Rape and Murder - Acts of Desire or Disgust?
Narratives by Rapists and Sexual Murderers During Group-Psychotherapy

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Abstract

Aim/Background: Media often portray rapists as monstrous, dangerous men governed by uncontrolled sexual needs. Possible mechanisms behind these offences are seldom discussed. The aim here was to examine how rapists and sexual murderers talked about their perpetrations, how they talked about consensual sexuality, and how these descriptions could be understood.

Material/Methods: The analysis was built upon transcripts from group psychotherapy with four men sentenced to forensic psychiatric care for rape and murder of unknown women. The transcripts were analysed according to thematic analyses.

Results: A recurrent feature was an uncertainty and confusion related to consensual relations. Descriptions of consensual sexuality were mainly used as comparison and explanations for the rapes. Desperation and demanding fantasies dominated before the perpetrations, and the choice of victim was often a coincidence. Feelings of aggression were present before and during the perpetrations. Sometimes, aggression turned to sexual excitement. The opposite was also present; the rape was motivated by sexual urges, which turned to aggression during the perpetration.

Another recurrent pattern was the participants’ difficulties in understanding their own motives and feelings related to the perpetrations.

Conclusions: Rape and sexual murder are complicated acts with a lot of underlying dimensions. Knowledge about what the offenders themselves tell about their perpetrations could be of importance in prevention work and treatment planning.

Key words: group-psychotherapy, rape, sadism, sexuality, sexual murder, thematic analyses

Introduction

Existing research on mechanisms behind the propensity to rape points to different motives such as anger, power, and sadism (Groth & Birnbaum, 1979), and also to the fact that underlying motives vary (Robertello & Terry, 2007). A misconception exists that rape is most often carried out by a stranger, but in actual fact the majority (over 70%) of rapes are committed by someone known to the victim (Woods & Porter, 2008). In the media, rapists and sexual murderers are described as monstrous men governed by uncontrolled and abnormal sexual needs. Mechanisms behind these offences are seldom discussed, and sexual offenders have, during the past 20 years, been demonized like never before. This witch-hunt could be viewed as a backlash after the liberalization movement of the 1960’s and 1970’s (Pfäfflin & Eher, 2003).

Focus here was the experiences of consensual versus non-consensual sexuality, as told by rapists and sexual murderers themselves. The material used consisted of transcripts from group-therapy with four men who had attacked, raped, and killed unknown women.
Concept and diagnose

Criminal laws try to establish what discriminates non-consensual from consensual sexuality. In the Swedish Penal Code the definition of rape has been revised several times with attempts to integrate new knowledge and to take into account the voice of the women's movement (Swedish Government Official Report, 2001).

Rape is used as a legal term, not a diagnostic/clinical one. Thus, rape is not defined in the Diagnostic and Statistical Manual IV (DSM-IV), which for example paedophilia is. The DSM-IV diagnoses fitting some rapists is sexual sadism, defined as recurrent intense sexual arousal, fantasies, sexual urges, or acts where the psychological or physical suffering of the victim is sexually exciting. Further, that the fantasies, urges, and behaviours cause clinically significant distress or impairment in social, occupational, or other important areas during at least six months.

According to the DSM-IV, about 10% of known rapists meet the criteria for sexual sadism, but different studies report different figures. Groth and Birnbaum (1979) report that 5-10% of rapists offend in a sadistic way, but for example Fedora et al. (1992) claim that this figure is underestimated. The criteria of sexual sadism often relate to acts such as humiliation, ritualistic behaviour, cruelty or torture, and careful pre-planning, not to the individual, which leads to a confusion concerning diagnosis. The DSM-criteria "sexual arousal", is a crucial one to be investigated through clinical interviews aimed at deciding a diagnosis (Marshall & Hucker, 2006). Marshall (2007) suggests describing each individual in terms of his behaviour and rating the characteristics on a scale from normal to seriously problematic, instead of valuating according to the criteria of DSM IV.

