help these adolescents work through their childhood and recent experiences and find ways to help them develop and strengthen a healthy and non-coercive sexuality. It seems important to help these boys, often in their early or

middle adolescence, focus on consensual sexuality. Different aspects of sexual offences and different types of sexual offenders need to be studied more deeply and what the offenders themselves tell us about their experiences and behaviours is paramount to developing the understanding that can enable effective treatment.

Acknowledgements

The study was granted by the Swedish National Board of Institutional Care

Note

¹ The study was granted by the Swedish National Board of Institutional Care. The manuscript has not been published and is not under current consideration elsewhere. Ethical committees in six different areas in Sweden approved of the study design (/2003-01-20/Ö711-20). There is no potential conflict of interest.

References

1. Allen, G. J., Fonagy, P. & Bateman, W. A. (2008). *Mentalizing in clinical practise*. Arlington: American Psychiatric Publishing, Inc.
2. Bonanno, G. A. & Pat-Horneczyk, R. (2011). Coping flexibility and trauma. *Psychological Trauma Theory, Research, Practise, and Policy*, 3, 117-129.
3. Bowlby, J. (1988). *A secure base: Parent-child attachment and healthy human development*. New York: Basic Books.
4. Braun, V. & Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative Research in Psychology*, 3, 77-101.
5. Burk, L. R. & Burkhart, B. R. (2003). Disorganized attachment as a diathesis for sexual deviance developmental experience and the motivation for sexual offending. *Aggression and Violent Behaviour*, 8, 487-511.
6. Cook, J. A. (2000). Sexuality and people with psychiatric disabilities. *Sexuality and Disability*, 18, 195-206.
7. Cortoni, F. & Marshall, W. L. (2001). Sex as a coping strategy and its relationship to juvenile sexual history and intimacy in sexual offenders. *Sexual Abuse: A Journal of Research and Treatment*, 1, 27-43.
8. de Bruijn, P., Burrie, I. & van Wel, F. (2006). A risky boundary: Unwanted sexual behaviour among youth. *Journal of Sexual Aggression*, 2, 81-96.
9. Dent, R. J. & Jowitt, S. (2003). Homicide and serious sexual offences committed by children and young people: Findings from the literature and a serious case review. *Journal of Sexual Aggression*, 9, 85-96.
10. Fonagy, P. (2001). *Anknytningsteori och psykoanalys [Attachment theory and psychoanalysis]*. Stockholm: Liber.
11. Fonagy, P. & Target, M. (1996). Playing with reality: I. Theory of mind and the normal development of psychic reality. *International Journal of Psychoanalysis*, 77, 217-233.
12. Freyd, J. J., DePrince, A. P. & Zurbriggen, E. L. (2001). Self-reported memory for abuse depends upon victim-perpetrator relationship. *Journal of Trauma & Dissociation*, 2, 5-17.
13. Gold, S. N. & Elhai J. D. (2007). *Trauma and serious mental illness*. Birmingham: The Haworth Maltreatment and Trauma Press.
14. Helmius, G. (2010). Sociosexuell utveckling i ungdomsåren [Socio-sexual development in childhood and adolescence]. In C. Löfgren Mårtensson & P.-O. Lundberg (red.), *Sexologi*

- (pp. 86-90). Stockholm: Liber.
15. Johnson, G. M. & Knight, R. A. (2000). Developmental antecedents of sexual coercion in juvenile sexual offenders. *Sexual Abuse: A Journal of Research and Treatment*, 3, 165- 177.
 16. Jonson-Reid, M. & Way, I. (2001). Adolescent sexual offenders: Incidence of childhood maltreatment, serious emotional disturbance, and prior offences. *American Journal of Orthopsychiatry*, 71, 120-130.
 17. Keenan, T. & Ward, T. (2000). A theory of mind perspective on cognitive, affective, and intimacy deficits in child sexual offenders. *Sexual Abuse: A Journal of Research and Treatment*, 12, 49-60.
 18. Kim, K. & Smith, P. K. (1999). Family relations in early childhood and reproductive development. *Journal of Reproductive and Infant Psychology*, 17, 133-148.
 19. Leibowitz, G. S., Laser, J. A. & Burton, D. L. (2011). Exploring the relationship between dissociation, victimization, and juvenile sexual offending. *Journal of Trauma & Dissociation*, 12, 38-52.
 20. Lewin, B., Fugl-Meyer, K., Helmius, G., Lalos, A. & Månsson, S-A. (1998). Sex i Sverige: Om sexuallivet i Sverige 1996. [Sex in Sweden: About sexual life in Sweden, 1996.] Statens Folkhälsoinstitut [The Swedish National Institute of Public Health] 1998:11.
 21. Marshall, W. L., Marshall, L. E., Serran, G. A. & O'Brien, M. D. (2009). Self-esteem, shame, cognitive distortions and empathy in sexual offenders: Their integration and treatment implications. *Psychology, Crime & Law*, 15, 217-234.
 22. McCormack, J., Hudson, S. M. & Ward, T. (2002). Sexual offenders' perceptions of their early interpersonal relationships: An attachment perspective. *Journal of Sex Research*, 39, 85-93.
 23. McWilliams, N. (1999). Psychoanalytic case formulation. New York: The Guilford Press.
 24. Mikulincer, M., Florian, V. & Weller, A. (1993). Attachment styles, coping strategies, and posttraumatic psychological distress: The impact of the gulf war in Israel. *Journal of Personality and Social Psychology*, 64, 817-826.
 25. Tidefors, I., Goulding, A. & Arvidsson, H. (2011). A Swedish sample of 45 adolescent males who have sexually offended: Background data, individual characteristics, and offending behaviour. *Nordic Psychology*, 63, 18-34.
 26. van Outsem, R., Beckett, R., Bullens, R., Vermeiren, van Horn, J. & Doreleijers, T. (2006). The Adolescent Sexual Abuser Pack (ASAP) assessment measures – Dutch revised version: A comparison of personality characteristics between juvenile sex offenders, juvenile perpetrators of non-sexual violent offences and non-delinquent youths in the Netherlands. *Journal of Sexual Aggression*, 12, 127-141.
 27. Ward, T., Hudson, S. M. & Marshall, W. L. (1995). Cognitive distortions and affective deficits in sex offenders: A cognitive deconstructionist interpretation. *Sexual Abuse: A Journal of Research and Treatment*, 7, 67-83.
 28. Ward, T., Hudson, S. M. & Marshall, W. L. (1996). Attachment style in sex offenders: A preliminary study. *The Journal of Sex Research*, 33, 17-26.
 29. Ward, T., Hudson, S. M., Marshall, W. L. & Siegert, R. (1995). Attachment style and intimacy deficits in sexual offenders: A theoretical framework. *Sexual Abuse: A Journal of Research and Treatment*, 7, 317-335.
 30. Westphal, O. (2002). Pubertetsutveckling. [Pubertal development]. In P. O. Lundberg (eds.), *Sexologi [Sexology]*. (pp. 29-36). Uppsala: Liber Utbildning.
 31. Whittaker, M. K., Brown, J., Beckett, R. & Gerhold, C. (2006). Sexual knowledge and empathy: A comparison of adolescent child molesters and non-offending adolescents. *Journal of Sexual Aggression*, 12, 143-154.

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