In an overview four different types of rapists were described: compensatory, sadistic, power/control, and opportunistic. The underlying motivation of the power/control and opportunistic rapist is non-sexual while the motivation of the compensatory and sadistic is of a sexual nature; the sadistic rapist obtains sexual gratification through the victim's pain and fear (Robertiello & Terry, 2007). Hazelwood and Warren (1995) emphasize the importance to study sexual fantasies behind sexual violence; separating between the impulsive and the ritualistic rapist. The impulsive rapist seems to be largely unmotivated, or at least unaware of, sexual fantasies, however, the ritualistic rapist seems to be more specific in his motives trying to recreate a situation from his fantasies.

The number of murders involving sexual activity is difficult to access. To label a murder as a sexual one relies on unreliable information such as what the perpetrator tells or evidence of sexual activity from the crime-scene (Arndt, Hieptas & Kim, 2004; Milsom, Beech & Webster, 2003). A categorization of sexual murders described by Schlesinger (2007) is the catathymic motivated by feelings of inadequacy influencing sexuality versus the compulsive, which is characterized by a fusion of sexual and aggressive drives; the violent act itself is sexually arousing. In addition to this, Arndt et al., (2004) describe different groups of sexually motivated killers; those motivated by lust, sexual-sadistic killers, lust murderers, necrophiles, and those who kill to avoid detection of rape. Those motivated by lust, constitute a group who mostly choose strangers and female victims, and the majority use hands-on methods in killing, which is slow and controllable. Lust murderers are characterized by the sexual gratification aroused by killing, whereas the sexual-sadistic killer gets pleasure from experiencing the victim's physical suffering.

Theoretical explanations

This study focused on what rapists and sexual murderers themselves could tell. Theories can, if data fits theory, function as a way to create meaning. Psychodynamic theories are part of a
tradition, functioning either as a foundation or as something to be critically rejected. Within this theory perversions are discussed, while acts such as rape, however, are scarcely mentioned. An explanation could be that patients have withheld such behaviour and the lack of analytical material has led to a neglect of non-consensual sexuality. Examples of theoretical reasoning are those of Socarides (1988) and Stoller (1986). A shortcoming is that the development of "perversion" is discussed only as a male possibility. McDougall (1995) is an exception, focusing on common features in both consensual and non-consensual sexuality, irrespective of gender.

Socarides (1988) differentiates between early and later grounded perversions. The earlier form is deeply structured and a severe and uncontrolled anxiety arises if the perverted act fails. A primary female identification consists and specific traumas lead to the direction of the perversion. The perversion constitutes a way of solving the identification with the mother and to preserve closeness without fear of absorbing. According to Stoller (1986), the perpetrator has been exposed to violations of his identity as a boy. This creates confusion, a lack of trust, and doubts in ones' own ability. The perversion constitutes a desire of revenge, including a need for power and control, and is consequently an act of hostility. The perversion becomes nothing more than a tragic repetition; fruitless attempts to take control over the inner complex of problems through control of others. Stoller (1991) points to the disparity between psychodynamic theories versus stories told by individuals with own experiences, which stories have scarcely been heard, and concludes that "Only then should we turn on the advanced-theory machine" (Stoller, 1991, p. 5).

A model that includes much of Stoller's reasoning is Hickey's Trauma-Control Model (Arndt et al., 2004). This is a conceptual framework to understand killing including sexual activities. The model includes predispositional factors, but the main focus is on the quality of early relations. Maltreatment and traumatization during childhood lead to mistrust, a feeling of worthlessness, and an inability to cope with stress. However, feelings of inadequacy are hidden behind an attitude of self-confidence and self-control. Fantasies including violence, control, and domination compensate feelings of being inferior and can be seen as ritual enactments of the real childhood traumas. These fantasies can turn to reality by facilitators such as violence pornography or excessive use of drugs.

A central thought in attachment theory concerns how we, from our experiences of early relations, develop an "internal working model" about future relations. These working models are also named "state of mind" regarding attachment. Several studies relate early attachment deficits with a propensity to violence and sexual offending (e.g. McCormack, Hudson & Ward, 2002). One line of reasoning is that the adult unconsciously, by the perpetration, tries to compensate deficits from early childhood. Attachment patterns can thus become a theoretical frame for classification (Ward, Hudson, Marshall & Siegert, 1995; Ward, Hudson & Marshall, 1996). A child growing up in a chaotic, abusive or neglectful environment will tend to develop a disorganized attachment style, and fear will be the primary emotion. Severely disrupted attachment will produce chaotic self-states and the child develops maladaptive compensatory strategies; self-control through the control of others. Sexual offending and sexualized control strategy are two of several available self-regulatory strategies (Burk & Burkhart, 2003).

Some attachment studies try to distinguish different sub-types of sexual offenders and in these studies offenders of physical violence are often included. In a comparison between child molesters, rapists, and batterers according to attachment in romantic relationships, rapists and batterers showed the same pattern; a dismissive attachment style (McCormack et al. 2002; Ward et al., 1996). Taking different aspects of insecure attachment into consideration, child molesters display an insecure state of mind with pre-occupation of relations, whereas rapists display an insecure state of mind with dismissing of relations. Thus, rapists and batterers are more alike regarding attachment, than rapists and child-molesters are (Stripe et al., 2006). Suggestions have been made that the
attachment system and the sexual behavioural system are interrelated (Marshall & Mazzucco, 1995; Smallbone & Dadds, 2000).

The aim of this study was to examine how rapists and murderers talked about their perpetrations, how they talked about consensual sexuality, and how these descriptions could be understood.

Method

Material/Participants

The analysis was based on transcripts from group-treatment at a forensic psychiatric hospital in Sweden during two and a half years. The participants were four men convicted of sexual crimes and murder. All had more than one crime classification and three were convicted of both rape and murder. Besides sexual crime and murder, no other criminality was documented. The participants were in the age range between 30 and 42 years, when this group-therapy started. Before the group started, they had been in the hospital between two years and three and a half years. During this period, they had undergone individual psychotherapy. The diagnoses for the four participants were: alcohol abuse and immature personality; narcissistic personality disorder; narcissistic personality disorder, antisocial personality disorder and sexual sadism; narcissistic personality disorder, sexual sadism and temporary psychosis. Three were born in Sweden, both parents being Swedish, and one man was born in a North-European country. All had completed nine years in state schools.

The group was led by two psychologists. Therapy sessions took place once a week and each session lasted 90 minutes. The group was half-open; new patients could enter twice a year. However, all four participants had attended the group from the start. The de-masked transcripts from 41 sessions were used as empirical material.

Procedure

The structure within the group-treatment, which had been conducted since the mid 1980's, was quite loose. In the year 2000 two of the psychologists employed at the hospital were given the assignment to start group-therapy with rapists, properly documented and possible to evaluate. The therapy was established from a psychodynamic perspective, with influences of humanistic and existential thoughts. Thus, it was not a program based on a manual; however when the patients wanted to work in a thematic way, the therapists supported this. The patients were fully informed about the purpose of the study, that participation was voluntarily, and that they could drop-out any time they wanted. Thereafter, they signed a consent form. The study-design was approved by the Ethical Committee in Lund, Sweden. All sessions were audio-taped and later transcribed word for word. Due to confidentiality reasons fictive names were used.

Analysis

The transcripts were analyzed according to a combination of inductive thematic analyses, a "data-driven" or "bottom-up" way, meaning that the material itself generates concepts and themes and from theoretical thematic analyses, where data is coded from pre-decided concepts and themes, in a so called "top down" way (Braun & Clarke, 2006). The data consisting of 41 sessions, the data corpus, were first scanned to find information concerning non-consensual and consensual sexuality. This was done through reading and re-reading to see if there was anything that could be useful for the research question. During this reading we tried to put our own imaginations about sexuality and relations aside through discussing how our own presumptions and resistance could
affect the understanding of the transcripts. The chosen parts from the data corpus, i.e. the transcripts, constituted the data set being analyzed. Thereafter, the data set was coded without trying to fit data into a pre-existing frame and a list of ideas was noted. These ideas were discussed and used thereafter in coding the data set with an aim of covering the whole data set. In sorting the different codes and in trying to understand the meaning of these codes, it was noticed that all codes did not fit into the themes non-consensual and consensual sexuality. After discussions, two additional themes were added: One concerned fantasies and imaginations related to consensual and non-consensual sexuality and the other concerned the participants’ attempts to explain and understand their perpetrations. The coded data extracts were reviewed using these new themes together with the two initial themes. These four themes captured and fitted the coded data set and were labelled "Consensual relations and sexuality", "Non-consensual sexuality", "Imaginations", and "Explanation and understanding". When organizing the data extracts into the four themes, sub-themes were created to give a structure to the themes. All the extracts were discussed in relation to themes, checking that the meaning was not displaced. Finally, the extracts were reviewed in order to choose the examples which best captured the essence of each theme and sub-theme.

Results

The themes are presented with explanations, sometimes relating to theories and earlier studies, summaries, and quotations showing the relation between data and themes. The quotations were edited and abbreviated to make them easier to read. Assumed names were used and when referring to all participants the terms "participants" or "men", were used. The // sign marks that quotations steamed from different parts of the transcript. A short presentation of the four men will be included to facilitate understanding and an overview of themes and sub-themes is presented in table 1.

<table>
<thead>
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<th>Table 1: Themes and sub-themes</th>
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| 1. Consensual relations and sexuality | 1.1 How to behave  
1.2 Parallel and different stories  
1.3 To get rid of unpleasant feelings |
| 2. Imaginations | 2.1 A venue for the allowed and the forbidden  
2.2 A wish to be understood |
| 3. Non-consensual sexuality | 3.1 From fantasy to reality through planning  
3.2 Desperation  
3.3 A bridge between |
1. Consensual relations and sexuality

This theme concerned the participants longing for love and their experiences of consensual relations, which all of them have had.

1.1 How to behave. Several studies describe sexual offenders' difficulties in close relations. Hermstad (2006) discuss the offenders' lack of love in combination with a longing for love, comfort, and support. But love, closeness, and sexuality are also dangerous since they uncover vulnerability.

I'm longing for a family but as soon as a woman gets close to me, I reject her, don't want to have false hopes, I prefer to reject them. (Bob)

I want to love somebody for real and to be loved, to find the right one be honest,
get old together with. There is an empty space in my heart. (David)

The participants described uncertainty and confusion when they talked about their earlier experiences.

It follows you all the time. When you get older, how the hell do you handle this? I have problems with hugs, closeness never had any experience of that from my upbringing. When you were supposed to cuddle a girl, I always thought 'How the hell will this go?' 'How do you do as an adult?' (Charlie)

Bob was afraid that if he had rough sex he would fall into pieces and tell the truth about himself.

The other wants you to be rough, but you're afraid you will lose your inhibitions, the walls will tumble down, she will find out all, also the hidden history. (Bob)

1.2 Parallel and different stories. Sexual murderers are found less likely to be involved in a relationship at the time of their offences (Oliver, Beech, Fisher & Beckett, 2007). This was not the most common pattern here; the men had raped unknown women while living with a partner and they described two separated lives. However, to live two separated lives could be related to the high degree of emotional loneliness characterizing sexual murderers (Milsom et al., 2003).

I had one face towards the family and one who lived with me in the biggest secrecy. My little world, an aid to make me feel better a kind of double life. No one in my family could ever imagine that I had committed this kind of crimes. (David)

Milner and Webster (2005) describe rapists' assumptions of women as hostile and distrustful and Marshall and Moulden (2001) that the hostility towards women is freely expressed in the perpetrations. The participants came back to the impossibility of hurting a woman they know and they ascribed aggressive feelings towards unfamiliar women.

I didn't dare to say anything to women I lived with, but I give vent to totally unknowns it was the easiest way for me. (David)

1.3 To get rid of unpleasant feelings. The participants had used sex in consensual relations for example to reduce anxiety. They expressed little about mutuality and more about what they needed themselves. Sometimes, the partner wanted the same.

When one has much anger inside and anxiety the girls I was living with, we had intercourse four times a day. Full throttle, to unload, horny all the time. She was on to it; she was the same, also stressed. (Adam)
2. Imaginations

The link between, on the one side, sexual fantasies and consensual sex, and on the other side between fantasies and perpetrations was discussed.

2.1 A venue for the allowed and the forbidden. The participants struggled to describe their sexual fantasies and how these both were and were not related to consensual sex at the same time.

I haven't dared to ask girlfriends. Fantasies you want to have in a normal relation get stronger when you are feeling bad, easier to turn to fantasies. (Charlie)

Don't think you have one fantasy about your girlfriend and another out there. My fantasy includes killing a woman, but it's perhaps not a fantasy you should act out with a girlfriend. // If the fantasy doesn't come out it can become a crime instead. You put it on another person. I think its quite sweeping, my fantasies haven't agreed with things you can do in real life. (Bob)

2.2 A wish to be understood. One theme in the fantasies was that the victim should have a wish to give the man what he wanted. They longed to "really be seen", but also for a victim who took over, took care of, and gave the man what he needed. The men reacted with disappointment and anger, although it was obvious that the dreams were unrealistic.

Wish it was on her conditions, like in normal life, her conditions not mine. Longed for emotional physical contact. That she should be interested and take the commando over me, she should be the pushing one. But reality, that's totally different. I exposed me once, hoped to have intercourse on the victim's free will. And all breaks through, she will not give me this and I must have it to feel better. (Bob)

To be seen, confirmed as who you are. That you are a human being you haven't been seen as a human being. Remember one occasion. I exposed myself to two women. 'See me, touch me' 'What is this all about? I want to be seen for who I am. (Charlie)

3. Non-consensual relations

Offenders' own descriptions of what takes part in the "meeting" where one individual forces his sexuality on another individual, is seldom the focus of research (Tidefors Andersson, 2002). The men described how the fantasies proceeded and turned into plans on how to rape. They also described their feelings before and during the perpetrations and their thoughts about the choice of victim.

3.1 From fantasy to reality through planning. The participants described how their reoccurring fantasies became more and more demanding until they were acted out.

Sex in my most hidden fantasies only with unknown women, the sadistic sex, to control and humiliate. I want to get some sort of, at least in my plans, humiliation. In the beginning I was after sex, but my plan developed and developed. I wanted the
worst kind of humiliation or suffering and that the woman absolutely didn't want to have sex. (David)

The men discussed the illusion of the perfect rape or the ultimate way to rape. This idea was a result after a rape not "well performed", thus these fantasies included a lot of planning.

I had plans how to perform the first crime. But it wasn't as I had imagined, hence it was a murder. Details about how to strangle, tying wasn't well performed, hadn't humiliated in the way I thought. My next crime, I planned to do it in this way this time, so you can be satisfied up in the head, feel fine in a special way. (Charlie)

However, the planning not only concerned a wish for a perfect rape, it also included strategical aspects such as the right location and how to avoid mistakes.

How you should do, so you get satisfied and don't make any mistakes. You have plans; location, a useful victim that will occur just at that time. (Charles)

3.2 Desperation. Every person is equipped with a drive to survive, and so, even violent acts with socially devastating consequences can serve as means for self-preservation. Handling your own inner disorganization may produce motivation to engage in extreme acts towards others (Burk & Burkhart, 2003). The participants returned to feelings of desperation in their attempt to describe the road to offending.

I only think of desperation. My first murder, tried to get it out of my mind, I'm not allowed to rape or kill. The thoughts disappeared, but came back, stronger, pure desperation, had to go out and commit a crime. Reaching that state something must happen, no matter what. (Charlie)

3.3 A bridge between aggression and sexuality. Aggression was a recurrent theme, not only how aggression was related to the perpetrations, it also concerned aggression in general. Aggression was also present in the sessions and confrontations became sometimes rather intensive. Conflicts appeared between the group members and verbal aggressions were directed towards the therapists. Above all, aggression was expressed towards persons not in the group, for example the staff in the hospital or towards perceived incongruities in the hospital.

The feelings just before or during the perpetrations were described as a flow of aggression, seldom including sexuality. Sexual excitement was instead a consequence of being cruel.

When I threatened her and really had the power over the situation, at least over her I also got very sexually excited. I really let it go ejaculated, because it's a very loaded sexual situation. My biggest sexual 'turn-on' was during the rape, or the hunt, as I used to call it. (David)
The opposite was also present; the rape was motivated by sexual urges, which turned to aggression during the perpetration.

Just met her. We sat drinking coffee, when that surge in the body appeared. She walked around in a nightgown got sexually turned on, just had to have her, started to touch her, ended in her strong resistance. Out of that adversity I became aggressive, beat her up instead she died. (Adam)

3.4 A force impossible to resist. Incitements to rape were to get rid of demanding fantasies and feelings of distress. Torturing thoughts made them desperate and the only way to get rid of these thoughts was to rape and sometimes to kill.

Always felt bad before the crime. It was when it couldn't get any worse started to fantasize how to get my revenge on women, finally I committed a crime. (David)

You have for some time been triggering: 'This is the way I shall do It'. To get rid of it you must do something. Everything breaks into pieces, you must outside. (Charlie)

Some perceived that during periods, feelings of guilt could prevent them from committing new crimes. After a while, other feelings took over; not sexual ones, but rather an inner state of discomfort and the only solution was to commit a new crime.

After a crime I have always felt guilty, thought that I will never commit a crime like that again. But suddenly I feel bad, the thoughts, the fantasies come back. From there it's not a big leap to committing a new crime. (David)

Theories describe the compulsory component in deviant sexuality (McDougall, 1995) and that a severe and uncontrolled anxiety arises if the perverted act fails (Socarides, 1988). Stoller (1986) describes a process which starts with a need to take revenge on own imperfections and encroachments through power and control over others. However, the perpetrations become just a temporary solution and instead turn into a tragic force of repetition.

3.5 Victim by coincidence. Dominating was that victims were chosen by coincidence. To feel bad, or that an occasion occurred, were superior reasons when choosing a victim.

It's not that you chose: 'That's her I'm going to follow and rape'. But in the spur of the moment, whoever comes along. (Adam)

An explanation for the "choice" of an unknown victim is that the attachment bond prevents an extreme sexual aggression (Meloy, 2000). Another explanation could be that the risk to be detected is perceived as lower if the victim is an unknown.
Fear to be revealed, somebody could appear. I hurried up the whole thing and raped her quickly. From a fear to be pointed out, I strangled her. (David)

4. Explanation and understanding

The participants struggled to understand their perpetrations. A recurring pattern was, regardless of what feelings the men related to their perpetrations, that there was no univocal and comprehensible explanation. Thus, the main pattern was ambivalence in the participant's own understanding.

4.1 Ambivalence. The ambivalence concerned if they themselves were able to understand their reasons to perpetrate and if it was possible for others to understand, and perhaps to forgive. Further, the participants were puzzled by the fact that they had "let themselves get caught". This may be interpreted, according to Stoller's (1986) theory about a need for risk taking, as coming close to the own trauma, but another way is to see the risk taking as a wish for the assaults to be stopped.

If you really were a sex maniac you would find ways to never get caught. Nothing I've tried wide open all along. If I really wanted to rape I had found a place where I could have done it peacefully. That's what I think is so sick. (Bob)

The men expressed ambivalence towards their own explanations and feelings. In their head they realized that it was wrong, but not in their heart.

You understand up here but not in your heart really. Because of some mad reason, you can't really understand it; you commit crimes again and again. (David)

4.2 Not about sex. The men mostly related their perpetrations to non-sexual feelings such as aggression or difficulties in being close to others. If the crimes were discussed in a sexual way, they perceived this as an insult.

Why do the staff educate themselves in sexology, what has that to do with me? I haven't committed a crime because I am without sex. I have relationship problems; I think that most psychologists have that education. I wonder: What the hell are the staffs fucking opinion about me? Am I a fucking sex maniac? That doesn't sound right to me, not in my world. (Bob)

4.3 Is it possible to become an ordinary human being? The men had an ongoing struggle to be able to maintain a somewhat acceptable self-image. They asked themselves: "Is it possible to belong to others or am I condemned to always being a sex offender?" To rape and kill was nothing they could put behind and their acts seemed irrevocable.

It sinks in, but you always have to carry it with you. First I was really down, but it subsides, I get emptied. But I don't think it will vanish. That won't happen because
you can't brainwash me. I have murdered a woman, have assaulted a little girl. I know that, yes, that's how it is. (Adam)

Often, the men discussed how others viewed them. The following quotation reflects the capacity to understand others’ feelings and the consequence this understanding had for their feelings about themselves.

It's really hard for people dealing with it. Some maybe dare stop and ask 'How is it?' some maybe say hello and walks on by. You never know how people react deep inside 'I want to be nice and say hello' and when you're gone 'fucking murderer', 'fucking rapist'. How honest are people? Is that 'hello' honest? You start to think 'What the hell have I done, who am I?' (Charlie)

### Comprehensive understanding

Through the therapy sessions, the participants described their feelings and attempts to understand what they had done. They mediated a fear of nearness, love, and sexuality, things which they simultaneously longed for. Behind this fear it was possible to sense loneliness and an ongoing question of how to handle relations. The men mostly talked about themselves, very little was told about their own relatives and friends or the victims and the victims’ families, which could be a reflection of this loneliness. The lack of talk about others could also reflect deficits in the capacity of empathic concern. The longing for affirmation seemed to follow the men as a storyline into the perpetration in their wish for a care-taking victim.

Although the transcripts were rather "empty" concerning feelings and thoughts about consensual sexuality, these men seemed not to have raped because it was the only way for them to get sex. Consensual sexuality was used to reduce unpleasant feelings in a somewhat compulsory way, but the most common pattern was to use experiences of allowed sexuality to compare or to explain the rapes with. Through different quotations a picture emerged, where the men perceived "normal relations" to be on the woman's terms "like in normal life, it is on her terms not on mine" and that they during the perpetration did the opposite.

These men seemed to have feelings and wishes impossible to express in a consensual relation, wishes that were not possible to communicate or explore, and they had impossible wishes concerning the victims. The wishes were put in the fantasy domain, where they "lived their own lives", became more and more violent and impossible to resist. In real life, the men lived two separated lives, but in their fantasies the allowed and the forbidden were able to meet. The participants described their impulses to rape or to kill as something uncontrollable and who was chosen as victim was mostly a coincidence.

One theme dealt with the participants' ambivalence when trying to understand their perpetrations. During the analysis this ambivalence was also present in the authors through difficulties to create non-imbricate themes. Sometimes the offences were described as "not about sex", sometimes sexuality was a motive to rape or that aggressions during the rape became a strong sexual experience. Another contradiction concerned the fact that perpetrations were a result of impulses impossible to resist at the same time as they were well-planed; at that moment you are both desperate and you have plans with you.

The participants' difficulties in understanding their own perpetrations were obvious. Thus, in this
sense these men were like "everybody else". Sexual perpetrations are difficult to understand and hard to put in an ordinarily human context, perhaps due to the fact that it concerns illicit sexuality and is against the law, a sexuality which harms someone else. A common reason for perpetrators to ask for professional help is partly a wish to know what had happened during the offences, partly out of a feeling that the perpetration is impossible to understand (Hermstad, 2006). One of Hermstad's conclusions is that a sexual offence is not carried out with "open eyes".

Discussion

In an overview, four different types of rapists were described (Robertiello & Terry, 2007). In the transcripts such clearly demarcated behavioural characteristics were not found. The men described their perpetrations as sometimes motivated by feelings supposed to be non-sexual, sometimes more as sadistic rape, sexual in its nature. Marshall and Hucker (2006) discuss the difficulties to capture sexual arousal, one of the DSM IV criteria of sadism, through clinical interviews. It was interesting to be able to take part of the discussions among the men themselves and how they, in this context, were able to verbalize thoughts and feelings related to the perpetrations, also sexual ones. A negative consequence of group-psychotherapy, sometimes discussed, is that talks about the perpetrations could stimulate destructive sexual fantasies or provoke sexual excitement. Since the first author had the possibility to return and listen to the minidisks a comment will be made on this. Listening to the recordings, nothing pointed in this direction. On the contrary, pain and disgust was mediated. Further, sexual offenders try to inhibit and suppress all forms of sexual fantasies during treatment, which is unrealistic and may lead to paradoxical outcomes (Gee, Devilly & Ward, 2004). It seems more reasonable to talk about and to work through fantasies during treatment, rather than to suppress them.

Indirectly, the men described sexual thoughts and feelings before the perpetrations or as aroused by the violence during the perpetrations. However, during more direct discussions about motivations to rape, the sexual dimension was perceived as non-existent and even as a humiliation. An example was the participants' indignation about the therapists' studies in sexology. It could not be seen in the transcripts, but the therapist's knowledge in sexology could benefit the men, not to be used working through the perpetrations, but as a tool to try to strengthen allowed sexuality. A recurring and visible story-line was the loneliness and the difficulties the men had had to shape meaningful relationships. Group-therapy can be a place where emotional needs can, to some extent, be fulfilled and where it is possible learning how to relate to others in future. Through the dialog with both other group-members and the therapists, it could be possible to learn more about oneself and find possible answers to one of the men's question "who am I?" Perhaps it will be possible, rather than hiding behind an attitude of self-confidence (Arndt et al., 2004), to get a realistic and secure sense of self based on this knowledge.

Media is partly responsible for supporting misconceptions about sexual offenders and these misconceptions pose a threat for scientific knowledge not to be heard. Today, media supports different populistic thoughts, for example that a perpetrator no longer has a right to take part in society. Of course, as long as an individual could cause danger to another human being, the society has a responsibility to prevent possible future perpetrations. Consequently, finding knowledge about how to predict risk for recidivism is of decisive importance. However, emotional views also affect the legislative process. Compared to attitudes towards other laws, for example the law to use seatbelts, laws regulating sexual offences is mixed with strong feelings and lawmakers are also influenced by these (Edwards & Hensley, 2001).

Another reflection concerns the modern day's predominating perspective on the individual, also found in media, telling us; if you really want you can succeed. Seldom, anything is mentioned about
the relation between individual impairments and the surrounding society. This model could lead to the interpretation that the only reason to do terrible things, is that you are a bad person. Further, to regard another human being as evil, will give us an opportunity to escape our own evilness. Instead, these men can remind us how hard it is to be a human being, how important it is to look inside, and not try to use another individual to achieve an illusion of managing life.

Limitations

To participate in group-therapy could have made it both easy and difficult to reveal sensitive material. The men were detected and sentenced, which could facilitate talking openly, all sessions were recorded, which could inhibit openness. Since this "symptom" is damaging another human being, treatment with sex offenders is likely to have a normative component, which is not a part of interviews for research proposes. A special kind of counter transference might be present in therapeutic work with sex offenders. Scrutinizing the perpetrations may force the professional to question own concepts about "good" sexuality as opposed to "assaulting" (Tidefors & Drougge, 2006). Thus, it is hard to know what is the perpetrators' resistance to talk and what is unwillingness among professionals to ask.

Conclusions

Different aspects of the phenomena of rape need to be studied more deeply and what the offenders themselves tell about their perpetrations is of importance. More needs to be learned about what works in treatment, for example how to create a context where it is possible to work with the perpetrations and simultaneously make ways for allowed sexuality to be strengthened. Group-therapy can also be a place where emotional needs in some part can be fulfilled and where it is possible to learn for the future how to relate to others. Further, knowledge based starting-points can be beneficial in helping to create a functional legal system.

Concluding remark

The men stayed in the group for two years after the recording was terminated. Following this two years, the head of the clinic decided that this treatment was not needed any more although these men still were patients. The main reason was the shift in the politics of justice implying that a higher proportion of rapists and murderers, instead of being treated in forensic psychiatric hospital, should be sentenced to time limited punishment in prisons. In the public eye, this could be seen as the society reacts in an adequate way through sentencing these individuals to several years in prison. However, since it could be supposed that adequate treatment is not available in the prison context, the consequence could be that individuals with extensive need of psychiatric and psychological treatment, will after the years in prison went back to society, without proper treatment.

References

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Acknowledgements

Sincere thanks are due to clinical psychologist Anneli Fryklund, the therapist who stayed with these men, providing continuity during many years of group psychotherapy. Without her collaboration, her open mind, and generosity, this study had not been possible.
The study was financed by a grant from the Research and Evaluation Centre, county council of Kronoberg, Sweden.
The study-design was approved by the Ethical Committee in Lund, Sweden.
The manuscript has not been published and is not under current consideration elsewhere.
There exists no conflict of interest.

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